

Engineering Report for Bathing Beaches

NEW YORK STATE DEPARTMENT OF HEALTH
Division of Environmental Protection

Design Compliance with Subpart 6-2,
NYS Sanitary Code

Owner of Beach	Name of Beach	City, Town, Village	County	Date
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(Check one) New Beach Change to Existing Beach Other

Anticipated Start of Construction Month Day Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Estimated Completion Month Day Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Name and Location of Watershed	
FOR OFFICE USE ONLY	

Code Sect. 6-2.19	Description	Yes	No	N/A	Comments
4.3	1. Bather Use (a) Shallow area + 25 = _____ bathers (less than 4 feet deep)				
4.3	(b) Deep area + 75 = _____ bathers (over 4 feet deep)				
	Total (a) + (b) = _____ bathers				
4.5	2. Bottom Slopes (a) Shallow water area slope _____ (max. 1:10) (b) Deep water area slope _____ (max. 1:3)				
4.2	3. Areas & Area Designations (a) Water body surface area _____ acres				
4.4	(b) Land area available _____ sq. ft. (min. 35 sq. ft./bather)				
4.7.1	(c) Floatline locations Wading area (less than 2 feet deep) Yes _____ No _____ Shallow area (3 feet to 4 feet deep) Yes _____ No _____ Deep area (over 4 feet) Yes _____ No _____ Marker buoys spacing _____ (not greater than 25 feet c/c)				
4.8.2	(d) Spacing of float _____ (not greater than 5 feet c/c) Diving boards/platform _____ feet above water Water depth at end of diving board _____ feet Water depth 12 feet beyond tip of board _____ feet Board length _____ feet				
5.6	4. Water Supply (a) Drinking water source _____				
5.6	(b) Number of drinking fountains _____				
4.2	(c) Dilution water provided Yes _____ No _____ Quantity _____ gpd/bather				
4.11.3	5. Water Quality (a) Water clarity (visible depth) _____ feet				
4.11.1	(b) Bacteriological quality TC _____ FC _____				
4.9	(c) Anticipated water currents _____ ft./sec.				
5.0	6. Bathhouse: (a) Location from beach _____ feet				

Code Sections	Description	Yes	No	N.A.	Comments
	Men Women				
	Number of: Dressing rooms _____				
	Showers _____				
	Lavatory _____				
	Water closet _____				
	Urinals _____				XXX
5.9	(b) Hose bibs with vacuum breakers Yes _____ No _____				
5.9	(c) Length of hose _____ feet				
4.12.2	7. Electrical				
	(a) Overhead wires clearance _____ feet				
	(b) Conforms to National Electrical Code Yes _____ No _____				
	8. Safety Provisions				
6.1	(a) Warning sign size _____ (min. 36 inches x 24 inches) Letter height _____ inches Depth markers provided Yes _____ No _____				
6.2	(b) Equipment provided (check) 24 unit first aid kit _____ Spine board _____ Pocket mask _____ Rescue board or boat _____ Patrol boats or offshore stations _____ Rescue tube or torpedo buoy with 6 foot line _____ Rescue can with 500 foot hauling line _____ Life vests _____				
6.4	(c) Emergency care room (beaches greater than 500 bather capacity) Potable water _____ Cot or bed _____ Blankets and sheets _____ Advanced first aid supplies _____ Resuscitation equipment _____				
6.2.4	(d) Number of elevated lifeguard chairs _____ Location _____				
	ATTACHMENTS				
3.0	Results of sanitary survey Yes _____ No _____				
3.6	Bacteriological test results (8 weeks) Yes _____ No _____				
					Reviewed by _____ Date _____

The preceding items of this form are intended to include features pertinent to the design and operation of a beach. The form should be used to supplement the narrative report of the engineer or architect in the transmittal of plans to the health department.

Signature of designing engineer or architect

Address

Professional engineer's or architect's license # (or apply seal)