



## Swimming Pools/Beaches – Supplemental Application

TO BE USED WITH COMMERCIAL GENERAL LIABILITY APPLICATION (ACORD 125)  
 All questions must be answered in full. Application must be signed and dated by the applicant.

**Applicant's Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Location:** \_\_\_\_\_

Swimming Pools	Number of Units	Indoor or Outdoor	Depth	
			Maximum	Minimum
Above Ground				
Below Ground				
Lap Pool				
Sauna				
Spa				
Whirlpool				

1. Does the applicant's facility meet the Federal Swimming Pool and Spa Drain Cover Standard as outlined in the Virginia Graeme Baker Pool and Spa Safety Act? .....  Yes  No
2. Are rules posted? .....  Yes  No
3. Are warnings posted regarding use; i.e., pregnancy, alcohol, etc? .....  Yes  No
4. Is lifesaving equipment available? .....  Yes  No
5. Is a telephone or radio device available in the pool area for use in event of an emergency? .....  Yes  No
6. Is first aid equipment available? .....  Yes  No
7. What is the average number of people using pool at one time? \_\_\_\_\_
8. Ratio of swimmers to staff: \_\_\_\_\_ to \_\_\_\_\_
9. Are lifeguards on duty during pool hours? .....  Yes  No
10. Number of lifeguards on duty during pool hours: \_\_\_\_\_
11. Are non-slip surfaces used in all pool areas? .....  Yes  No
12. Are non-slip surfaces in all locker, shower and sauna areas? .....  Yes  No  N/A
13. Do saunas have an emergency shutoff? .....  Yes  No  N/A
14. Are whirlpool emergency shutoffs in the same area? .....  Yes  No  N/A
15. Are pools kept full of water all year? .....  Yes  No  N/A
16. Are pools heated and used all year-round? .....  Yes  No  
 If no, explain:

