



SWIMMING POOL DISCHARGE PERMIT APPLICATION

PERMIT REQUEST INSTRUCTIONS

1. Fill out this application for the discharge of swimming pool water into the sanitary sewer system. Your contractor may fill out this application on your behalf.
2. Prior to the issuance of the permit the District's Source Control Inspector shall perform a site valuation.
3. The Permit fees shall be confirmed following a site evaluation.
4. Swimming pool water must be dechlorinated before draining into the sewer system.

CONTRACTOR INFORMATION

Business Name: _____ Contact Person: _____

Address: _____

Phone #: _____ Email: _____

The Cupertino Sanitary District serves City of Cupertino, and portions of City of Saratoga.

Phone (408) 253-7071

Fax (408) 253-5173

DID YOU KNOW...

Draining your swimming pool into the sanitary sewer system is prohibited except by **PERMIT!**

One swimming pool drained into the sanitary sewer is the daily equivalent of what 160 homes put into the system.

The addition of 35,000 gallons of water into the sewage system could cause an overload of the system and may result in a Sanitary Sewer Overflow.

In order to prevent an overload to the system, certain control measures must be implemented prior to draining your pool water into the sanitary sewer system such as; mainline sewer condition, flow control, the time of day which the discharge may take place, will traffic control be needed to access the system, etc.

Prior to the District issuing a permit, the above referenced items will be evaluated by Cupertino Sanitary District personnel.

**CUPERTINO SANITARY DISTRICT
SWIMMING POOL DISCHARGE PERMIT APPLICATION**

APN _____ - _____ - _____ Address: _____

Property Owner Name: _____ Phone #: _____

Applicant Name: _____ Phone #: _____

Owner/Applicant Signature: _____

If a contractor is performing the work, please attach the contractor's business card to the application.

POOL CONFIGURATIONS

Average swimming pool depth is approximately 5 feet.

ROUND: 3.14 x ____ radius x ____ radius x ____ depth = ____ cf = ____ CCF x \$ ____ (Treatment Fee)
100

RECTANGULAR: L ____ x ____ W x ____ D = ____ cf = ____ CCF x \$ ____ (CCF Fee) = \$ ____
100

Treatment Fee Per CCF 2014/2015 = \$6.1900 Example:

Round Pool: 3.14 x 6' x 6' x 5' = $\frac{565.2}{100}$ cf = 5.652 CCF x \$6.190 = \$34.98 (Treatment Fee)

Rectangular: 20' x 15' x 5' = $\frac{1500}{100}$ cf = 15 CCF x \$6.190 = \$92.85 (Treatment Fee)

For District Use Only

____ CCF x \$ _____

\$ _____ Treatment fee

\$ 300.00 Permit fee

\$ _____ Labor rate (if required)

TOTAL FEE \$ _____

1. Will the pool be cleaned? ____ Yes ____ No

If yes, what chemicals will be used to clean the pool?

*1. _____

*2. _____

**Monitoring of ph during discharge to sanitary sewer may be required.*

2. Will the pool be discharged in one day? ____ Yes ____ No

**Additional fees may be required if the pool cannot be discharged during a normal 8-hour workday.*

Proposed date / time of discharge: Date _____ Time _____ A.M. ___ P.M.

Proposed Flow Rate (GPM): _____ Does CuSD Concur: ___ Yes ___ No

3. Will traffic control be required? ____ Yes ____ No

4. Discharge to manhole I.D. # _____ or c/o _____

5. Will additional labor be required? ____ Yes ____ No **(ADVISE APPLICANT)**

6. Mainline Condition Assessment: _____

Comments: _____