

# IDPH REGULATORY PROGRAMS Environmental Health



## Swimming Pools and Spas

### INSTRUCTIONS TO RENEW A POOL / SPA REGISTRATION

Use the following link to access the online licensing system:

<https://dphregprograms.iowa.gov>

**These instructions assume you have already created a Personal A&A account & set up your Profile Page.** If you have not created an account, go to the IDPH Regulatory Programs webpage and follow the instructions <https://idph.iowa.gov/regulatory-programs/swimming-pools>

If you want to add an authorized user to the account, please refer to the Regulatory Program page for the How to Create your Account and Find your Pin instructions.

**NOTE:** The online system works best in either **Google Chrome** or **Safari** when applying online.

For assistance navigating the licensing system after reviewing these instructions, or retrieving a username or password, contact the Help Desk at 1-855-824-4357.

## STEP 1: SIGN IN

Sign In on the portal home page.

The screenshot shows the IDPH Regulatory Programs portal home page. The header includes 'IDPH REGULATORY PROGRAMS' and 'Radiological Health ■ Emergency Medical Services ■ Environmental Health'. Below the header is a navigation menu with 'Home >', 'Public Search', 'Sign In' (highlighted with a red box), 'New User Registration', and 'Help'.

## STEP 2: SELECT YOUR BUSINESS / FACILITY

On the **My Profile** page your business/facility will appear under **Registered User's Memberships**. Click on the name of the business/facility so it appears highlighted, then click **Continue**.

The screenshot shows the 'My Profile' page. The 'Home > My Profile' breadcrumb is highlighted with a red box. The page is divided into two main sections: 'Basic Profile Details' and 'Physical Address Details'. The 'Basic Profile Details' section includes fields for Name (Archana Marepally), Date of Birth (12/09/1990), Email Address, and Preferred Address. The 'Physical Address Details' section includes fields for Address is, Street Number (10308), Street Prefix, Street Name (Dorset), Street Type (Drive), Street Direction, Unit Type, Unit Number, City (Des Moines), County (Polk), State (Iowa), Country (US), Zip Code (50131), Phone 1 (7800099090), and Phone 2. The 'IDPH Facility' link under 'Registered User's Memberships' is highlighted with a red box. The 'Continue' button is circled in yellow.

If the existing registration is not listed, please contact the Help Desk at 1-855-824-4357.

## STEP 3: REVIEW THE POOL/SPA REGISTRATION DETAILS

Click **Details** on the Pool & Spa registration.

IDPH REGULATORY PROGRAMS  
Radiological Health ■ Emergency Medical Services ■ Environmental Health

Home > My Programs Dorothy Knight - DPH POOL

- Home
- Public Search
- My Profile
- Company Profile
- Member Management
- Apply for a Program
- Sign Off
- Help

Programs for DPH POOL

License #	Applicant	Program	Status	Issue Date	Expiry Date	City	Details	Online Services	Renew
SP9037		Spa & Pool Facility	Active	08/23/2018		Des Moines	Details	Online Services	Renew

Make Payment

## STEP 4: RENEW THE ACTIVE POOL / SPA

The following page will display the **Details** of the registration.  
Go to the **SPAF Pool & Spa** section.

- 1) In the **SPAF Pool & Spa** section, click on the drop-down(s) under the **Action Requested** column.
- 2) Make your selection from the drop-down(s) for each Pool/Spa listed.  
(To view the details for each Pool/Spa, use the scroll bar to see hidden fields.)
- 3) Click **Save**.

Application Form Expand All

▶ SPAF Pool Info

Application Form Details Collapse All

▶ SPAF Plans

**SPAF Pool & Spa**

Permit Number	Status	License Number	Expiry Date	Action Requested	If Action "Do Not Renew" provide the reason	Plan Number	Type	Env
101	Active	SP9064-101	04/30/2020	<input type="checkbox"/>		319661	Spa	Our
100	Active	SP9064-100	04/30/2020	<input type="checkbox"/>		319660	Swimming Pool	Our

◀ ▶

• Please click Save after entering each row.  
• Just clean all fields if you do not need a specific row or new added row.

Add Save

4) Click **OK** on the pop-up.

The "Save" action will

- 1> Save all of information under the "Application Form Details" section and
- 2> Upload all attachments and then
- 3> Refresh the whole current page.

