

# SWIMMING POOL OFFICIAL INSPECTION REPORT

## GLENN COUNTY ENVIRONMENTAL HEALTH

247 North Villa Avenue, Willows, CA 95988

Phone: (530) 934-6102 • Fax: (530) 934-6103

Page 1 of 1

Name of Facility/DBA: <u>Paigewood Apts. Pool</u>				Inspection Date: <u>6/19/15</u>	
Address: <u>745 Paigewood Dr, Orland, CA 95963</u>				Reinspection Date (on or after): <u>Next Inspection</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>Orland Pacific Associates</u>		Phone Number: <u>(559) 805-8998</u>		Inspection Time: <u>11:20 am</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>7.3</u>	Free Chlorine: <u>5.9 ppm</u>	Combined Chlorine: <u>1.0 ppm</u>	Cyanuric Acid: <u>29 ppm</u>	Flow Rate: <u>60 gpm</u>	Temperature: <u>-</u> Other: <u>Total Chlorine - 98 CA HPL - 350</u>
Applicable Laws & Regulations: California Health & Safety Code § 116025 et. seq.; California Code of Regulations Title 24, Chapter 31 & Title 22, Chapter 20					

<b>Pool Construction</b> 1. <input type="checkbox"/> Pool Shell 2. <input type="checkbox"/> Bottom & Sides 3. <input 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	<b>Water Quality</b> 16. <input type="checkbox"/> pH 17. <input type="checkbox"/> Chlorine 18. <input type="checkbox"/> Cyanuric Acid 19. <input type="checkbox"/> Other Chemicals 20. <input type="checkbox"/> Water Clarity 21. <input type="checkbox"/> Temperature 22. <input type="checkbox"/> Flow Rate/Turnover	<b>General Facilities</b> 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 Rooms 36. <input type="checkbox"/> Showers 37. <input type="checkbox"/> Drinking Fountains
<b>Recirculation Equipment</b> 8. <input type="checkbox"/> Filters 9. <input type="checkbox"/> Pumps 10. <input type="checkbox"/> Flowmeter 11. <input 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	<b>Safety Equipment</b> 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	<b>Miscellaneous</b> 38. <input checked="" type="checkbox"/> Chemical Test Kits 39. <input checked="" type="checkbox"/> Chemical Testing Frequency 40. <input 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 is closed due to critical violations with spa. Do not reopen without approval from our department.

Correct the following

13) Provide direction of flow arrows on equipment area pipework.

28) Provide "No diving" diagrammatic signs (with symbol) on deck next to depth markers.

38) Obtain a DPD type test kit. Operator has an OTD type kit (Must test for free and total chlorine)

39) Perform free chlorine & pH tests at least once per day. No tests were performed on 13<sup>th</sup>, 14<sup>th</sup>.

Received By:	REHS: <u>John H. Wells</u>
--------------	----------------------------