



COUNTY OF LOS ANGELES ♦ DEPARTMENT OF PUBLIC HEALTH  
ENVIRONMENTAL HEALTH  
BUREAU OF ENVIRONMENTAL PROTECTION  
RECREATIONAL WATERS PROGRAM  
5050 Commerce Drive, Baldwin Park, CA 91706 – (626) 430-5360



**BULLETIN**  
(Updated February 5, 2010)

**TO: ALL PUBLIC SWIMMING POOL / SPA / WADING POOL OWNERS,  
OPERATORS, CONTRACTORS AND CONSULTANTS**

**SUBJECT: COMPLIANCE WITH CALIFORNIA HEALTH AND SAFETY CODE,  
SECTION 116064.2 (FEDERAL VIRGINIA GRAEME BAKER ACT)**

This law applies to all public pools, spas and wading pools. It applies to those pools located at apartments, condominiums, townhouses, hotels, motels, schools, health clubs, mobile home parks, medical facilities, and includes municipal, resort and community pools.

On October 11, 2009, Assembly Bill 1020 was signed into California State law. This bill adds Section 116064.2 to the California Health and Safety Code. This new section incorporates provisions of the federal Virginia Graeme Baker (VGB) Act into California State law and is intended to prevent suction drain entrapments and drownings.

The new law requires that all public pools be retrofitted with approved drain covers manufactured after December 19, 2008. In addition, every suction drain on a pool must have a split (dual) drain or be equipped with a safety vacuum release system or an automatic pump shut-off system. To see a copy of Assembly Bill 1020 in its entirety, please visit the website at:

[http://www.publichealth.lacounty.gov/eh/docs/ep\\_rw\\_ab1020.pdf](http://www.publichealth.lacounty.gov/eh/docs/ep_rw_ab1020.pdf)

**The Recreational Waters Program will be enforcing the new State law throughout Los Angeles County as follows:**

**By July 1, 2010**, owners of all public swimming pools and spas, **except** those listed below, must submit a “Certification of Compliance” form to Los Angeles County, Department of Public Health, Environmental Health (the Department), verifying that their pool(s) meet all provisions of the new State law. A copy of this form can be found at the end of this document.

**Exemptions from the new state law include:**

- All pools built after December 19, 2008, are exempt from these requirements as they have already been approved by the Department to comply with the new law.
- All pools that have already been retrofitted to meet the new State law are exempt from these requirements. “Already retrofitted” means plans were submitted to the Department and either a final inspection was made by our staff or a “Certification of Compliance” form was filed with the Department.

**Swimming pools and spas with existing split drain(s), however,** must be evaluated by a contractor to ensure full compliance with Requirements (a) through (d) listed below. Additionally, these pools and spas will require retrofitting with new approved drain covers and must comply with Requirements (e) through (h) listed below. Each pool must be evaluated by a licensed California contractor as most will require some type of modification (e.g. drain cover replacement).

**Swimming pools and spas with single drain(s) must be retrofitted with one of the following:**

- Split drains following Requirements (a) through (i) listed below;
- Installation of an approved, “unblockable drain”. (An “unblockable drain” means a drain cover or grate with a minimum dimension of 23 inches x 18 inches OR a channel drain with a height of 3 inches or greater and length of 31 inches or greater.)
- Installation of a safety vacuum release or automatic pump shut-off system. The system must comply with the latest ASME/ANSI A112.19.17 performance standards. Covers/grates will still need to be replaced with approved types. The safety vacuum release or automatic pump shut-off system must be installed per manufacturer’s instructions. To see a list of approved safety vacuum release systems, please visit the following site:  
<http://www.poolsafety.gov/svrsman.html>

**Note: It shall be the responsibility of a public swimming pool owner / operator to perform all necessary future maintenance, testing, and calibration of equipment used in conjunction with the operation of this pool.**

### **Submittal of Plans**

Any person who proposes to build a new public pool; replaster or renovate an existing public pool; makes any plumbing changes to a public pool or spa; drains a pool for any reason; changes drain covers or grates; or makes any equipment changes is required to submit plans to the Department and pay a plan check fee prior to commencing the work. This must be done prior to the issuance of any permits. An online plan check application can be obtained at the following website:

[http://www.publichealth.lacounty.gov/eh/docs/ep\\_rw\\_planapp.pdf](http://www.publichealth.lacounty.gov/eh/docs/ep_rw_planapp.pdf)

Once the plans have been approved they will be returned to you. Within 30 days after completing the work, the contractor is required to complete the “Certification of Compliance” form and return the original copy to the Recreational Waters Program. A copy of the form can be found at the end of this document. A field inspection by the Department will not be required for the VGB modifications. **However, the Department reserves the right to conduct an inspection of any pool that has had a “Certification of Compliance” form submitted to verify compliance; any discrepancies found will require immediate correction and may require closure. All other modifications to public pools and spas, not in conjunction with the VGB requirements will continue to mandate the usual field inspections.**