Please make sure you have already input everything and verified all of your input (including Attachment section).

## STEP 5: COMPLETE THE POOL / SPA RENEWAL FORM(S)

Next, you will be taken to the **Application form Supplemental** to answer the renewal questions.

- 1) Answer all 3 questions under the **SPAF Renewal Info** tab and **Public Portal Affirmation** tab.
  - a. If the CPO changed, complete Supplemental Part 2
    - i. Upload a copy of the CPO certificate-Supplemental Part 3
  - b. If the owner changed, go to supplemental Part 3 for instructions to upload the Record Change Form found at the end of these instructions.
- 2) Click **Continue/Edit** to be taken to the next page. (**Do not complete any other sections**)

**IDPH REGULATORY PROGRAMS**  
**Environmental Health**  
**Swimming Pools and Spas**

Home > My Programs > Apply for Program > Application Form > **Application Form Supplemental**

Spa & Pool Facility - Facility  
Facility SPAF Facility 1

Process Description - SPAF Pool and Spa - **102-Wading Pool** Expand All

- SPAF Pool Info
- SPAF Registration Info's
- SPAF Renewal Info**

Have there been changes to the pool/spa features, equipment or reconstruction since the previous annual registration? The definition of reconstruction can be found in the Iowa Administrative code 15.3(1).  Yes  No

Please indicate if the CPO, Owner or both of the facility changed since the previous annual registration?

- Public Portal Affirmation**

By checking this box, I am submitting this application for review with all required documentation and attachments.  Yes  No

Process Free Form Description - SPAF Pool and Spa - 102-Wading Pool Expand All

- Pool and Spa
- Chemical Feed System
- Recirculation System
- Filtration System
- Water Heater
- Other Equipment

Attachment

Attachment Description	View
LEDF Wall Certificate	<input type="button" value="View"/>

3) When you click **Continue/Edit**, a pop-up will appear. Click **OK**.

Are you sure you really want to submit the application form supplemental?



**NOTE:** You will need to complete this page for each pool/spa item registered.

*Example:* If you have 4 pools registered, you will see this page 4 times, once for each pool, and you will need to answer the questions 4 times. Click the **RED EDIT** to be taken to the page for that particular item.

**The page will display which pool / spa renewal form you are completing.**

License Processes				Expand All
Description	Status	Requested Date	Action	
▶ Action				
▶ Application Review				
▶ Pool & Spa Review				
SPAF Pool and Spa - 101-Spa	Renewal	02/21/2020	<a href="#">Edit</a>	
SPAF Pool and Spa - 100-Swimming Pool	Calculate Fees	02/21/2020		

Fees

## STEP 6: MAKE A PAYMENT – PAY NOW

Once you have progressed through the entire renewal application, the system will automatically return you to the **Details** page. The renewal fees will appear and the system will allow you to make a payment. *\*Review the fees to ensure you have completed the renewal for each pool/spa registered with the department. If fees are missing, review the Supplemental Part 1 section to complete missing information.*

Follow these steps to make an **Online Payment** with a **Credit/Debit** card or **Checking/Savings** account. To pay by Check or Money Order, skip to **Step 7**.

1) To make a payment online, scroll to the bottom of the screen and click **Make a Payment**.

Application Form			Payment			
▶ SPAF Pool Info			Payment Number	Payment Type	Payment Date	Payment Amount
Application Form Details			3926	Cash	08/29/2017	\$250.00
▶ SPAF Plans			<b>Total</b> \$250.00			
▶ SPAF Pool & Spa						
License Processes			Expand All			
Description	Status	Requested Date	Action			
▶ Application Review						
▶ Pool & Spa Review						
Fees						
Fee List			Payment			
Bill Number	Description	Fee Amount	Payment Number	Payment Type	Payment Date	Payment Amount
16592	Late fee	\$250.00				
10934	Reconstruction	\$250.00				
16591	Renewal	\$35.00				
16592	Renewal	\$70.00				
<b>Total</b>		<b>\$605.00</b>				

**Total Due: \$355.00** [Print Bill](#) [Make Payment](#)

2) Click **Pay Now** on the following screen.

