

**Shasta County Department of Resource Management  
Environmental Health Division**

1855 Placer Street, Suite 201, Redding, CA 96001

Telephone (530) 225-5787, FAX (530) 225-5413

**POOL PLAN REVIEW APPLICATION**

New - \$291.77     Equipment Replacement / Remodel - \$72.96

- Fill in all appropriate spaces on the application. Missing information or improperly prepared plans may delay the plan approval process.
- **All existing pools will be checked to ensure that appropriate drain covers comply with ASME/ANSI A112.19.8-2007 performance standards. Therefore, if this is an existing pool, be sure to fill in all information asked below.**
- All Pool plans must be on at least 18"x24" paper, drawn to scale (minimum ¼ inch per foot).
- All Spa and Wading pool plans must be on at least 18"x24" paper, drawn to scale (minimum 1 inch per foot).

Date	Name of Complex			Assessor's Parcel Number		
Job Address			Job City		Job Zip Code	
Owner		Owner Address		Owner State		Owner Zip Code
Name of person submitting plans				Phone		
Pool Contractor		Pool Contractor Address / City		State		Zip Code
Pool Contractor Phone		Contractor Cell Phone		Contractor Fax		
Contractor License Name		Contractor License Number		Contractor License Type		
<b>Type of Approval</b>						
New *	Renovation/Resurface	Equipment Change	Re-plumb	Drain Cover	Other	
Number of: Swimming Pools		Spas	Other Pools	Number of plans submitted		
Dimensions of pool/spa		Length	Width	Depth	Gallons	
Year Built	Drains Split?	Number of Skimmers		Number of Equalizer Covers		
Pump model / hp		Flow rate (gpm)	Suction line size	Return line size	PVC or Copper	
If spa, booster pump model / hp		Suction line size	Return line size	PVC or Copper		
Main drain covers/grates make/model						
Equalizer covers make/model						
What is being done / changed?						
<b>For office use only</b>						
Planning Division Review				Environmental Health Division		
Zoning _____ _____ Use Permitted without Use Permit _____ Use Permitted ONLY with approved Use Permit Date _____ Planner _____				Received by _____ Date _____ Amount _____ Receipt # _____		

\* New construction requires submission of Swimming Pool Construction Application