

SUCTION OUTLET COVER INSTALLATION CERTIFICATE

ANSI/APSP-7

Address :

Permit No.

POOL - SUCTION OUTLET FITTINGS - No Pool Installed

Bottom Outlets [Drains] - Number Installed _____ None installed

Model No. of covers installed on outlets _____ Attach copy of specs

Permanently marked flow rating to prevent hair entrapment _____ gpm

Max. flow rate [each cover] _____ gpm

No. of pumps serving each cover _____ Max. flow rate all pumps [each cover] _____ gpm

SideWall Outlets- Number Installed _____ None installed

Model No. of covers installed on outlets _____ Attach copy of specs

Permanently marked flow rating to prevent hair entrapment _____ gpm

Max. flow rate [each cover] _____ gpm

No. of pumps serving each cover _____ Max. flow rate all pumps [each cover] _____ gpm

Automatic Vacuum Fittings - Number Installed _____ None installed

Model No. of covers installed on outlets _____ Attach copy of specs

Complies with IAPMO SPS4 Standard ? Yes

SPA - SUCTION OUTLET FITTINGS - No Spa Installed

Bottom Outlets [Drains] - Number Installed _____ None installed

Model No. of covers installed on outlets _____ Attach copy of specs

Permanently marked flow rating to prevent hair entrapment _____ gpm

Max. flow rate [each cover] _____ gpm

No. of pumps serving each cover _____ Max. flow rate all pumps [each cover] _____ gpm

SideWall Outlets- Number Installed _____ None installed

Model No. of covers installed on outlets _____ Attach copy of specs

Permanently marked flow rating to prevent hair entrapment _____ gpm

Max. flow rate [each cover] _____ gpm

No. of pumps serving each cover _____ Max. flow rate all pumps [each cover] _____ gpm

Automatic Vacuum Fittings - Number Installed _____ None installed

Model No. of covers installed on outlets _____ Attach copy of specs

Complies with IAPMO SPS4 Standard ? Yes

SURFACE SKIMMERS - None Installed Skimmers - Make and Model No. _____

Do the skimmers have Equalizer Lines - Yes No

If yes - Model No. of covers on Equalizer outlets _____ Attach copy of specs

Max. flow rate [FR] each cover _____ gpm

Greater of two: Max. system FR / No. of skimmers or Max FR skimmer _____ gpm

I hereby verify that I _____ have checked and/or adjusted all pumps connected to suction lines and drains to insure that the maximum system flow rate does not exceed the parameters outlined in Section 4, of APSP-7 Standard. I also hereby verify that I, have installed each of the above covers in accordance with the manufacturers installation instructions and that all of the above referenced covers meet the ASME/ANSI A112.19.8 Standard . I have attached a copy of the specifications for each cover to verify compliance with this Standard. I hereby state that all of the above information is true and correct to the best of my knowledge

Signature _____ SPB Lic. No. _____ Date: _____