



Plan Check
Program

Electronic Plan Submittal (EPS)

Environmental Health now accepts electronic plan submittals (EPS) for food and pool plan check. Please review the instructions below on how to submit an EPS and set up a Box account, and other frequently asked questions. Failure to follow instructions may result in project delay. If you have questions regarding this document, please contact Plan Checker on duty at 714-433-6074.

How do I submit EPS?

- 1. Access the Electronic Plan Submittal Package (EPSP) on our website** — We have separate EPSPs for food and pool facilities (click [here for food EPSP](#) and [here for pool EPSP](#)). The EPSP includes:
 - Service Request form
 - Overview of plan check fees
 - Checklist of criteria for plan submittal
- 2. Complete the Service Request form** — Email your form to plancheck@ochca.com and include “EPS” in the subject line. Emails missing proper subject line may be overlooked.

Do not send your plan files via email or other cloud-based links. Please wait for us to send you an invitation to Box.

- 3. Upload EP and Supporting Documents to Box** — We will share two folders with you in Box, a “Plan” folder and a “Supporting Documents” folder.

Upload the following to the “Plan” folder:

- EP (electronic plan) OR
- Revised EP (if requested by Plan Checker)

Upload the following to the “Supporting Documents” folder:

- Completed “Plan Submittal Checklist” (required)
- Cut sheets (required)
- Menu (required for food facilities)
- Response letter (required)
- Standard operating procedure (upon request)
- Air balance report (upon request)

- 4. Submit Plan Check fees** – After you upload plans, we will email you the fee amount and instructions to pay. Further information on the payment methods will be included in the email. You may pay online, in-person at our office, or through mail.

Special requirements for EPS

EPS that are missing or not following items below can be denied.

- **All plans must be submitted as single files** and without any additional folders or compressed (zipped) folders. All plans must be compiled into one set. Individual sheets shall not be submitted separately.
- **Plans (initial and revisions) must be titled using your service request number (e.g. SR0123456) and the facility name.** Do not use special characters for the title. Plans must be uploaded to the “Plan” folder in your Box account.
- **Supporting documents must be in PDF format or equivalent.** They can be of any size and be submitted as multiple pages. Supporting documents must be uploaded to the “Supporting Documents” folder.
- **All PDF plans must be drawn to scale.**
- **All PDFs must be free of hyperlinks, batch hyperlinks, and viewports (pre-designated scales for pages or details).**
- **All plans must include:**
 - Sheet index identifying contents of the plans
 - Comprehensive scope of work on the front cover page. Scope of work must match the proposed scope of work on the Plan Check Application
 - Seating capacity on the cover sheet (food facility plans)
 - Project plans: Architectural, interior design, mechanical, electrical, and plumbing
- **All documents uploaded to Box after Environmental Health has evaluated plans will be considered revisions.**

How do I submit physical samples for evaluation and approval?

Samples can be either be mailed or dropped off at our office. Ensure all samples are properly labeled with the designated service request number (e.g. SR0123456).

Mailing Address 1241 E. Dyer Rd. Suite 120
Santa Ana, CA, 92705

I uploaded the wrong documents onto Box and cannot delete them. What do I do?

To remove incorrect documents, email plancheck@ochca.com with the following information in the subject line: “Facility Name, Service Request Number, EPS Amendment” (e.g. John Smith Café, SR0123456, EPS Amendment).

In the body of the email, specify which uploads you need to remove. Then, upload the correct plans and/or documents to Box.

How long does the EPS review process take?

Initial Review – Initial food facility plans will be reviewed within 20 business days from the day the payment was received.

Initial pool plans are intended to be reviewed within 20 business days from the day the payment was received, but this may vary based on the workload of our Plan Check team.

Revision Review – Revisions are reviewed in the order they were received. Depending on the volume of revisions and submittals, the revision review process may take up to 8 weeks to be completed. Contact your designated plan checker for a more accurate timeframe for the review process of your plans.

Expediting is not available for the initial and revision review process.