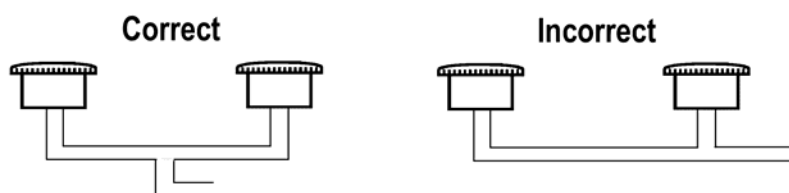
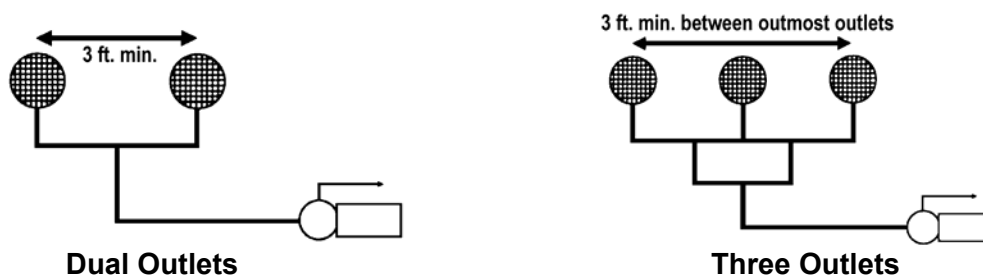
Pools not in compliance by July 1, 2010 may be subject to closure by the Department.

## Only Qualified Contractors Are Authorized to Conduct the Work:

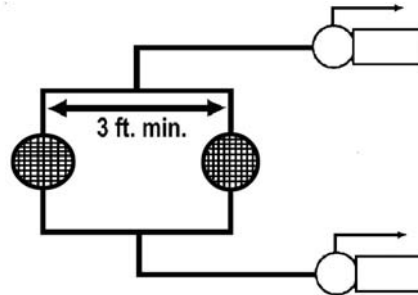
- All persons building a new public pool, replastering, resurfacing, renovating, or replumbing an existing public pool must possess a valid California C53 (pool builder) or an "A" (general engineering) contractor's license. (A C35 (plasterer) is only licensed to replaster a pool).
- Splitting drains or installing an unblockable drain will require a California C53 (pool builder), a California C36 (plumber) or an "A" (general engineering) contractor's license.
- A contractor with a California C61/D35 may replace drain covers, install safety vacuum release systems and evaluate sumps, but cannot modify any sumps.
- **Use of Divers**  
Divers will be allowed to replace drain covers/grates and/or split drains with the following stipulations:
  1. A plan check will be required before the commencement of any work.
  2. The diver must possess one of the valid California contractor's licenses required above.

## REQUIREMENTS:

- a. The suction side of each pump, located on any type of pool, shall be plumbed with at least two suction outlets. Suction outlets shall be separated by a distance of at least 3 feet, measured from the center of one suction pipe to the other. The suction drains must be plumbed with a T in the center that is hydraulically balanced. Each branch of the "T" must be at least the same size as the main suction plumbing. Note: Spas have two separate systems, one for the filtration and the other for the jets. Both systems need to comply with dual drain requirements.



- b. Each branch of a split suction shall terminate under its own suction outlet cover/grate. Except, suction plumbing from two different pumps may terminate under one suction outlet cover/grate if the combined flow rate of each suction pipe is less than the flow ratings of a single cover/grate.



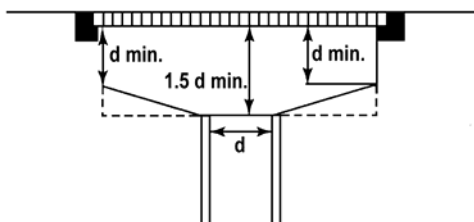
- c. In situations where room on the floor is limited, (e.g. in a spa), the suction outlets may be located less than 3 feet apart, as long as they are located on different design planes (e.g. one drain on the floor and one on the wall or two different walls) and as long as they are offset so a body cannot cover both suction outlet covers\grates. When a suction outlet is located on a wall, the bottom edge of the cover/grate shall be within 3 inches of the floor.
- d. The flow rating of each cover/grate shall be equal to or greater than the flow rating of the pump it is connected to. For example, if a pump is rated at 80 gpm at 60 feet of head, each cover/grate of the split suction must be rated at 80 gpm or greater. If 3 or more suction outlets are used, refer to the table below.

