## HARNETT COUNTY PLAN REVIEW APPLICATION SWIMMING POOLS

Review for Compliance with NC Rules Governing the Public Swimming Pools (15A NCAC 18A .2500)

All items are to be submitted through the Central Permitting Office at 108 East Front St., Lillington, NC 27546 or by mail at PO Box 65, Lillington, NC 27546. You may contact the Central Permitting Office at 910-893-7525, Ext. 2. However, please contact our office with questions regarding the contents of this application.

If you have question, contact one of the following Food and Lodging staff listed below at 910-893-7547:

Gale Violette Greene, RS Food and Lodging Program Specialist Jamie Turlington, RS Environmental Health Specialist

Cindy Pierce, RS Environmental Health Specialist

Plans which are submitted for institutional establishments require plan review to assure compliance with the North Carolina *Rules Governing Public Swimming Pools* (15A NCAC 18A .2500), which is necessary to obtain an operations permit once construction is approved. A plan review fee of \$300.00 must be paid when plans are submitted.

Plans must be submitted with the following supporting documentation:

must be submitted with the following supporting documentation.				
~	Plans must show pool, deck, fencing, and any other appurtenant building.			
	Plans must include drawing showing the placement of equipment in the facility, including any equipment rooms, chemical storage rooms, toilets and bathing facilities, dressing rooms, along with general plumbing, electrical, and mechanical and lighting details.			
_	Piping schematic showing piping, pipe size, inlets, main drains, skimmers, gutter outlets, vacuum fittings and all other appurtenances connected to the pool piping system.			
_	Specifications of all treatment equipment used and their layout in the equipment room, include equipment cut sheets.			
_	Plans must include a site plan locating exterior equipment such as dumpsters or compactors, and indicating the proposed connections to approved sewer and water connections and backwash water disposal.			
~	Plans shall be drawn to not less than one eight inch to the foot scale.			

## PUBLIC SWIMMING POOL DATA SHEET

Name of Pool:	Serenity Amenity										
Location: Piney Grove Rawls Road, Fuquay-Varina, NC 27526 (PIN - 0655-13-4450.000)											
Pool Contractor:		D.Clugston Inc.				Date of Construction		TBD			
1-Pool dimensio	05' 2"	v 04' 0"	Irregular	Chana	6 Fautines	ant Daam					
Pool volume	149,057 G	allone	meguiai	Shape	6-Equipm		of Building				
Surface Area	5,945 SQ				V	Weatherproof Building Well Ventilated					
Bather Load	396 Pers	F1				Sanitary Sewer Floor Drain					
Datrier Load	390 Pers	ons			Ceiling He						
2-Pool Structure	The second second second				7 Chemic	g Height: ft emical Storage Area			_   IL		
2-r ooi Structure	Fiberglass	<b>V</b>	Concrete		7-Chemic	Dry	1	Ventilate	4		
	Gunite		Rounded	corners	8-Circulat			ventilate			
	OtherSp	ecify->	Rounded	comers	Make						
Number of Main			n (2) Fear	ture	Model	Pentair XFE-20		HP	5		
	18") Circulation		(12") Featur		9-Filter				3		
Anti-Vortex	10 / Circulation	<i>J</i> 11	(12) Teatur		Sand	✓ DE		Cartridge			
Number of Retu	rne/ Inlete	24			Make	Penta	ir	Cartriage			
In wall	22	In floor 2			Model		TR-140C				
Size of pipe	24	6" Return Out & Tee to 4"				n Rate (GPM)					
Number of skim	mare										
Overflow gutters	3,500,000	16									
Number of Outle		1				Sight Glass			<u> </u>		
Hair and lint cate		-/				Flow Meter			· ·		
3-Fill spout						Air Relief Valve			· ·		
Location		See SP3 For Autofill Location									
Size of pipe		3/4"				Turnover Rate			N/A 6 Hours		
Other method to	fill	3/4				10-Automatic Chemical Feed					
Back Flow Preve		See Plumbing Plans & SP3			al Hypo Tablet	CCU	Make	VersaChlor			
Source of Water		Inline Autofill		Model Nu		System 3		Versacinor			
4-Deck: Type		Infine Automi		11-Bathhouse/Toilet Room							
Finish		Light-broom Concrete			# toilets, f		6	Floor	1		
Minimum width		See SP1 ft				# toilets, male			-		
Slope		1/4" to 1/2" per 1'0"		<del>                                     </del>		# urinals		drain to sewer-→	1		
✓ Deck di	rains	1/1 10 1	Diving Boa	ards	# lavatorie	26	6	Non-skid			
✓ Hose B		<b>V</b>	Depth Mar		# showers		2	flooring	- V		
Number of ladde		3			12-Wastewater Disposal						
Number of stairs	2				Sewer to -→ See plumbing plans						
Outside rinse sh	Located in Restrooms			Pool overflow & backwash water to-→ Sanitary Sewer							
5-Safety Equipment				1 001 0101	T Dubiting	T Water to	T	7			
Underground lights		1	T			1					
Deck lights		_				1					
Ring Buoy w/ rope		/	11000								
Floating life line		1				1					
Shepherd's crook		1									
Spa timer		,									
Telephone	<b>V</b>										
-								•			