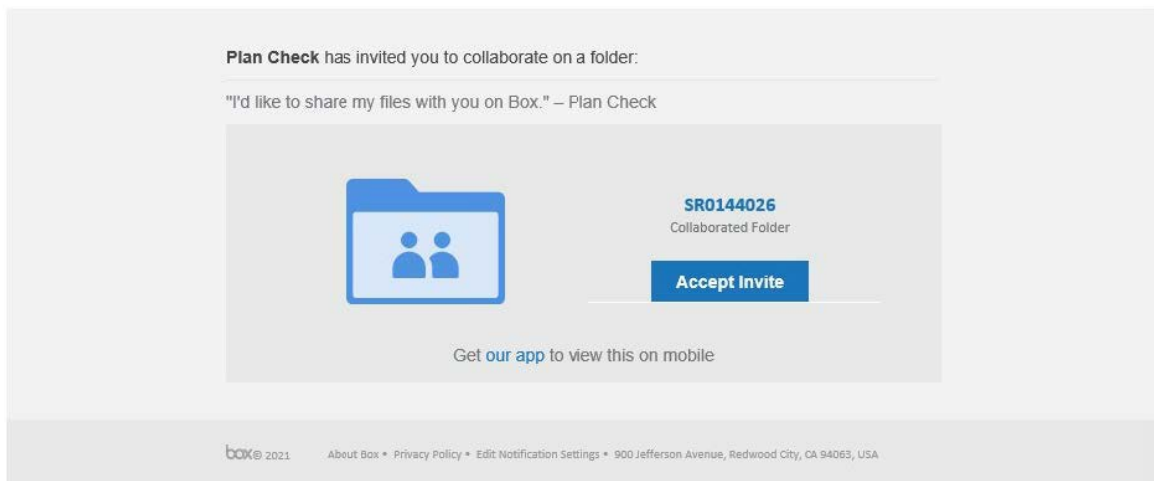
Instructions for Box

Orange County Environmental Health will be using a web application called Box to exchange plan files. This is where you can submit your plans, and where your plan checker will return your reviewed and approved plans.

Setting up your Box account

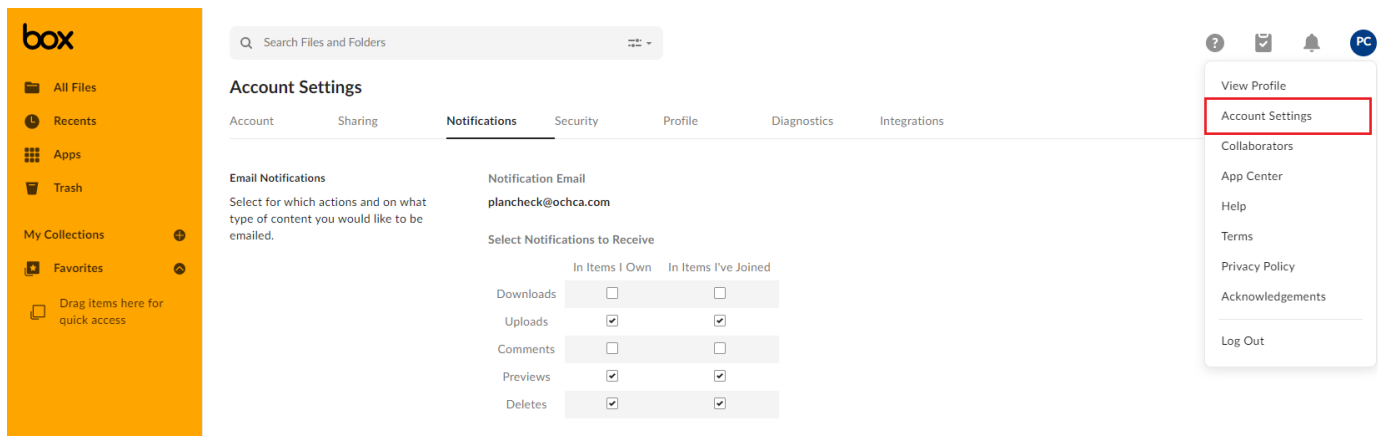
★ **Note to first time Box Users:** *You will have to complete the 2-step verification process prior to clicking on the links that were shared with you. Missing this step may lead to an error message when trying to access the shared links. We highly recommend completing the sign-up process on a computer device versus cell phones.*

An invitation will be sent via email (shown in the image below) from our Plan Check team. Select the “Accept Invite” button to access the folders. Please use the same Box account for any future electronic plan submittals.



