

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: <u>Orland Inn Pool</u>		Inspection Date: <u>7/24/17</u>	
Address: <u>1052 South St, Orland, CA 95963</u>		Reinspection Date (on or after): <u>Next inspection</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>R.S.R Ventures</u>	Phone Number: <u>865-7632</u>	Inspection Time: <u>2:50pm</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>7.2</u>	Free Chlorine: <u>3-1 ppm</u>	Combined Chlorine: <u>0-1 ppm</u>	Cyanuric Acid: <u>28 ppm</u>
Flow Rate: <u>80 gpm</u>	Temperature: <u>Total Alk - 36 ppm</u> <u>CA Hardness - 282 ppm</u>	Other:	
Applicable Laws & Regulations: California Health & Safety Code § 116025 et. seq.; California Code of Regulations Title 24, Chapter 31 & Title 22, Chapter 20			

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

Comments:

12) Replace missing weir at south skimmer.

Received By: <u>X Yana Phelps</u>	REHS: <u>John H Wells</u>
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