Home > My Programs > Apply for Program > Application Form > Application Form Supplemental > Terms and Conditions > Make Payment

Home  
Sign Off  
Help

License Details

Reference (Row ID) #	Program	Program Detail	Status	Fee Description	Fee Amount	Paid in Full
542667	Spa & Pool Facility	Facility	Active	Late fee	\$250.00	No
542667	Spa & Pool Facility	Facility	Active	Reconstruction	\$250.00	Yes
542667	Spa & Pool Facility	Facility	Active	Renewal	\$35.00	No
542667	Spa & Pool Facility	Facility	Active	Renewal	\$70.00	No

Total  
Fee Amount: \$605.00      Paid Amount: \$250.00      Fee Due: \$355.00

Pay Later    **Pay Now**  
Payment Later Options

3) Click **Pay Now** again on the next page.

4) Click **OK** on the pop up.

Are you sure you really want to pay your program(s) online ?

**OK**    Cancel

5) You will be taken to the State of Iowa's E-Payment system.

6) Select your **Payment Method** and fill in your payment details.

7) Click **Continue** to review your payment information - if the information is correct, click **Confirm**.

8) Your **Confirmation Number** will appear - keep a record of this number.

9) Click **Continue** to be taken to your Receipt.

## STEP 7: MAKE A PAYMENT – PAY LATER

Once you have progressed through the entire renewal application, the system will automatically return you to the **Details** page. The renewal fees will appear and the system will allow you to make a payment.

*\*Review the fees to ensure you have completed the renewal for each pool/spa registered with the department. If fees are missing, review the Supplemental Part 1 section to complete missing information.*

Follow these steps to pay by **Check** or **Money Order**.

To make an Online Payment with a Credit/Debit card or Checking/Savings account return to **Step 6**.

1) To pay by check or money order, scroll to the bottom of the screen and click **Print Bill**.

<b>Application Form</b>				Expand All			
▶ SPAF Pool Info							
<b>Application Form Details</b>				Expand All			
▶ SPAF Plans							
▶ SPAF Pool & Spa							
<b>License Processes</b>				Expand All			
Description		Status		Requested Date		Action	
▶ Application Review							
▶ Pool & Spa Review							
<b>Fees</b>							
<b>Fee List</b>				<b>Payment</b>			
Bill Number	Description	Fee Amount	Payment Number	Payment Type	Payment Date	Payment Amount	
16592	Late fee	\$250.00	3926	Cash	08/29/2017	\$250.00	
10934	Reconstruction	\$250.00			<b>Total</b>	<b>\$250.00</b>	
16591	Renewal	\$35.00					
16592	Renewal	\$70.00					
	<b>Total</b>	<b>\$605.00</b>					
				<b>Total Due: \$355.00</b>		<a href="#">Print Bill</a>	
				<a href="#">Make Payment</a>			
<b>Attachments</b>							
<b>Attachment Description</b>						View	
LEDF Wall Certificate							
				<a href="#">Add New Attachment</a>		<a href="#">Upload Attachments</a>	
<a href="#">Online Services</a>				<a href="#">Back</a>			

2) Click **Print** to print an invoice to mail in with payment.

**IDPH REGULATORY PROGRAMS**  
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Home > Print Bill

Please click **PRINT** here for your bill copy if necessary.

**Bill (Copy)**

<b>Billed To</b>	
Folder Name:	SPAF Facility 1
LPCRO No:	SP8902
Reference No:	542667

Receipt Details			
Bill No	Fee Description	Bill Generated Date	Amount
542667 - 16591	Renewal	02/08/2019	\$35.00
542667 - 16592	Renewal	02/08/2019	\$320.00
542667 - 16592	Late fee	02/08/2019	\$320.00
<b>Total:</b>			<b>\$355.00</b>

Back

Payments can be made out to the Iowa Department of Public Health and mailed to:

Iowa Department of Public Health  
 Bureau of Environmental Health - Swimming Pool & Spa Program  
 321 E 12<sup>th</sup> Street  
 Des Moines, IA 50319

- 3) Click **Back** to return to the previous screen.
- 4) Click **Make a Payment**.

**Application Form** Expand All

▶ SPAF Pool Info

**Application Form Details** Expand All

▶ SPAF Plans

▶ SPAF Pool & Spa

**License Processes** Expand All

Description	Status	Requested Date	Action
▶ Application Review			
▶ Pool & Spa Review			

**Fees**

Fee List			Payment			
Bill Number	Description	Fee Amount	Payment Number	Payment Type	Payment Date	Payment Amount
16592	Late fee	\$250.00	3926	Cash	08/29/2017	\$250.00
10934	Reconstruction	\$250.00			<b>Total</b>	\$250.00
16591	Renewal	\$35.00				
16592	Renewal	\$70.00				
	<b>Total</b>	\$605.00				

Total Due: \$355.00

**Attachments**

- 5) Choose an option from the drop-down menu.
- 6) Click **Pay Later**.

