

SWIMMING POOL OFFICIAL INSPECTION REPORT

GLENN COUNTY ENVIRONMENTAL HEALTH

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

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Name of Facility/DBA: <u>Blue Gum Motel Pool</u>		Inspection Date: <u>7/6/15</u>	
Address: <u>2637 C/R 99W, WILLOWS, CA</u>		Reinspection Date (on or after): <u>** POOL IS CLOSED</u> <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: <u>OFFSET INVESTMENTS, LLC</u>	Phone Number:	Inspection Time: <u>3:30</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 type="checkbox"/> Routine Inspection <input type="checkbox"/> Reinspection <input type="checkbox"/> Complaint <input checked="" type="checkbox"/> Construction/Pre-Opening <input type="checkbox"/> Other		
pH: <u>7.4</u>	Free Chlorine: <u>0.24 PPM</u>	Combined Chlorine: <u>—</u>	Cyanuric Acid: <u>~ 5 PPM</u>
		Flow Rate: <u>UNABLE TO TEST</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 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 Rooms 36. <input type="checkbox"/> Showers 37. <input type="checkbox"/> Drinking Fountains
Recirculation Equipment 8. <input type="checkbox"/> Filters 9. <input checked="" type="checkbox"/> Pumps 10. <input type="checkbox"/> Flowmeter 11. <input type="checkbox"/> Pressure/Vacuum Gauges 12. <input type="checkbox"/> Skimmers & Gutters 13. <input 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 checked="" 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 checked="" type="checkbox"/> Chemical Test Kits 39. <input checked="" 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 SHALL REMAIN CLOSED UNTIL THE FOLLOWING IS CORRECTED:
CORRECT THE FOLLOWING:
 (3) REPAIR CRACKS ALONG THE POOL DECK & REPAIR THE POOL COPING, WHERE TILE & GROUT IS COMING OFF.
 (9) SUBMIT TO G.C.E.H. A SPECIFICATIONS SHEET FOR THE POOL PUMP AND A "VARIABLE SPEED PUMP PROGRAM APPROVAL FORM" NOTE: POOL PUMP MUST TURNOVER VOLUME OF THE POOL ONCE EVERY 6 HRS.
 (17) MAINTAIN FREE AVAILABLE CHLORINE OF AT LEAST 2.0 PPM IN THE POOL WHILE OPEN.
 (27) PROVIDE A LIFE RING, WITH A ROPE ATTACHED AT THE POOLSIDE (ROPE MUST SPAN WIDTH OF POOL).
 (28) PROVIDE A DIARRHEA SIGN POOLSIDE (SIGNAGE SHEET PROVIDED) &

Received By: [Signature] REHS: ANDREW PERGO

FOOD FACILITY INSPECTION REPORT

Continuation Sheet

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Name of Facility/ DBA: Blue Gum Motel Pool	Inspection Date: 7/6/15
Address: PAGE 1	
Owner/Permittee: PAGE 1	
Applicable Law CALIFORNIA RETAIL FOOD CODE ("CalCode), Beginning with section 113700, California Health and Safety Code	


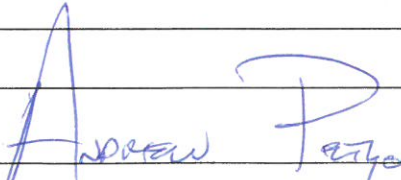
Comments: CORRECT THE FOLLOWING (CONT.):

(28) SAFETY SIGN SHALL INDICATE POOL CAPACITY (1 SWIMMER PER 20 FT²).

(38) POOL OPERATOR SHALL HAVE AND TEST POOL CHEMICALS USING A "DPD" TEST KIT.

(39) POOL SHALL BE TESTED DAILY FOR FREE AVAILABLE CHLORINE & pH. ONCE PER MONTH CYANURIC ACID (STABILIZER) SHALL BE TESTED.

(40) ALL CHEMICAL TESTS, OPERATION & MAINTENANCE RECORDS OR ANY INCIDENTS SHALL BE RECORDED IN A LOG THAT IS AVAILABLE FOR INSPECTION.

Received By: 	REHS: Andrew P. 
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