Number of covers/grates per system	Minimum flow rating of each cover/grate % maximum system flow rate
2	100%
3	66.7%
4	50%
5	40%
6	33.3%

- e. All drains/grates will be required to meet the latest ASME/ANSI A112.19.8 performance standards. A list of covers/grates, approved by this Department, can be obtained on our web site at:

[http://publichealth.lacounty.gov/eh/docs/ep\\_rw equip.pdf](http://publichealth.lacounty.gov/eh/docs/ep_rw equip.pdf)

- f. If the suction outlet cover/grate is not part of the manufactured sump and is placed on a field-built sump, the sump must comply with the following dimensions.



**d= inside pipe diameter**

Field built sumps with lesser dimensions will be allowed if the covers have been tested with lesser dimensions and specifically stated in the manufacturer's installation instructions.

- g. All skimmers shall be dual port design. Skimmers shall be vented to atmosphere through an opening in the lid. Skimmers shall be connected to either an equalizer line or a main drain. A main drain connected to a skimmer requires split main drains.
- h. Cover/grate and sump requirements for main drains shall also apply to all equalizer lines, except, the cover/grate is not required to be within 3 inches of the pool floor.
- i. Drain covers shall not be directly in line with diving boards.

### **CONTACT INFORMATION**

For additional information please contact our office at (626) 430-5360, Monday through Friday 8:00 am to 4:30 pm or visit our website at:

[www.publichealth.lacounty.gov/eh/ep/rw\\_main.htm](http://www.publichealth.lacounty.gov/eh/ep/rw_main.htm)

California Department of Public Health  
Compliance Form  
Los Angeles County Environmental Health  
5050 Commerce Dr., Baldwin Park CA 91706 (626) 430-5360  
Anti-Entrapment Devices and Systems  
for Public Pools and Spas

Los Angeles County  
Plan Check Number

Health and Safety Code Sections 116064.1 & 116064.2

**NOTE: Use one form for each pump or multiple pumps under the same drain cover.**

**ALL SECTIONS OF THIS FORM MUST BE COMPLETED**

This form is to be used to verify compliance with modifications pursuant to the new Health and Safety Code sections 116064.1 and 116064.2. Under Section 116064.2 (a) of the Health and Safety Code, effective January 1, 2010, the owner of a public swimming pool shall file this form within 30 days following the completion of construction or installation of anti-entrapment devices or systems in swimming pools. Contact your local Environmental Health Department and Building Department for any necessary plan approval and permits prior to construction or remodel.

**Site Information**

Facility Name: \_\_\_\_\_ **Pool Identification** (if more than 1 pool/spa at site): \_\_\_\_\_  
Facility Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Owner Name: \_\_\_\_\_ Owner's Phone Number: \_\_\_\_\_  
Owners Address \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_  
Pool constructed on or after January 1, 2010? Yes  No

**Pump Information**

Recirculation Pump  Jet / Booster Pump  
Make / Model \_\_\_\_\_ HP \_\_\_\_\_ Make / Model \_\_\_\_\_ HP \_\_\_\_\_  
 Other Pump  Feature Pump  
Make / Model \_\_\_\_\_ HP \_\_\_\_\_ Make / Model \_\_\_\_\_ HP \_\_\_\_\_

**Main Drain ( Includes All Suction Outlets Except Skimmer Equalizer Lines)**

Manufacturer of approved suction fitting: \_\_\_\_\_ Model Number: \_\_\_\_\_ Install date \_\_\_\_\_  
GPM rating: Floor \_\_\_\_\_ Wall \_\_\_\_\_ Installed on  Floor  Wall  
Manufacturer of approved suction fitting: \_\_\_\_\_ Model Number: \_\_\_\_\_ Install date \_\_\_\_\_  
GPM rating: Floor \_\_\_\_\_ Wall \_\_\_\_\_ Installed on  Floor  Wall Main drain/Jet suction pipe size is \_\_\_\_\_ inches.

**Check One:**

- Split main drain(s) (Minimum 3 ft. between covers, hydraulically balanced and symmetrically plumbed)
  - Single drain – Unblockable (size and shape that a human body cannot sufficiently block to create a suction entrapment)
  - Single drain – Not unblockable (one of the following secondary devices required: safety vacuum release system, suction limiting vent system, gravity drainage system, auto pump shut-off system, or other equally or more effective system approved by enforcement agency)
- Type of secondary device installed: \_\_\_\_\_ Install date \_\_\_\_\_  
Manufacturer of approved device: \_\_\_\_\_ Model/Part Number: \_\_\_\_\_  
Safety vacuum release system bears the following performance standard markings:  ATSM F2387  ASME/ANSI standard A 112.19.177