Form completed by:				
Joey Dav	is	Project Manager	03/16/2022	
Name		Title	Date:	

## HARNETT COUNTY AQUATIC FACILITY REVIEW FORM FOR COMPLIANCE WITH THE VIRGINIA GRAEME BAKER POOL AND SPA SAFETY ACT

Complete one from for each pump. For example, circu	lation system, hydrojet, or water reature pump.
Name of Pool/Spa: Serenity Amenity	County: Harnett
Pool/Spa Address:Pine Grove Rawls Rd. Fuquay-Varin	na, NC 27526 (PIN: 0655-13-4450.000)
Pool/Spa Owner: Greenfield Serenity LLC	Owner's Phone:
Owner's Address: 8601 Six Forks Rd. STE 270 Raleigh	, NC 27615-5276
Owner's E-Mail:	Owner's Fax: N/A
Pool/Spa Operator: TBD	Operator's Phone:TBD
Operator's Certification: TBD	
Operator's Address:TBD	
Type of Facility Pool SpaW	Vading Pool Indoor FacilityOutdoor Facility
Other	
Volume of Pool/Spa (gallons) <u>149,057 Gallons</u>	
Type of Suction Outlet and Maximum Flow Rate (c	heck one)
Pump Make and Model Number: Pentair XFE-20 5HI	•
Main Drain(s):	
-Maximum flow rate the system can attain with	h clean filter and all valves open (gpm) 290 GPM Each
And Maximum flow rate with surface skimn	ner/gutter line valve(s) <b>closed</b> (gpm) _210 GPM Each
OR -Specify estimated maximum flow rate for this	system based on hydraulic calculations and pump curve
(gpm)	
☐ Hydrojets, Maximum Flow Rate (gpm)	
□ Spray feature, describe	Maximum Flow Rate (gpm)
□ Slide, describe	Maximum Flow Rate (gpm)
□ Water Feature, describe	Maximum Flow Rate (gpm)
Location of Suction Outlets (check one) Wall	Floor Separate Planes
Anti-entrapment device or system that complies with	th Virginia Graeme Baker Pool and Spa Safety Act
Dual drains spaced a minimum of 3 feet from	edge to edge.
Dual drains located on separate planes.	
Single main drain with Safety vacuum Release	e System that complies with ASME/ANSI A112.19.17 or
ASTM-F2387, provide documentation from	om manufacturer.
✓ SVRS Make and Model AquaStar ES1022S	512001 W/ VLK15T01 (Vacuum Line Fitting w/ Lock Cap)
Gravity drainage system	Dual Drain Single Drain
Unblockable drain, minimum 18" x 23" si	ze Dual Drain Single Drain
Permanent drain disablement	Dual Drain Single Drain

**New Suction Outlet(s)** Provide documentation that cover complies with ASME/ANSI A112.19.8-2007. For custom or large grating, attach verification of field testing by a Registered Design Professional in accordance with ASME/ANSI A112.19.8-2007.

Make and Model Hayward WG1033BHF				
Flow Rate: (gpm) 812 GPM Each	Wall Separate Planes			
Size of Cover 18" Each				
Sump/Pot Vew Installation or Existing	Sump/Pot			
Manufactured (check one)  Make and Model Hayward  Unknown make and model,  Specify Dimensions:	WG1033BHF			
OR Field fabricated, specify dimensions				
Meets the manufacturer's installation instruction for the co	over specified above: Yes No			
Clearance between the cover and the suction outle				
Interior diameter of suction outlet pipe (inches)	Interior diameter of suction outlet pipe (inches)6"			
Maximum anticipated flow rate through the grate	(gpm)420 GPM			
New Equalizer Line Covers: Provide documentation that the cover complies with ASM	E/ANSI A112.19.8-2007.			
Make and Model				
Flow Rate: (gpm) W	allFloor Size of Cover			
OR				
Temporary Disablement of Equalizer Lines (all items required):  All equalizer lines are disabled by plugging the equalizer suction line inside the skimmer pot;  AND All equalizer lines are provided with a cover that is in good condition and cannot be removed without the use of tools.				
Form must be signed by the facility owner and a Pool Operator and Owner				
I hearby certify that the above-referenced swimming pool or spa complies with the Virginia Graeme Baker Pool and Spa Safety Act and the information is correct.				
Owner's Signature	Print Name Brian S. Jacobs			
Title Owner's Representative	Date3.15.22			
Operator's SignatureTBD	Print Name TBD			
Title TBD	Date TBD			