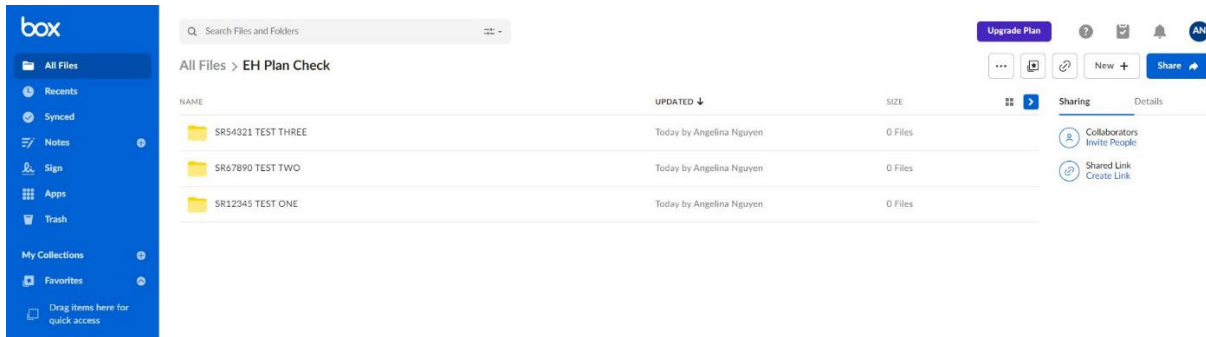
Adjusting notifications

Once you have set up your Box account, we recommend adjusting your notification settings, so that you are notified when files are uploaded into your project folder. Your Plan Check will typically email you as well.

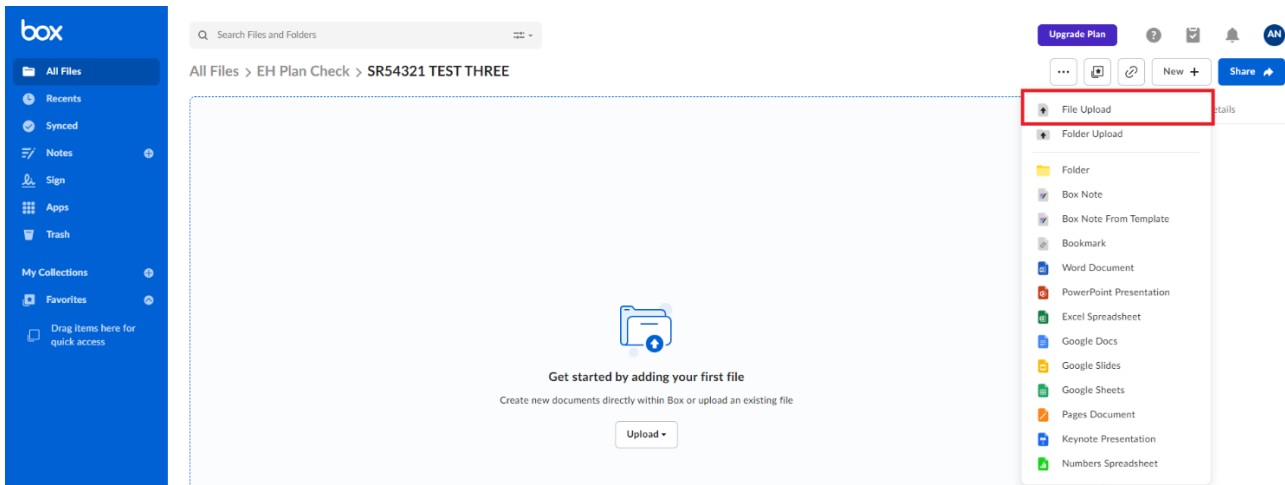


Uploading plans and supporting documents

If you are working on multiple plan reviews with OCEH, you will have access to multiple folders. Please ensure that you are in the right folder, which will be labeled with the SR number. It is the submitter's sole responsibility to ensure that they have uploaded the correct files to the correct folder.

