



Wisconsin Department of Agriculture, Trade and Consumer Protection

Division of Food and Recreational Safety

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# VGBA Drain and Equalizer Cover Replacement Log

Wis. Admin. Code ch. ATPC 76

USE ONE LOG SHEET FOR EACH BASIN								
POOL NAME:				LICENSE NUMBER:				
POOL LOCATION:				POOL TYPE (SWIM, ACTIVITY, WHIRL):				
Date of Installation	Location of cover(s) (eg, floor, wall) installed	Number of cover(s) installed	Manufacturer Name	Manufacturer Model Number	Date Indicator (stamp or similar) Indicate whether 2008 or 2017	Life Span (years)	Gallons per minute (gpm) rating	Initials: I certify that the drain cover(s) were installed according to manufacturer instructions, including gpm rating

Completion of this form is recommended to meet recordkeeping requirements. Failure to keep accurate records is subject to compliance action under Wis. Admin. Code ch. ATPC 76. This form contains personally identifiable information, which may be used for purposes other than that for which it was intended. Wis. Stat. § 15.04(1)(m).