

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: Blue Gum Motel | | Inspection Date: 6/28/18 | |
| Address: 2637 Hwy 99w, Willows | | Reinspection Date (on or after): *Pool is Closed <small>(Reinspections are subject to fees)</small> | |
| Owner/Permittee: Pratima Patel | Phone Number: | Inspection Time: 4:00 | 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: 8.1 | Free Chlorine: NON-DETECT | Combined Chlorine: NOT TESTED | Cyanuric Acid: 12.2 PPM |
| Flow Rate: UNABLE TO TEST | | Temperature: — | Other: — |
| Applicable Laws & Regulations: California Health & Safety Code § 116025 et. seq.; California Code of Regulations Title 24, Chapter 31 & Title 22, Chapter 20 | | | |

| Pool Construction | Water Quality | General Facilities |
|--|--|---|
| 1. <input checked="" type="checkbox"/> Pool Shell | 16. <input checked="" 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 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 checked="" 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 |
| Recirculation Equipment | Safety Equipment | Miscellaneous |
| 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 checked="" 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 checked="" type="checkbox"/> Water Supply/Backflow Prevention | 30. <input type="checkbox"/> Chlorine Gas Safety | 45. <input checked="" type="checkbox"/> Other: |

Comments:

***Pool is closed on the above date and time for the following critical violations:**

****CRITICAL VIOLATIONS****

- ① MAINTAIN POOL pH BETWEEN 7.2 - 7.8. Pool measured 8.1
- ② MAINTAIN POOL CHLORINE ABOVE 2.0 AND BELOW 10.0 PPM. Pool measured non-detect for free chlorine.

OTHER VIOLATIONS

- ① REPAIR POOL SHELL AFTER PLAN CHECK. PARTS OF POOL PAINT ARE CHIPPING OFF.
- ② REPLACE/REPAIR BROKEN WEIR IN THE SKIMMER BASKET.
- ③ ADD A VACUUM GAUGE TO SUCTION SIDE OF POOL EQUIPMENT.
- ④ REPAIR/REPLACE THE FLOW METER ON THE POOL EQUIPMENT.

Received By: REHS: **Andrew Peryo**

OFFICIAL INSPECTION REPORT

Continuation Sheet

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| Owner/Permitee: <u>PAGE 2</u> | |

Comments:

OTHER VIOLATIONS (CONT.)

- 15 PROVIDE A BACKFLOW PREVENTION DEVICE ON THE HOSE BIBS AT POOL SIDE.
- 20 IMPROVE THE WATER CLARITY IN THE POOL IT IS A LITTLE HAZY.
- 28 OBTAIN & POST NEW DIARRHEA SIGN AT THE POOL SIDE.
- 28 DARKEN IN THE POOL CAPACITY ON THE POOL SIGN.

Received By:

REHS: