

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

Name of Facility LAQUINTA INN POOL	Address 3201 MACON RD	City COLUMBUS	County Muscogee
Operator Kurtiss Reynolds 31-136919	Address 909 HIDDEN RIDGE RD STE 60	City IRVING	County
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
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	✓
	Disinfectant residual concentration	6	✓
	pH (7.2-7.8)	7	✓
	Total Alkalinity	8	✓
	Calcium Hardness	9	✓
	Cyanuric Acid	10	✓
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	✓
	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	✓
	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	✓
	Trained operator on duty	33	✓
	Appropriate records on file	34	✓
	Pool test kit(s) available and adequate for all necessary tests	35	✓
	Other	36	✓
Gauge Readings:		Laboratory Results:	
Influent Pressure	0	Alkalinity	0
Effluent Pressure	0	Coliform Count	0
Flow Rate Main Pool	0	Plate Count	0
Flow Rate Wading Pool	0		
Name of Bactericide In Use: <u>Tri-clor</u>		Rate <u>0</u> ppm	
Name of Stabilizer In Use:		Rate <u>0</u> ppm	
Name of Filter System In Use:			
Algae Control Measures:			
Remarks			
Date of Inspection 09/16/2011	Discussed with (Signature) Kurtiss Reynolds Title: Gen. Manager	Inspected by (Signature) <i>Trina Macon</i> Trina Macon Title: Environmental Health Specialist IV	

✓ SATISFACTORY
UNSATISFACTORY

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

Permit No.
 106-P66

Expiration Date
 2012 12 31
 YR MO DA

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

Length of Inspection 0:30 Hours

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

Required Turnover Rate: 48 gpm
 Type of Disinfection:
 Required Concentration:
 6 0
 Bather Load

Purpose
 1. None
 2. Water
 3. Other

Reason for Sample:

**MUSCOGEE COUNTY HEALTH DEPARTMENT
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Item Number	Notes
5	53 gpm
6	5.0
7	7.2
21	In Lobby and rooms
25	At front desk
27	911
30	VGB Act letter on file