

**PUMP TYPE**

- Filtration Pump
- Feature Pump



**HEALTH USE ONLY:**

DATE RCD \_\_\_\_\_  
 APP \_\_\_\_\_ DIS \_\_\_\_\_  
 INITIALS \_\_\_\_\_

**Mecklenburg County Health Department**  
**Pool Drain/Suction Compliance Form**

Facility Name \_\_\_\_\_ Pool ID# \_\_\_\_\_

Physical Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**All applicable sections of the form must be completed. Missing or incomplete information will result in a DISAPPROVAL of the submission and denial or suspension of permit.**

**1. Pump System Flow** – Complete EITHER **A or B** below, not both. Max flow taken from pump manufacturer pump curve.

Pump Manufacturer \_\_\_\_\_ Model # \_\_\_\_\_ HP \_\_\_\_\_

A. Maximum Pump Flow \_\_\_\_\_ gpm

B. Maximum Pumping System Flow is reduced to \_\_\_\_\_ gpm

Measured Total Dynamic Head loss of \_\_\_\_\_ feet System Used to Measure? \_\_\_\_\_

Calculated Total Dynamic Head loss of \_\_\_\_\_ feet Calculations \_\_\_\_\_

Flow Reduction with Approved Flow Meter \_\_\_\_\_ gpm How is Flow Reduced? \_\_\_\_\_

Type of Flow Meter \_\_\_\_\_

**2. Main Drain Cover Data** **Pool Exempt:** Gravity Fed Drains and/or Surge Tank  Built Without

Number of main drains on same pumping system \_\_\_\_\_ Distance between drains (on centers) \_\_\_\_\_ inches (“NA” if single drain)

Manufacturer \_\_\_\_\_ Model # \_\_\_\_\_ Date Installed \_\_\_\_\_

Max flow of cover/grate \_\_\_\_\_ gpm (floor); \_\_\_\_\_ gpm (wall) Expiration Date \_\_\_\_\_

**Main Drain Sump Measurements** – For universal cover, provide sump dimensions and diameter of suction outlet pipe

Sump Diameter – Circular: \_\_\_\_\_ Inches – or – Rectangular Dimensions: \_\_\_\_\_ inches by \_\_\_\_\_ inches

Sump minimum depth \_\_\_\_\_ inches Diameter of suction outlet pipe in sump \_\_\_\_\_ inches

Distance of top (inside) of suction outlet pipe from bottom of cover/grate \_\_\_\_\_ inches

\*\* New Construction – Fill out Section **2B Main Drain Cover Data – Sump Information on page 2.**

**3. Equalizer Cover Data** **Pool Exempt:** Gutter  Spray Pad  Built Without

Number of operable skimmer equalizers \_\_\_\_\_

Have the equalizers been disabled per [State Recommendations](#)? YES  NO  NA

Manufacturer \_\_\_\_\_ Model # \_\_\_\_\_ Date Installed \_\_\_\_\_

Max flow of cover/grate \_\_\_\_\_ gpm (wall); \_\_\_\_\_ gpm (floor) Expiration Date \_\_\_\_\_

\*\* Equalizers requiring sump information – fill out **Section 3B Equalizer Sump Measurements on page 2.**

**4. Suction Vacuum Relief System (SVRS)** – Required of drains that are less than 3 ft apart or single main drain

SVRS manufacturer \_\_\_\_\_ Model # \_\_\_\_\_

**5. Vacuum Line** – Choose One Below

\_\_\_\_\_ No vacuum line in pool – portable vacuum or vacuum through skimmers with 2 or less skimmers

\_\_\_\_\_ Pool built prior to May 1, 2010 – Protective cover secured on line (does not protrude >2” from wall)

\_\_\_\_\_ Pool built post May 1, 2010 – Self-closing, self-latching cover designed to be opened with a tool

Name of person completing \_\_\_\_\_ Title \_\_\_\_\_

(PRINT)

Signature \_\_\_\_\_ Date \_\_\_\_\_

Nov 2019



**Mecklenburg County Health Department**  
**Pool Drain/Suction Compliance Form**

**2B. Main Drain Cover Data – Sump Information**

For New Construction Only

**Manufactured Sump**  \_\_\_\_\_  
Mfg. Model #

**Field Built Sump**  Field Fabricated Suction Outlets Shall be Certified by Registered Design Professional under ANSI/APSP/ICC-7 2013 Section 4.3.1.2, Field Fabricated Suction Outlet(s).

