

## Georgia Department of Public Health PUBLIC SWIMMING POOL INSPECTION RECORD

Name of Facility YMCA POOL (D.A. TURNER)		Address 4384 WARM SPRINGS RD	City COLUMBUS	County
Certified Pool Operator		Address 4384 WARM SPRINGS RD	City COLUMBUS	County

Deficiencies found on the inspection are marked with a (X). A check mark (✓) indicates satisfactory compliance, and (N/A) means non-applicable. \*Indicates a substantial health hazard. Other items may be considered substantial health hazards depending on severity. The pool must be closed until substantial health hazards are corrected. One or more substantial health hazards violated, two or more other items violated or repeated violations will result in an unsatisfactory rating. An unsatisfactory rating may result in enforcement action.

		X/✓	Notes
POOL WATER	1. Water supply approved, adequate	✓	
	2. Depth properly marked	✓	
	3. Overflow facilities adequate	✓	(see addendum)
	4. Constant water level	✓	
	5. Turnover adequate	✓	
	6. Disinfectant residual concentration 3.0	✓	(see addendum)
	7. pH (7.2-7.8)	✓	(see addendum)
	8. Total Alkalinity	✓	(see addendum)
	9. Calcium Hardness	✓	
	10. Cyanuric Acid	✓	
	11. Clarity	✓	
PUMPING FILTRATION AND TREATMENT SYSTEM	12. Pump operating properly	✓	
	13. Filters functioning properly	✓	
	14. Hair & lint strainers functioning properly	✓	
	15. Skimmers/Gutters maintained & operating properly	✓	
	16. Chemical feeders operating properly	✓	
	17. Recirculation and filtration equipment readily accessible	✓	
DECK AND POOL AREA	18. Pool & Decks clean and in good repair	✓	
	19. Night lighting adequate	✓	
WATER AND FACILITIES	20. Hot & cold water under pressure	✓	
	21. Adequate toilet facilities & showers	✓	
SEWAGE DISPOSAL	22. Sewage disposal method: Public	✓	
SAFETY PRE-CAUTIONS	23. Life line in place/Separation of wading pool	✓	(see addendum)
	24. Warning/Safety sign posted in clearview of pool area	✓	
	25. First aid kits available & properly equipped	✓	
	26. Emergency & lifesaving equipment in conspicuous place	✓	
	27. Emergency phone provided and hard wired	✓	
	28. Gas cylinder precautions adequate	✓	
	29. Proper barrier around pool	✓	
OPERATOR AND RECORDS	30. Main drains properly covered and maintained	✓	
	31. Certified Pool Operator		
	32. Lifeguard(s) (if provided) has proper certification	✓	
	33. Trained operator on duty	✓	
	34. Appropriate records on file	✓	
	35. Pool test kit(s) available and adequate for all necessary tests	✓	
	36. Other	✓	

**SATISFACTORY**

**UNSATISFACTORY**

**ENFORCEMENT**  
 None  
 Permit Suspended  
 Closed Voluntarily  
 Re-inspection needed within days  
 Hearing Requested/Recommended

**Permit No.**  
 106-P06

**Expiration Date**  

2011	12	31
YY	MM	DD

**Purpose:**  

5
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1. Routine
2. Follow-up
3. Request
4. Complaint
- 5.

**Other permit** \_\_\_\_\_

**Length of Inspection**  
 732 Minutes

**Pool Type:**  
 Swimming/Pool  
 Spa  
 Special Purpose  
**Pool: Activity/Interactive/Wading Type:** Pool

**Required Turnover Rate** 0.00 hours  
**Type of Disinfectant** \_\_\_\_\_

**Required Concentration** \_\_\_\_\_

**Bather Load**  

1	0	0
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**Laboratory Sample**  

1
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1. None
2. Water
3. Other

**Reason for Sample:** \_\_\_\_\_

**Remarks**  
 keep close check on chemical levels close pool if not correct.

Date of Inspection 01/17/2012	Discussed with (Signature & Title)  cpo	Inspected by (Signature & Title)  Environmental Health Technician
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**MUSCOGEE COUNTY HEALTH DEPARTMENT  
 ENVIRONMENTAL HEALTH SECTION  
 PUBLIC SWIMMING POOL INSPECTION RECORD ADDENDUM**

<b>Name of Facility</b> YMCA POOL (D.A. TURNER)	<b>Address</b> 4384 WARM SPRINGS RD	<b>City</b> COLUMBUS	<b>County</b>
<b>Operator</b>	<b>Address</b> 4384 WARM SPRINGS RD	<b>City</b> COLUMBUS	<b>County</b>
<b>Item Number</b>	<b>Notes</b>		
3	add where needed		
6	3.0		
7	7.4		
8	7.0		
23	when not open to lap swimming		