

Purpose: This form is to be used by contractors, builders, engineers, architects, and any other party responsible for making changes to a public swimming facility in the state of South Carolina.

This application must be submitted to the following address:

SC DHEC
2600 Bull St.
Columbia, SC 29201

ITEM BY ITEM INSTRUCTIONS FOR COMPLETING THIS FORM:

Enter the date in the first space. Enter the total number of pages included in the space to the right.

SECTION 1. CONTACT INFORMATION

In the left column of section 1, enter the SENDER's information including: name of sender, company name, address, city, state, zip, phone number, fax number and email address.

In the right column of section 1, enter the FACILITY OWNER's information including: name of facility owner, primary contact name, address, city, state, zip, phone number, fax number and email address.

SECTION 2. FACILITY INFORMATION:

In the left column of section 2, enter the FACILITY's information including: name of facility, address, city, state, zip.

In the right column of section 2, enter the FACILITY's information including: permit number, sticker number, county, and circle the pool type (A, B, C, D, E, F).

SECTION 3. PROJECT DESCRIPTION

Circle (YES or NO) whether additional plans or sketches are attached to the change order request.

Using the space provided, describe the proposed changes to the swimming facility.

SECTION 4. EQUIPMENT CHANGE INFORMATION

In the left column of section 4, enter the make and model of the proposed equipment.

In the right column of section 4, enter the make and model of the corresponding existing equipment.

REMEMBER TO SIGN AT THE BOTTOM. ALL SIGNATURES MUST BE ORIGINAL.

Office Mechanics and Filing: This form should be filed in the Recreational Waters File Room according to facility permit number.