



AUSTIN/TRAVIS COUNTY HEALTH AND HUMAN SERVICES DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES DIVISION
PO BOX 142529
Austin, TX 78714
Phone: (512) 978-3325; Fax: (512) 978-0322



SWIMMING POOL/SPA PLAN REVIEW CHECKLIST

The following items must be included on plans (additional information may be required):

- ☐ Name and physical address of the property at which the pool/spa is to be constructed.
- ☐ Name of the Designer with signature and seal if designed by a Registered Sanitarian, Professional Engineer/Architect or other design professional.
- ☐ Name and phone number of a responsible party or principal contact.
- ☐ Classification of pool, as per TAC Chapter 265; i.e., Class A, B, C or D.
- ☐ A scaled overhead diagram of the pool/spa yard and surrounding area with dimensions, elevations and distances from buildings, emergency phone(s), restrooms, showers, water fountains, water or fill-hose connection(s), etc, as applicable.
- ☐ A scaled overhead diagram of the pool/spa indicating decking, entries & exits, return inlets, suction outlets, lights, skimmers, visual separation bands/demarcations, offset ledges, seat benches, water lounges, zero-depth entries, deck-top "NO DIVING" wording and symbol, water depths, etc.
- ☐ A cross-section diagram of the pool/spa, enclosure, decking, pool/spa entry steps/ladders/recessed treads, etc, with all vertical/horizontal dimensions, including the depth of the pool/spa at various points and depth marker tiles.
- ☐ The volume of the pool/spa in gallons.
- ☐ Construction materials used for the finished pool/spa interior, decking and enclosure.
- ☐ Specify the suction outlet cover(s) or grate(s) and any suction vacuum release or anti-entrapment devices, in accordance with TAC Chapter 265 and the Virginia Graeme Baker Act.
- ☐ Specify the design turnover rate with calculations.
- ☐ Filter type/media specifications and capacity.
- ☐ Specify the method of disinfection.
- ☐ Provide a statement indicating how pool/spa filter backwash will be disposed (as applicable).
- ☐ Enclosures must be designed in accordance with TAC Chapter 265 and TX HSC Chapter 757.

Jurisdiction	Submit Plans and Plan Review Fee to:	# Copies/Sets of Plans Required	Plan Review Fee
City of Austin	One Texas Center/Health Review 505 Barton Springs Road, 2nd floor, Austin, TX 78704	2	\$241
Inter-Local Agreement	Rutherford Lane Campus-EHSD 1520 Rutherford Lane, Bldg 1 <i>Mailing address:</i> EHSD, P.O. Box 142529, Austin TX 78714	1	\$241
Travis County/ Unincorporated Areas	Rutherford Lane Campus-EHSD 1520 Rutherford Lane, Bldg 1 <i>Mailing address:</i> EHSD, P.O. Box 142529, Austin TX 78714	1	\$50

NOTE: A plan review fee shall be assessed for the 2nd re-submittal and for each re-submittal thereafter; i.e., no fee assessed for the 1st re-submittal.

SWIMMING POOL/SPA CODES

- Texas Administrative Code: **Title 25 Chapter 265** Standards for Swimming Pools & Spas
- Texas Health & Safety Code: **Chapter 757** Pool Enclosures
- City of Austin Code: **Chapter 10-7** Pools and Spas
- Travis County (Unincorporated Areas): **Chapter 61.A** Regulations and Permitting of Public Pools and Spas