

MUSCOGEE COUNTY HEALTH DEPARTMENT
 ENVIRONMENTAL HEALTH SECTION
 PUBLIC SWIMMING POOL INSPECTION RECORD

ok to permit

Name of Facility HAMPTON INN NORTH POOL	Address 7390 BEAR LN	City COLUMBUS	County Muscogee
Operator Howard Watkins	Address 7270 NORTHLAKE DR	City COLUMBUS	County

SATISFACTORY
 UNSATISFACTORY

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

Permit No.
 106-P25

Expiration Date
 2013 12 31
 YR MO DA

Purpose
 1. Routine
 2. Re-inspection
 3. Request
 4. Complaint
 5. Other opening
 5

Length of Inspection 01:00 Hours

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

Required Turnover Rate: 60 gpm
 Type of Disinfection:
 Required Concentration:

Bather Load
 4 0

Purpose
 1. None
 2. Water
 3. Other
 1

Reason for Sample:

Deficiencies found on the inspection are marked with an (X). A check mark (✓) indicates satisfactory compliance. Each blank under column (24-26) should be filled in with above symbols as appropriate.

	Item No.	24-59	Notes
POOL WATER	Type supply: Public		
	Water supply approved, adequate	1	✓
	Depth properly marked	2	✓
	Overflow facilities adequate	3	✓
	Constant water level	4	✓
	Turnover adequate	5	✓ (see addendum)
	Disinfectant residual concentration	6	✓ (see addendum)
	pH (7.2-7.8)	7	✓ (see addendum)
	Total Alkalinity	8	✓ (see addendum)
	Calcium Hardness	9	✓ (see addendum)
	Cyanuric Acid	10	✓ (see addendum)
Clarity	11	✓	
PUMPING FILTRATION AND TREATMENT SYSTEM	Pump operating properly	12	✓
	Filters functioning properly	13	✓
	Hair & lint strainers functioning properly	14	✓
	Skimmers/Gutters maintained & operating properly	15	✓
	Chemical feeders operating properly	16	✓
	Recirculation and filtration equipment readily accessible	17	✓
DECK AND POOL AREA	Pool & Decks clean and in good repair	18	✓
	Night lighting adequate	19	✓
WATER AND FACILITIES	Hot & cold water under pressure	20	✓
	Adequate toilet facilities & showers	21	✓
SEWAGE DISPOSAL	Sewage disposal method: Public	22	✓
SAFETY PRE-CAUTIONS	Life line in place/Separation of wading pool	23	✓ (see addendum)
	Warning/Safety sign posted in clearview of pool area	24	✓
	First aid kits available & properly equipped	25	✓
	Emergency & lifesaving equipment in conspicuous place	26	✓
	Emergency phone provided and hard wired	27	✓
	Gas cylinder precautions adequate	28	✓ (see addendum)
	Proper barrier around pool	29	✓
OPERATOR AND RECORDS	Main drains properly covered and maintained	30	✓
	Certified Pool Operator	31	
	Lifeguard(s) (if provided) has proper certification	32	✓ (see addendum)
	Trained operator on duty	33	✓ (see addendum)
	Appropriate records on file	34	✓
	Pool test kit(s) available and adequate for all necessary tests	35	✓
	Other	36	✓

Gauge Readings:

Influent Pressure _____ 0 _____ psi
 Effluent Pressure _____ 0 _____ psi
 Flow Rate Main Pool _____ 0 _____ gpm
 Flow Rate Wading Pool _____ 0 _____ gpm

Name of Bactericide In Use: sodium hypo Rate _____ 0 _____ ppm
 Name of Stabilizer In Use: _____ Rate _____ 0 _____ ppm
 Name of Filter System In Use: _____
 Algae Control Measures:

Laboratory Results:

Alkalinity _____ 0 _____ ppm
 Colliform Count _____ 0 _____
 Plate Count _____ 0 _____

Remarks
 ok to permit for 2012

Date of Inspection 01/12/2012	Discussed with (Signature) <i>Mark Foster</i> Mark Foster Title:	Inspected by (Signature) <i>Wanda Boutwell</i> Wanda Boutwell Title: Environmental Health Specialist IV
----------------------------------	---	--