## IDPH REGULATORY PROGRAMS

### Environmental Health

#### Swimming Pools and Spas

Home > My Programs > Apply for Program > Application Form > Application Form Supplemental > Terms and Conditions > Make Payment

Home

Sign Off

Help

License Details						
Reference (Row ID) #	Program	Program Detail	Status	Fee Description	Fee Amount	Paid in Full
542667	Spa & Pool Facility	Facility	Active	Late fee	\$250.00	No
542667	Spa & Pool Facility	Facility	Active	Reconstruction	\$250.00	Yes
542667	Spa & Pool Facility	Facility	Active	Renewal	\$35.00	No
542667	Spa & Pool Facility	Facility	Active	Renewal	\$70.00	No
<b>Total</b>					<b>Fee Amount: \$605.00</b>	<b>Paid Amount: \$250.00</b>
					<b>Fee Due: \$355.00</b>	

Payment Later Options

▼

# SUPPLEMENTAL PART 1: EDIT AN INCOMPLETE APPLICATION

Follow these steps if you need to leave the application page and want to return to complete the renewal at another time:

- 1) Repeat **Steps 1-3** to return to the **Details** of the renewal.
- 2) Open the **Pool & Spa Review** tab.
- 3) Click **Edit** to continue through the renewal process and complete any missing information. (The **"Edit"** option(s) will disappear once the form(s) is completed.)

The screenshot displays a web application interface for managing pool and spa permits. It is divided into several sections:

- Application Form**: Contains a sub-section for **Application Form Details** with a table of permits. The table has columns for Permit Number, Status, License Number, Expiry Date, Action Requested, and If Action "Do provide th".
- License Processes**: A table with columns for Description, Status, Requested Date, and Action. The **Pool & Spa Review** tab is highlighted with a red box, and the **Edit** button in the Action column for the second row is also highlighted with a red box. A red arrow points from this button to the Pool & Spa Review tab.
- Fees**: A section at the bottom with a **Fee List** and **Payment** sub-section.

Permit Number	Status	License Number	Expiry Date	Action Requested	If Action "Do provide th
101	Renewal	SP8902-101	04/30/2018	Renew	
102	Renewal	SP8902-102E		Renew	
100	Final Permit Approved	SP8902-100F	02/08/2021		

  

Description	Status	Requested Date	Action
Application Review			
Pool & Spa Review			
SPAF Pool and Spa - 100-Spray Pad	Active	02/08/2017	
SPAF Pool and Spa - 101-Wave Pool	Renewal	02/08/2019	Edit
SPAF Pool and Spa - 102-Wading Pool	Calculate Fees	02/08/2019	

- 4) After finishing all the sections of the **Pool & Spa Review**, go to the **Make a Payment** steps to complete a payment.

# SUPPLEMENTAL PART 2: CHANGE IN CPO

If you indicated in the renewal questions that the CPO has changed, you must complete the following:

- 1) Go to the **License Processes** section.
- 2) Open the **Action** tab.
- 3) Click **Edit**.

**IDPH REGULATORY PROGRAMS**  
Radiological Health ■ Emergency Medical Services ■ Environmental Health

Home > My Programs > Program Details

Spa & Pool Facility - Facility

License #	Application Date	Issue Date	Expiry Date	Status	Description
SP8997	10/25/2017	02/08/2019		Active	Initial Folder

People Details

Application Form Expand All

- SPAF Pool Info

Application Form Details Expand All

- SPAF Plans
- SPAF Pool & Spa

**License Processes** Expand All

Description	Status	Requested Date	Action
SPAF Change of Ownership -	Open	02/08/2019	<b>Edit</b>

- 4) Click **Expand All**.

