

**Georgia Department of Human Resources
PUBLIC SWIMMING POOL INSPECTION RECORD**

Name of Facility Sleep Inn + Suites Pool	Address 5100 Armour Rd	City Armauer	County Muscogee
Certified Pool Operator Crystal Burns	Address Columbus, GA	City Muscogee	County Muscogee

SATISFACTORY

UNSATISFACTORY

Deficiencies found on the inspection are marked with a (X). A check mark (✓) indicates satisfactory compliance, (NA) 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 16,320 gal	1. Water supply approved, adequate	✓	
	2. Depth properly marked	✓	
	3. Overflow facilities adequate	✓	
	4. Constant water level	✓	
	5. Turnover adequate	✓	45 gpm
	* 6. Disinfectant residual: Concentration	✓	1.5-5.0 5.0
	* 7. pH (7.2-7.8)	✓	7.2
	8. Total Alkalinity	NA	100 100
	9. Calcium Hardness	NA	
	10. Cyanuric Acid	NA	
PUMPING FILTRATION AND TREATMENT SYSTEM	* 11. Clarity	✓	
	* 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	✓	
DECK AND POOL AREA	17. Recirculation and filtration equipment readily accessible	✓	
	18. Pool & Decks clean, and in good repair	X	crack by ladder
WATER AND FACILITIES	19. Night lighting adequate	NA	
	20. Hot & cold water under pressure	✓	
SEWAGE DISPOSAL	21. Adequate toilet facilities & showers	✓	
	22. Sewage disposal method: 1. Public, 2. Septic Tank, 3. Positive outlet, (approved and functioning properly)	1	
SAFETY PRE-CAUTIONS	23. Life line in place/Separation of wading pool	✓	
	24. Warning/Safety sign posted in clearview of pool area	✓	
	25. First aid kits available & properly equipped	✓	office
	26. Emergency & lifesaving equipment in conspicuous place	✓	
	27. Emergency phone provided and hard wired	✓	
	28. Gas cylinder precautions adequate	NA	
	29. Proper barrier around pool	✓	
	30. Main drains properly covered and maintained	✓	
OPERATOR AND RECORDS	31. Certified Pool Operator: 1. On-site 2. Contract	1	
	32. Lifeguard(s) (if provided) has proper certification	NA	
	33. Trained operator on duty	✓	
	34. Appropriate records on file	✓	
	35. Pool test kit(s) available and adequate for all necessary tests	✓	office
	36. Other	✓	

ENFORCEMENT

None

Permit Suspended

Closed Voluntarily

Re-inspection needed within _____ days

Hearing Requested/Recommended

Permit No.

0	0	0	0	0	5
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Expiration Date

09	12	31
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YR MO DA

Purpose:

3

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

Length of Inspection 60 Minutes

Pool Type:

Swimming/Pool

Spa

Special Purpose Pool:

Type: Hotel

Required Turnover Rate 45 gpm

Type of Disinfectant SAF

Required Concentration _____

		30
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Bather Load

Laboratory Sample

1

1. None
2. Water
3. Other

Reason for Sample: _____

Remarks: **ladder missing rubber tips, handrail doesn't serve all the trends, risers electric junction box is outside, 500 Watt bulb needed on the deck, missing a well gate**

Date of Inspection 8-06-09	Discussed with (Signature & Title) <i>[Signature]</i> owner	Inspected by (Signature & Title) Jenen Siler EHS <i>[Signature]</i> Ky B Ewa EHS
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