



CITY OF
FALLS
CHURCH

Important Information

Do Not Discard!

You need this information to get
your pool operating permit for
2019

Please get this packet to the
person responsible for managing
the swimming pool

If you use a pool management
company for your pool, please
get this information to them



CITY OF FALLS CHURCH

May 6, 2018

Dear Pool Owner/Manager,

The time has come again to apply for your annual pool-operating permit from the City of Falls Church. In order to obtain your permit and be able to open your pool on Memorial Day weekend, May 25-27, it is very important you comply with the following procedure and dates.

1. Submit the enclosed application for the operating permit. Payment of the \$85.00 fee is due at the time of application.
2. Contact the City Fire Marshal at 703-248-5058 (TTY 711), no later than May 10, to schedule his inspection. The Fire Marshal will use the keys in your Knox Box to access the pool and inspect.
3. Have your electrical contractor obtain an electrical permit for the annual electrical inspection of the pool. This permit should be obtained, and inspection by the City requested, no later than Friday, May 17. This will allow the City to schedule the inspection during the week of May 20-24. Delaying past May 17 may not allow time for City inspection prior to Friday May 24, which will result in the pool being unable to open for Memorial Day weekend.
4. Apply to the Fairfax County Health Department (703-246-8417 [TTY 711]) for the annual health inspection and pay fees as they require.
5. When everything is complete, the City will issue you a placard that serves as permission to operate your pool for the season. This placard is to be posted where it is visible to the public.
6. In addition to complying with the requirements, you must ensure and remain in compliance with the requirements of the City Fire Marshal and Fairfax Health.

Knox Box Requirement: The City Fire Marshal requires all seasonal pools provide a standard Knox Box with all keys necessary for access to the swimming pool and facilities.

Failure to comply with these requirements and this timeline may result in your being unable to open your pool for the Memorial Day weekend.

At the end of the season, before draining your pool, we recommend you call the Department of Environmental Quality (DEQ), Northern Virginia office at 703-583-3800. DEQ has the final say in whether the discharge needs an individual Virginia Pollutant Discharge Elimination System (VPDES) permit before releasing the water. In any event, do not discharge your pool water into the City's storm water system or onto the street without first dechlorinating and neutralizing (pH 7.0) the water.

If you have any questions about this process please contact the Development Services Counter at permits@fallschurchva.gov or 703-248-5080 (TTY 711).

Harry E. Wells Building • 300 Park Avenue • Falls Church, Virginia 22046 • 703-248-5001

www.fallschurchva.gov



2019 Pool Operation Permit Application

Date _____

PERMIT NO. _____

Required fields are marked with and must be filled in. Please ensure that all required fields have been completed.

ADDRESS OF POOL

Falls Church, VA

Street Address _____ Zip _____

APPLICANT INFORMATION

POOL OWNER'S INFORMATION

<p> Name _____ Phone <input type="checkbox"/> H. <input type="checkbox"/> O. <input type="checkbox"/> C.</p> <p> Address _____</p> <p>City _____ State _____ Zip Code _____ <input type="checkbox"/> A. <input type="checkbox"/> B. <input type="checkbox"/> C.</p> <p>VA State License Number _____ Class _____</p>	<p> Name _____ Phone <input type="checkbox"/> H. <input type="checkbox"/> O. <input type="checkbox"/> C.</p> <p> Address _____</p> <p>City _____ State _____ Zip Code _____</p>
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This application is for a permit to operate a commercial, seasonal pool in the City of Falls Church. The permit will certify the pool is in compliance with the Virginia Uniform Statewide Building Code (VUSBC). It will be valid for the 2019 pool season. To obtain this permit you must have:

- Obtained a permit for the electrical inspection of the pool.
- Had a Virginia-licensed master electrician inspect the pool under this permit. The electrician must complete the City-supplied checklist provided with the electrical permit.
- Passed inspection with the City for the electrical permit.

This pool-operating permit will certify the pool complies with the VUSBC. In addition, to operate the pool you must also:

- Contact the City Fire Marshal's office at 703-248-5058 (TTY 711) and schedule an inspection for hazardous materials storage.
- Apply for a permit with Fairfax Health.

The pool may only operate when it is in compliance with all three agencies.

Check Policy - The City of Falls Church accepts checks as a form of payment. However, should your check be returned to us for any reason, it is our policy to electronically debit your account for the amount of the check plus a processing fee of \$50.00.

I hereby certify the proposed work is authorized by the property owner and I have been authorized by all involved parties to make this application. We agree to conform to all applicable laws, codes, and ordinances of the City of Falls Church.

Signature of Applicant	Date	Address
Print Name	Phone Number	City State Zip Code
E-Mail Address	<input type="checkbox"/> Phone <input type="checkbox"/> e-mail <input type="checkbox"/> Postal mail Preferred method of contact for questions/when ready	

The City of Falls Church is committed to the letter and spirit of the Americans with Disabilities Act. This document will be made available in alternate format upon request. Call 703 248-5080 (TTY 711).

OFFICIAL USE ONLY

Approvals	Permit Fee
<input type="checkbox"/> Electrician's Checklist <input type="checkbox"/> FC Electrical Inspection	<p style="font-size: 1.2em; font-weight: bold; color: blue;">85.00</p> <p style="font-size: 0.8em; color: blue;">(\$87.51 if paid with credit card)</p>

Note to technician: Find the pool permit project created when the electrical permit was issued. Use the POOL HAZ permit on that project to collect this fee. When everything is complete, issue the CO-NC to close the project. Use the CO-NC to print the operating placard.



Community Planning & Economic Development Services

Building Safety Division
300 Park Avenue, Suite 103E, Falls Church, VA 22046
Phone: 703-248-5080 (TTY 711) Fax: 703-248-5214
permits@fallschurchva.gov www.fallschurchva.gov

ELECTRICAL PERMIT APPLICATION

PERMIT NO. _____

ADDRESS OF BUILDING

Street Address _____ Unit # _____ Falls Church, VA _____ Zip Code _____

APPLICANT: [] CONTRACTOR [] OWNER

BUILDING OWNER INFORMATION

Name _____ Phone [] H [] O [] C _____ Name _____ Phone [] H [] O [] C _____

Address _____ Address _____

City _____ State _____ Zip Code _____ City _____ State _____ Zip Code _____

VA State Contractor's License Number _____ Class [] A [] B [] C _____ Expiration Date _____

TENANT/LESSEE INFORMATION [] NONE

Falls Church Customer Number (if known): _____ Name _____ Phone [] H [] O [] C _____

Master Electrician's Name (DPOR Qualified Indiv.) _____ License Expiration Date _____ Address _____

License Number 2710- _____ Contract Price \$ _____ City _____ State _____ Zip Code _____

TYPE OF WORK

Circuits

_____ Circuits

Devices

_____ Fixtures

_____ Switches

_____ Outlets up to 20A

_____ Motors up to 1/4 HP

_____ Smoke Detectors

[] Total # of devices

Special

_____ Outlets over 20 A

Services & Panels

[] New [] Heavy-Up [] Temp

Services: _____ up to 600 A _____ over 600 A

Panels: _____ up to 600 A _____ over 600 A

Generator

[] Generator: _____ KW [] Transfer Switch

Motors over 1/4 HP (list quantity x horsepower)

Electric Heat

[] Baseboard Heat _____ KW

[] Electric Furnace _____ KW

[] Heat Pump Backup _____ KW

Other electric (resistive) heat:

_____ KW

_____ KW

(attach an additional sheet if needed)

Other:

Hard-Wired Appliances (do not include anything that plugs in)

_____ Gas Furnace _____ Stove _____ Other (list) _____

_____ Air Cond. _____ Oven _____

_____ Heat Pump _____ Cooktop _____

_____ Water Heater _____ Dishwasher _____

_____ Humidifier _____ Disposal _____

_____ Dryer _____ Compactor _____

Misc. Items

_____ Signs

_____ Transformers

Periodic Inspections:

[] Annual Comm. Pool

[] Switchgear over 800 A

SIGNATURE

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I hereby certify the proposed work is authorized by the property owner and I have been authorized by all involved parties to make this application. We agree to conform to all applicable laws, codes, and ordinances of the City of Falls Church.

Signature of Applicant _____

Date _____

Address _____

Print Name _____

Phone Number _____

City _____

State _____

Zip Code _____

E-Mail Address _____

[] Phone [] e-mail [] Postal mail

Preferred method of contact for questions/when ready



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OFFICIAL USE ONLY

FEES

Business License: [] Update Verified [] Annualized [] Under check-in threshold [] Owner Permit

Base Permit Fee \$ _____

Review Required: [] Issued OTC, no review required [] Requires Review, routed to Building Official

10% Tech Fee \$ _____

10% Admin Fee \$ _____

2% State Levy \$ _____

Building Official _____

Date _____

Total Fee \$ _____

Approved per VUSBC Only

(fee with 2.95% credit-card fee) \$ _____