**3B. Equalizer Sump Measurements – For universal cover, provide sump dimensions and diameter of suction outlet pipe**

Sump Diameter – Circular: \_\_\_\_\_ Inches – or – Rectangular Dimensions: \_\_\_\_\_ inches by \_\_\_\_\_ inches  
Sump minimum depth \_\_\_\_\_ inches Diameter of suction outlet pipe in sump \_\_\_\_\_ inches  
Distance of top (inside) of suction outlet pipe from bottom of cover/grate \_\_\_\_\_ inches

**Manufactured Sump**  \_\_\_\_\_  
Mfg. Model #

**Field Built Sump**  Field Fabricated Suction Outlets Shall be Certified by Registered Design Professional under ANSI/APSP/ICC-7 2013 Section 4.3.1.2, Field Fabricated Suction Outlet(s).

The Health Department understands that the required information and/or measurements may be beyond the scope of owners or their authorized representatives. In those cases, it is recommended that you contact a qualified engineer or pool professional to assist you in completing the form.

**General Comments:**

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## Instructions for Completion and Submission of Pool Drain Suction Compliance Form

Please review the instructions below to ensure the required Pool Drain/Suction Compliance (PDSC) form or its approved equivalent is properly completed and submitted - detailing all information requested. All submissions will be reviewed and approved/disapproved by Environmental Health. Disapproved submissions will receive notification of reason(s) for disapproval.

1. **EQUIVALENT FORM** – A document which contains the same information requested on the PDSC form and may, or may not, contain a Professional Engineer's (PE) or Architect's sign-off.
2. **WHEN/WHERE TO SUBMIT** – Updated or new PDSC forms should be submitted as soon as possible to ensure timely review. Submissions may be faxed to 704-336-5306, emailed to [katie.rudisill@mecknc.gov](mailto:katie.rudisill@mecknc.gov) or [meckpools@mecknc.gov](mailto:meckpools@mecknc.gov), or mailed to:  
**POOL PERMITTING UNIT**  
**Mecklenburg County Public Health**  
**3205 Freedom Dr., Suite 8000**  
**Charlotte, NC 28208**
3. **WHO CAN SUBMIT** – The owner, operator, or any person representing the owner. New construction must be submitted by engineer or architect.
4. **PUMP SYSTEM FLOW** – If estimating maximum flow from a manufacturer's pump performance curve, attach the pump curve. Various approved pumps can be found on the manufacturer websites or under [Pump Identification with Pump Curves](#) listed at our website.
5. **DRAIN SUMP MEASUREMENTS** – Measurements are needed to determine the size of the cover/grate and to assure the sump is deep and wide enough to meet the requirements in the cover/grate manufacturer's specifications. Information on documenting the size of the drain sump can be found at: <http://ehs.ncpublichealth.com/faf/pti/drainsafety.htm>. For new construction, field-built sumps must be engineer certified.
6. **DRAIN COVER/EQUALIZER DATA** – Enter the manufacturer, model, installation date, lifespan expiration date and maximum flow for the main drain cover(s). Attach the manufacturer's specification sheet. Various approved covers can be found under [VGB Approved Drain Covers and Equalizer Covers](#) listed at our website. For pools that choose to disable their equalizer lines, the pool must follow [State Recommendations](#).
7. **SUCTION VACUUM RELIEF SYSTEMS** – SVRS is required if dual drains are closer than 3 feet on center or a pump has a single drain with a blockable cover or sump. SVRS's are designed to interrupt pump flow if suction outlets are blocked.
8. **VACCUM LINE** – All vacuum lines are required to be covered. Provide specifications for vacuum line.
9. **FORM COMPLETION** – A separate PDSC form must be submitted for each individual pool at a facility including spas, wading pools, and other pools. Pools with multiple pumping systems must submit a form for each system.

**The Health Department understands that the required information and/or measurements may be beyond the scope of owners or their authorized representatives. In those cases, it is recommended that you contact a qualified engineer or pool professional to assist you in completing the form.**

**More information about suction hazards and pool drain safety may be found on the State of North Carolina Public Pool program website at:**  
**<http://ehs.ncpublichealth.com/faf/pti/drainsafety.htm>**