

SWIMMING POOL OFFICIAL INSPECTION REPORT

GLENN COUNTY ENVIRONMENTAL HEALTH

225 N. Tehama Street, Willows, CA 95988
Phone (530) 934-6102 FAX (530) 934-6103

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Name of Facility / DBA: <u>HOLIDAY INN EXPRESS</u>				Inspection Date: <u>8/30/21</u>			
Address: <u>545 N. HUMBOLDT AVE, WILLOWS, CA</u>				Reinspection Date (one or after): <u>*POOL IS CLOSED</u> <small>(Reinspections are subject to fees)</small>			
Owner/Permittee: <u>KUMYAE HOTELS INC.</u>			Phone Number:		Inspection Time: <u>4:00</u>	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: <u>7.5</u>	Free Chlorine: <u>NON-DETECT</u>	Combined Chlorine: <u>—</u>	Cyanuric Acid: <u>216 PPM</u>	Flow Rate: <u>70 GPM</u>	Temperature: <u>—</u>	Other: <u>—</u>	
Applicable Laws & Regulations: California Health & Safety Code § 116025 et. seq.; California Code of Regulations Title 24, Chapter 31 & Title 22, Chapter 20							

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

Comments:

** POOL & SPA IS CLOSED ON THE ABOVE DATE & TIME FOR THE FOLLOWING CRITICAL VIOLATIONS:

CRITICAL VIOLATIONS

(17) MAINTAIN POOL FREE AVAILABLE CHLORINE ABOVE 2.0 PPM AT ALL TIMES. N POOL MEASURED NON-DETECT FOR SANITIZER.

OTHER VIOLATIONS

(3) THE DECK SHALL BE REPAIRED IN ACCORDANCE TO THE PLANS SUBMITTED TO GLENN CO. E.H. BY SEPT. 24TH

(2) REPAIR OR RE-PLASTER THE CRACKED & CHIPPED SHELL OF THE POOL. ALL WORK MUST BE PLANS CHECKED BY GCE

(11) REPLACE UN-READABLE PRESSURE OR VACUUM GAUGES IN THE POOL ROOM.

(13) ALL PLUMBING SHALL HAVE DIRECTION OF FLOW ARROWS PRINTED ON THEM.

(28) THE NORTH ENTRY GATE THAT IS NOW BEING USED MUST HAVE

Received By: [Signature] REHS: ANDREW PETRO

FOOD FACILITY INSPECTION REPORT

Continuation Sheet

GLENN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

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

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Name of Facility/ DBA: <u>HOLIDAY INN EXPRESS</u>	Inspection Date: <u>8/30/21</u>
Address: <u>PAGE 2</u>	
Owner/Permittee: <u>PAGE 2</u>	
Applicable Law CALIFORNIA RETAIL FOOD CODE ("CalCode), Beginning with section 113700, California Health and Safety Code	

Comments: OTHER VIOLATIONS (CONT.)

28 A "KEEP GATE CLOSED" SIGN ATTACHED TO DOOR

40 RECORD KEEPING APPEARS TO BE "DAY LOGGED" AS THE CHEMICALS BEING RECORDED DON'T CHANGE IN CONCENTRATION FROM DAY TO DAY.

Received By: <u>[Signature]</u>	REHS: <u>Andrew Peryo</u>
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