



**PUBLIC SWIMMING POOL  
NOTICE OF DISABLED EQUALIZER(S)**  
Brunswick County Health Services, Environmental Health Section  
25 Courthouse Drive NE ▪ P. O. Box 9 ▪ Bolivia, NC 28422  
(910)253-2150  
Email: [flplans@brunswickcountync.gov](mailto:flplans@brunswickcountync.gov)

If you answered 'YES' on the Pool Drain Safety (VGB) Compliance Data sheet as to whether the equalizer lines have been disabled in the below noted pool, then it is required that you supply the information requested on this form.

NAME OF POOL: \_\_\_\_\_

LOCATION: \_\_\_\_\_

Date the equalizer lines were disabled/plugged: \_\_\_\_\_

Were all skimmer equalizers disabled/plugged?  YES  NO

If no, describe which equalizers were disabled/plugged and which remain active:

If the equalizer lines were disabled (plugged), please provide details of the method used.

**Approved Options for Disabling Skimmer Equalizer Lines**

**Option #1 – Plugged at wall**

- Plug with a solid plug that will not allow water to pass through or around it.
- Plug at the wall cannot protrude more than 2 inches from the finished pool wall surface.
- Plug should not be able to be removed by hand. A tool should be needed to remove the plug at the wall. Underwater adhesive or pipe glue can be used per label directions.
- Plug equalizer line under skimmer basket. (Plug the equalizer line, not the line to the pump.)
- There should be no stagnant water between the plugs. The water level of the pool will need to be lowered below the equalizer line opening below the skimmer to do this.

**Option #2 – Plastered over at wall**

- Plaster at wall should be flush as possible and cannot protrude more than 2 inches.
- Plug equalizer line under skimmer basket. (Plug the equalizer line, not the line to the pump.)
- There should be no stagnant water between the plaster and the plug. The water level of the pool will need to be lowered below the equalizer line opening below the skimmer to do this

**Note: If skimmer equalizer lines are disabled (plugged), then the owner/operator must be sure to maintain the pool's water level up to the mouth of the skimmers at all times to ensure that the pump maintains flooded suction. If the water level falls below the skimmer mouth, this can cause the pump to draw in air and the pump may fail. Autofill systems to maintain the pool water level are not required but are recommended.**

**Written Submission of Application**

The undersigned understands, acknowledges and certifies that: (1) To the best of his or her knowledge and belief, all information supplied with this application and on any attached documents is true, accurate and complete. (2) Any false information may be grounds for rejection of this application or revocation of the permit or plan. He/she is solely responsible for the proper identification and labeling of all property lines and corners and ensuring site accessibility. The undersigned applicant also understands the application and any communication and/or permits issued as a result of this application are public records and subject to disclosure pursuant to the North Carolina Public Records Act (North Carolina General Statutes Chapter 132). If the applicant is not the property owner, he/she has obtained the owner/occupant's permission for the application and the County's entry onto the property. The undersigned authorizes Brunswick County representatives to enter the site for the purpose of conducting inspections or evaluations to determine compliance with applicable laws and rules.

- Owner
- Authorized Agent

Name (Print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Electronic Submission of Application**

**DISCLAIMER:**

Please read and sign the following statement to finish the application: I understand and agree that I am using an electronic application process which requires me to provide my electronic signature. I understand that my application will be signed electronically when I select the check box below and by signing in this manner, I am legally bound to the representations, terms and conditions herein. The undersigned applicant hereby authorized the filing of this application (and any subsequent revisions thereto). If the applicant is not the property owner (e.g. a prospective buyer), he/she has obtained the owner/occupant's permission for the application and the County's entry onto the property. The undersigned authorizes Brunswick County representatives to enter the site for the purpose of conducting inspections or evaluations to determine compliance with applicable laws and rules. The undersigned also understands, acknowledges and certifies that: (1) To the best of his or her knowledge and belief, all information supplied with this application and on any attached documents is true, accurate and complete. (2) Any false information may be grounds for rejections of this application or revocation of the permit or plan. He/she is solely responsible for the proper identification and labeling of all property lines and corners and ensuring site accessibility. The undersigned applicant also understands the application and any communication and/or permits issued as a result of this application are public records and subject to disclosure pursuant to the North Carolina Public Records Act (North Carolina General Statutes Chapter 132).

By providing my digital signature in the box below, I am agreeing to the Terms and Conditions presented electronically. I certify that I was technically able to open, read, print or download this disclaimer and have had reasonable opportunity to read and understand the application. I agree my electronic signature has the same effect as if I signed this application in ink.

- Owner
- Authorized Agent

Name (Type): \_\_\_\_\_

Date: \_\_\_\_\_