**Skimmer Equalizer Line(s)**

Manufacturer of approved suction fitting: \_\_\_\_\_ Model Number: \_\_\_\_\_ Install date \_\_\_\_\_  
GPM rating: GPM rating: Floor \_\_\_\_\_ Wall \_\_\_\_\_ Installed on  Floor  Wall  
Skimmer equalizer line(s) pipe size were found to be \_\_\_\_\_ inches Number of Skimmers: \_\_\_\_\_

**THE ABOVE HAS BEEN FIELD VERIFIED TO COMPLY WITH MANUFACTURER'S INSTALLATION REQUIREMENTS BY THE INSTALLER**

I declare that I hold an active California State Contractor license # \_\_\_\_\_ with classification \_\_\_\_\_ or California State Professional Engineer license # \_\_\_\_\_, with qualified experience working on public swimming pools and that the information provided above is true to the best of my knowledge. I understand that if I improperly certify this information, I shall be subject to potential disciplinary action at the discretion of the licensing authority in accordance with California Health & Safety Code Section 116064.2.

Contractor/Engineer Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contractor/Engineer Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Contractor/Engineer FAX Number: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor / Engineer name (PRINT)

Contractor / Engineer name (SIGNATURE)

Date

**Anti-Entrapment Devices and Systems  
for Public Pools and Spas**

**Health and Safety Code Sections 116064.1 & 116064.2**

**INSTRUCTIONS FOR FILLING OUT THE AB 1020 FORM**

- Use one form for each pump or multiple pumps under the same drain cover. For example, a spa with a recirculation pump and a jet pump each with their own set of split drains that terminate under a different drain cover will require two forms. However, two pumps with split drains that terminate under the same drain cover will require only one form.
- All sections of the form must be completed.
- Print legibly.
- Enter the Los Angeles County Plan Check Number in the upper right hand box.
- Submit the ORIGINAL form, no copies or faxes.
- Return the completed form to:

**Los Angeles County – Environmental Health  
Recreational Waters Program  
5050 Commerce Dr. Baldwin Park CA 91706**

I. **Site Information**

- A. Facility name – name of facility or DBA (e.g. Oak Glen HOA, Palms Apartments).
- B. Pool Identification – description of the pool which will identify it when there is more than one pool on the property.
- C. Facility Address – address, city, state and zip code of the facility where the pool or pools are located.
- D. Owner's name – owner, owner's representative or corporation name.
- E. Owner's address – address, city, state, zip, telephone number of the owner or owner's representative.
- F. Indicate if the pool was constructed on or after January 1, 2010.

II. **Pump information**

- A. Identify what type of pump is connected to the drain. If two pumps terminate under one set of split drains, (e.g. one side of a split suction drain is used for both a recirculation pump and a jet pump), describe both pumps. For each pump, provide the make model number, and horsepower. Remember to complete a separate compliance form if the additional pump is connected to a different drain cover.

III. **Main drain/ Suction drain**

- A. Provide the manufacturer; make and model; and the date the drain cover was installed.
- B. Provide the floor and wall flow rating in gallons per minute for the drain cover. Note: If there are two different drain covers (e.g. one on the wall and one on the floor), there is space on the compliance form to complete drain cover information for each drain.
- C. Indicate the size of the pipe terminating at the main drain or jet suction.
- D. Check a box to indicate the configuration of the drain.
  1. **Split Main Drains** - means there are two drains that are hydraulically balanced and symmetrically plumbed and are separated by a distance of at least three feet in any direction between the suction outlets.
  2. **Single Drain - Unblockable** means there is one drain, approved to be unblockable so that a human body cannot sufficiently block it to create a suction hazard.
  3. **Single Drain - Not Blockable** - means there is a single drain which can be sufficiently blocked by a human body to create a suction hazard. This type of drain must be protected by an approved safety vacuum release system or other equally or more effective system. Provide the type of device installed, manufacturer, model, and indicate which type of performance standard is marked on the device (ASTM F2387 or ASME/ANSI standard 112.19.17).

IV. **Skimmer Equalizer Line(s)**

- A. Provide the manufacturer, make and model; and the date the drain cover was installed.
- B. Provide the floor and wall flow ratings in gallons per minute for the drain cover. Note: If there are two different drain covers, (e.g. one on the wall and one on the floor), there is space on the compliance form to complete drain cover information for each drain.
- C. Indicate the size of the equalizer line pipe.
- D. Indicate number of skimmers.

V. **Contractor's Certification Section**

- A. Enter a valid California State Contractor's license number.
- B. Enter the Contractor's license classification.
- C. Or enter the California State Professional Engineer's license number, if applicable.
- D. Enter the Contractor's / Engineer's name and the company they are working for.
- E. Enter the company address, city, state, zip code, telephone number, cell phone number, FAX number and email for the Contractor / Engineer.
- F. Print the name of the Contractor / Engineer.
- G. The Contractor or Engineer must sign the form.
- H. Enter the date the form was signed.