**IDPH REGULATORY PROGRAMS**  
Radiological Health ■ Emergency Medical Services ■ Environmental Health

Home > My Programs > Apply for Program > Application Form > Application Form Supplemental

Spa & Pool Facility - Facility  
Facility Van Horn Test Facility

Process Description - SPAF Change of Ownership - Expand All

- SPAF New Owner Details
- SPAF Business Details

Process Free Form Description - SPAF Change of Ownership - Expand All

- Swimming Pool/Spa Contact List

Attachment

Attachment Description Add New Attachment

**Continue/Edit**

5) Add new CPO contact information on the **Swimming Pool/Spa Contact List** tab.

Process Free Form Description - SPAF Change of Ownership - Collapse All

Swimming Pool/Spa Contact List

Contact type	Salutation	Contact First Name	Contact Last Name	Contact Phone Number

Currently there are only 10 rows you can add for each saving. Please save them first and then you can add another 10 rows and more.  
Just clean all fields if you do not need a specific row or new added row.

Add Save

**Attachment**

Attachment Description	
LEDF Wall Certificate	View
RAMP Wall Certificate	View
SPAF Pool Registration	View

Add New Attachment

Continue/Edit

6) Once you have entered all the new details for the CPO, click **Continue/Edit**.

7) Upload CPO Certificate (see Supplemental part 3 for instructions)

# SUPPLEMENTAL PART 3: ATTACH SUPPORTING DOCUMENTS

## Record Change form or CPO Certificate

\*For information on required documentation for changes to Pool/Spa registrations, please visit: <https://idph.iowa.gov/swimmingpoolsandspas/registration>

- 1) On **Details** of the renewal (see Steps 1-3 to find this page) scroll down and click **Add Attachment**.

- 2) Use the **drop-down** to choose the **Type** of document you wish to attach.
- 3) Provide a **Description** of the document.
- 4) Click **Choose File** and select the file you wish to upload.
- 5) Repeat this process for adding additional files
- 6) Once you have uploaded all the files, click **Upload Attachments**.



**Iowa Department of Public Health**  
 Swimming Pool & Spa Program  
 321 E. 12<sup>th</sup> Street  
 Des Moines, IA 50319-0075  
 (515) 281-3548

## RECORD CHANGE FORM FOR SWIMMING FACILITY

A non-refundable application fee must be included in the form of a check or money order. Please see page two of this application for a fee table.

Type of Record Change: <input type="checkbox"/> Ownership <input type="checkbox"/> Name/Franchise <input type="checkbox"/> Other (explain):					
*Effective date change took place (required):					
Current Facility Number (see registration card):					
Current Facility Name:					
Are you planning to change the facility name: <input type="checkbox"/> Yes <input type="checkbox"/> No					
Current Owner Name:					
Facility Information			Owner/Representative Information		
New Facility Name (if applicable)			New Name of Corporation, Organization or Individual		
Contact Person			Contact Person		
Physical Address			Address		
City	State	Zip	City	State	Zip
Telephone			Telephone		
Email			Email		
County where facility is located:					
Email all correspondence to: <input type="checkbox"/> Facility <input type="checkbox"/> Owner					
Certified Pool Operator (CPO) Information					
Name		Certification Number		Expiration	
Certification Agency: <input type="checkbox"/> Nat'l Swimming Pool Foundation (NSPF) <input type="checkbox"/> Nat'l Recreation and Park Association (NRPA) <input type="checkbox"/> Association of Pool & Spa Professional (APSP) <input type="checkbox"/> American Swimming Pool and Spa Association <input type="checkbox"/> Other (provide name of organization):					

**Owner/Representative**

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**TYPE OF SWIMMING EQUIPMENT:**

*(Indicate number of each in the appropriate box below.)*

TYPE	QTY	INDOOR	OUTDOOR
<b>Swimming Pool</b>			
1,500 sq ft or greater			
Less than 1,500 sq ft			
<b>Spa</b>			
1,500 sq ft or greater			
Less than 1,500 sq ft			
<b>Aquatic Feature</b>			
Waterslide			
Wave Pool			
Wading Pool			
Splash Pad/Spray Pad			

**FEES:**

**A non-refundable fee of \$20 for each swimming pool, spa, waterslide, etc. that is required to be registered at the facility, must be included.**

**\*Sign and date form at the bottom of the first page.**

**Make check or money order payable to:**

Iowa Department of Public Health  
Swimming Pool & Spa Program  
321 E. 12<sup>th</sup> Street  
Des Moines, IA 50319-0075

If you have any questions, please call (515) 281-3548.