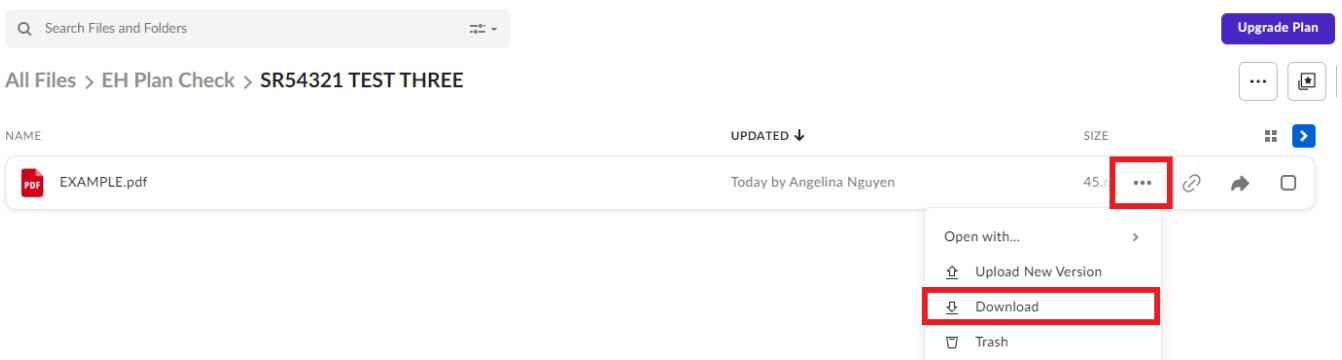


Once you are in the correct folder, go to the “New” option and select “File Upload”. Choose or drag in the files you would like to upload. Box will autosave files and changes you make.



Downloading files

Once your plans are approved, we recommend downloading them for your records. The download option is shown in the image below. You can download files at any point in the review process.





Plan Check Fees for Pool Facilities

All fees effective until 6/30/2023

New construction includes but is not limited to:

- If the location has never had a health permit with OCHCA as a pool facility.
- If the facility is remodeling 3 or more items (e.g. project includes adding handrails, fencing, and coping).

Remodel includes but is not limited to:

- If the facility is remodeling only 1 or 2 items (e.g. project includes adding fencing and coping).

New Construction – Plan Check Fees

Pool type	Fee amount
Swimming pool less than 75,000 gallons	\$928.00
Swimming pool greater than 75,000 gallons	\$1,060.00
Spa pool	\$721.00
Water slide	\$944.00
Special use	\$874.00
Wading pool	\$429.00

Remodel – Plan Check Fees

Pool type	Fee amount
Single item remodel (e.g. enclosure, deck)	\$397.00
2 item remodel	\$497.00
3 or more item remodel	Charged as a new construction

Additional Fees

Hourly rate fees **apply to 2nd or greater revisions after initial submittal and to all plans submitted after approval**

Type	Fee amount
Hourly rate for pool facility plan revisions	\$88.00 per hour



Plan Check Service Request Form: Public Pool Construction

SR# _____

County of Orange Health Care Agency/Public Health/Environmental Health
 1241 E. Dyer Rd., Suite 120, Santa Ana, CA 92705
 Telephone: (714) 433-6074 / FAX: (714) 433-6424

