

**SWIMMING POOL OFFICIAL INSPECTION REPORT**  
**GLENN COUNTY ENVIRONMENTAL HEALTH**

247 North Villa Avenue, Willows, CA 95988  
 Phone: (530) 934-6102 • Fax: (530) 934-6103

Name of Facility/DBA: <i>Tierra Del Sol Apartments Pool</i>				Inspection Date: <i>7/22/21</i>			
Address: <i>73 E. Walker St, Orland, CA 95963</i>				Reinspection Date (on or after): <i>By Appointment</i> <small>(Reinspections are subject to fees)</small>			
Owner/Permittee: <i>Robert Howard</i>			Phone Number: <i>204-8126</i>		Inspection Time: <i>3:35 pm</i>		Permit Expiration Date:
Pool Type: <input checked="" type="checkbox"/> Swimming Pool <input type="checkbox"/> Spa Pool <input type="checkbox"/> Wading Pool <input type="checkbox"/> Interactive Water Feature <input type="checkbox"/> Other				Service: <input checked="" type="checkbox"/> Routine Inspection <input type="checkbox"/> Reinspection <input type="checkbox"/> Complaint <input type="checkbox"/> Construction/Pre-Opening <input type="checkbox"/> Other			
pH: <i>7.4</i>	Free Chlorine: <i>&gt;20 ppm</i>	Combined Chlorine: <i>could not determine</i>	Cyanuric Acid: <i>&gt;200 ppm</i>	Flow Rate: <i>could not determine</i>	Temperature: <i>Total 115</i>	Other: <i>CA Hazards - 403</i>	
Applicable Laws & Regulations: <i>California Health &amp; Safety Code § 116025 et. seq.; California Code of Regulations Title 24, Chapter 31 &amp; Title 22, Chapter 20</i>							

<b>Pool Construction</b>			<b>Water Quality</b>			<b>General Facilities</b>		
1. <input type="checkbox"/> Pool Shell	16. <input type="checkbox"/> pH	31. <input type="checkbox"/> Exterior Lighting	2. <input type="checkbox"/> Bottom & Sides	17. <input checked="" type="checkbox"/> Chlorine/Bromine	32. <input type="checkbox"/> Indoor Ventilation	3. <input type="checkbox"/> Decks & Coping	18. <input checked="" type="checkbox"/> Cyanuric Acid	33. <input type="checkbox"/> Restrooms & Toilets
4. <input type="checkbox"/> Diving Boards	19. <input type="checkbox"/> Debris in Pool	34. <input type="checkbox"/> Handwash Sinks	5. <input type="checkbox"/> Depth Markers	20. <input type="checkbox"/> Water Clarity	35. <input type="checkbox"/> Dressing Rooms	6. <input type="checkbox"/> Ladders/Steps/Railings	21. <input type="checkbox"/> Temperature	36. <input type="checkbox"/> Showers
7. <input type="checkbox"/> Underwater Lighting & Electrical	22. <input type="checkbox"/> Flow Rate/Turnover	37. <input type="checkbox"/> Drinking Fountains	<b>Recirculation Equipment</b>			<b>Miscellaneous</b>		
8. <input type="checkbox"/> Filters	23. <input type="checkbox"/> Gates/Enclosure	38. <input type="checkbox"/> Chemical Test Kits	9. <input type="checkbox"/> Pumps	24. <input type="checkbox"/> Drain Covers	39. <input type="checkbox"/> Chemical Testing Frequency	10. <input checked="" type="checkbox"/> Flowmeter	25. <input type="checkbox"/> Anti-Entrapment Shutoff	40. <input type="checkbox"/> Record Keeping
11. <input checked="" type="checkbox"/> Pressure/Vacuum Gauges	26. <input type="checkbox"/> Rescue Pole	41. <input type="checkbox"/> Lifeguards	12. <input type="checkbox"/> Skimmers & Gutters	27. <input type="checkbox"/> Life Ring	42. <input type="checkbox"/> Communicable Disease Control	13. <input type="checkbox"/> Pipes & Fittings	28. <input checked="" type="checkbox"/> Safety Signs	43. <input type="checkbox"/> Site Supervision & Control
14. <input type="checkbox"/> Chemical Feeders	29. <input type="checkbox"/> First Aid Kit	44. <input type="checkbox"/> General Sanitation	15. <input type="checkbox"/> Water Supply/Backflow Prevention	30. <input type="checkbox"/> Chlorine Gas Safety	45. <input type="checkbox"/> Other:			

Comments:

\* Pool is closed! Do not reopen without approval from our department.

Critical/Closure Violations

17) Provide between 2.0 - 10.0 ppm of free chlorine. Measured >20 ppm.

18) Maintain cyanuric acid below 100ppm. Measured >200ppm.

Other Violations

10) Replace missing flow meter.

11) Replace inoperable pressure gauge.

28) Provide safety sign info:

a) Pool Capacity (19 people)

b) Emergency phone number (911)

c) Address

Received By: <i>[Signature]</i>	REHS: <i>John H. Wells</i>
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