

## AMARILLO AREA PUBLIC HEALTH DISTRICT

Cities of Amarillo, Canyon, the Villages of Timbercreek Canyon, Lake Tanglewood, Palisades, the Town of Bishop Hills, and Potter and Randall County

For O	fficial Use Only
	Approved
	Denied
Date:	
By:	

**Equipment Change Form** 

		Lqu	ipment cna	inge roi in	
Establishm	ent Name:			Permit Number:	
Address:				Date:	
City, State,	Zip:				
Name:				Phone:	
Email:					
	<u></u>				
<u>L</u>					
Pool Type:					
Swim	Spa	Wade	PIWF	Other	
Pool Location	<u>ı:</u>				
Indoor	Outdoor	Combin	ation		
Pool Informa	tion:				
Volume (g	Volume (gal): Flow Rat			gpm):	
Single Ma	in Drain	Dual	Main Drain		
Safety Vac	cuum Release De	evice(SVRD)	Yes	No	
Type(if ye	es):				
<b>Current Pum</b>					
			Model:_		
Horsepov	wer:	F	low Rate Capa	city(gpm):	_
Pipe Dian	neter(in):				

<b>Current Filter:</b>					
Sand	Cartridge	Diatoma	iceous Earth		
Make:		Model:		<del></del>	
Number of Filters	:	Filter Ar	ea(sq ft):		
Max Flow Rate(gr	om):	_			
Current Chemical F	eeder:				
Chlorine	Bromine	Salt Cell	(Chlorine only	7)	
Make:		Model:			
Feeder Capacity(	bs/day):				
Current Acid Feed	er:				
CO <sub>2</sub> Gas Cylinder	Bulk CO <sub>2</sub>	Liquid	Acid	Manual	
Make:		Model:			
Liquid Feeder Cap	pacity(gal/day):		-		
Current SVRD:	N	N/A			
Make:		Model:			
Nove Equipment					
New Equipment: Pump			Filter		Qty
Make:			Туре:		
Model:			Make:		
Horsepower:			Model:		
Flow Rate Capacity(gpm)			Filter Area Max Flow I		
Chemical Feeder	п	Acid Feeder			SVRD
)e:		`ype: Iake:			Make:
ke:					Model:
del:	N	/lodel:			

Feeder Capacity(gal/day):\_\_\_\_\_

Feeder Capacity(lbs/day):\_\_\_\_\_