Jobsite Information

Facility Name:	
Facility Street Address:	
City:	Pool Identifier: (For example "rear pool")
<input type="checkbox"/> New construction <input type="checkbox"/> Remodel	Type of pool: <input type="checkbox"/> SWIM <input type="checkbox"/> SPA <input type="checkbox"/> WADE <input type="checkbox"/> OTHER
Items submitted: <input type="checkbox"/> Plans <input type="checkbox"/> Finish samples <input type="checkbox"/> Spec Sheets <input type="checkbox"/> None—Replaster project	
Scope of Work/Extent of Remodel:	
<input type="checkbox"/> Replaster: Includes resurfacing, tiles inside shell, depth markers, skimmers (like for like), lights (like for like), handrails, equipment changes (like for like), coping	
<input type="checkbox"/> Decking <input type="checkbox"/> Fencing/gates <input type="checkbox"/> Restrooms/showers <input type="checkbox"/> Entire pump room change <input type="checkbox"/> Replumbing <input type="checkbox"/> Alter shell (for example. shallowing pool)	

Submitter/Requestor Information

Submitter:	Title:
Company:	
Company Address:	
City:	Zip:
Primary Contact Email:	Phone:

Owner/ Property Manager Information

Facility Owner:		
Owner Address:		
City:	State:	Zip:
Owner's Representative:	Title:	
Representative's Email:	Phone:	

- Each person and/or entity noted on this application has authority to manage the project, including requesting copies of plans and comment letters, receiving status updates, submitting changes, or cancelling the project.
- All County records are considered to be legal public records and, unless exempt under the California Public Records Act (Government Code Section 6250 et seq.), are subject to review or release to anyone who makes a request. Once plans are submitted to the County of Orange for review, all records submitted are deemed a public record.
- Refund policy: Refunds can be obtained only when requested prior to the initial review of the plan.
- **By completing and submitting this form, you acknowledge that you have read and understand the terms above.**

For Office Use Only

Date Received:	Received by:	Description:	Fee:	HSO#:
Payment Method	FA#	PR#	FPS Inspector:	
Date Assigned:	Assigned to:	FPS Supervisor		



Plan Submittal Checklist - Pool Facility

Facility name: _____

Address: _____

Contact name & phone number: _____

Contact email: _____

Plans must include:

Yes	No	Criteria
		Completed SR form
		Plan check fee
		1 set of plans
		Overall site plan
		Floor plan drawn to scale (¼ in = 1 ft), readable, black ink

Top view:

Yes	No	Criteria
		Geometric dimensions
		Skimmers/equalizers and main drains to include pipe size
		Return lines to include pipe size
		Fill line to include pipe size
		Pool lights
		Break in slope line (if applicable)
		Risers and treads with handrails, wall steps and grab rails

Profile view/cross section:

Yes	No	Criteria
		Longitudinal section
		Transverse section
		Slope
		Depth markers
		Sumps
		Stairs, tread and risers with handrails
		Ladder steps with grab rails

Equipment specifications:

Yes	No	Criteria
		Pump
		Filter
		Skimmer
		Suction/equalizer outlet covers
		Disinfectant feeder
		Flowmeter
		Pressure gauges
		Chemical monitoring and control system
		Lights with wattage specified

Supporting data:

Yes	No	Criteria
		Dimensions of pool length and width
		Square footage of pool
		Volume in gallons
		Turnover rate
		Occupant load
		Type and schedule of pipes used

Pool enclosure details:

Yes	No	Criteria
		Material
		Outline of enclosure
		Elevation of enclosure
		Elevation of all gates showing latches/FOB/handle heights
		All other landscaping/equipment on the exterior of the enclosure

Deck details:

Yes	No	Criteria
		Material
		Drainage system
		Coping/handhold
		Hose bib
		Deck depth markers and no diving symbol where applicable
		Landscape
		Lighting

Pool shell:

Yes	No	Criteria
		Material
		White color

Ancillary facilities:

Yes	No	Criteria
		Restrooms
		Showers
		Drinking fountain
		Floor, coved base, wall and ceiling finishes

Safety equipment:

Yes	No	Criteria
		Body hook and pole
		Life ring
		Safety signs
		Spa emergency shut-off switch

If applicable, provide details on the following:

Yes	No	Criteria
		Gutter
		Surge tank
		Diving board/platform
		Spray ground
		Water slide
		Solar heating
		Lifeguard plan

Comments: _____

