



# County of Santa Clara

Department of Environmental Health  
Consumer Protection Division  
1555 Berger Drive, Suite 300  
San Jose, California 95112-2716

## SB 873 INSPECTION/REPAIR VERIFICATION NOTICE (to be returned to the Department of Environmental Health)

Name of pool complex or apartment(s): \_\_\_\_\_

Site address of complex or apartment(s): \_\_\_\_\_

City: \_\_\_\_\_

Pool Type (check all that apply): Swimming  Wading  Spa  Hot Tub  Cold Tub  Other  (Type: \_\_\_\_\_)

I verify that I am the owner/HOA president/legally responsible person for the above referenced pool(s) and that I have had the pool(s) inspected for compliance with Section 116049.1 (a-f) of the California Health and Safety Code.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

The above referenced pool(s) has been **INSPECTED** by a person who holds a C-53 or C-10 contractors license, or other qualified inspector. The name of that individual is noted below.

Name of Inspector: \_\_\_\_\_

Firm or Department: \_\_\_\_\_

Date of Inspection: \_\_\_\_\_

Provide a copy of the inspection report provided by the license electrician stating:

- dedicated GFCI for pool light only
- light fixture(s) have encapsulated terminals

Please attach a copy of the completed and signed inspection.

The above referenced pool(s) has been **REPAIRED** by a licensed electrician. The name of that individual or company is noted below.

Name of Electrician: \_\_\_\_\_

Company: \_\_\_\_\_

Date of Repair: \_\_\_\_\_

Provide a copy of the invoice provided by the license electrician stating:

- dedicated GFCI for pool light only
- light fixture(s) have encapsulated terminals

Please attach a copy of the completed and signed inspection or electrical permit issued by your local building department

This pool does not have a pool light.

If this pool does not have a pool light, check the box above. A sign with legible letters not less than 4 inches high stating **"No Use of Pool Is Allowed After Dark"** shall be posted at the entrance to the pool.

Return this form to:

Santa Clara County  
Department of Environmental Health  
1555 Berger Drive, Ste. 300  
San Jose, CA 95112-2716