

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

Name of Facility	Address	City	County
COUNTRY INN AND SUITES POOL	1664 ROLLINS WAY	COLUMBUS	
Operator	Address	City	County
Eiland Pools	1664 ROLLINS WAY	COLUMBUS	

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	X (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)
PUMPING FILTRATION AND TREATMENT SYSTEM	Clarity	11	✓
	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	X (see addendum)
	Recirculation and filtration equipment readily accessible	17	✓
	Pool & Decks clean and in good repair	18	✓
	Night lighting adequate	19	✓
	Hot & cold water under pressure	20	✓
	DECK AND POOL AREA WATER AND FACILITIES SEWAGE DISPOSAL	Adequate toilet facilities & showers	21
Sewage disposal method: Public		22	✓
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	✓
Main drains properly covered and maintained		30	✓
SAFETY PRE-CAUTIONS		Certified Pool Operator	31
	Lifeguard(s) (if provided) has proper certification	32	✓ (see addendum)
	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:

Influent Pressure	<u>0.00</u>	psi
Effluent Pressure	<u>0.00</u>	psi
Flow Rate Main Pool	<u>62.00</u>	gpm
Flow Rate Wading Pool	<u>0.00</u>	gpm

Laboratory Results:

Alkalinity	<u>0.00</u>	ppm
Coliform Count	<u>0.00</u>	
Plate Count	<u>0.00</u>	

Name of Bactericide In Use: Trichlor
 Name of Stabilizer In Use: cal hypo
 Name of Filter System In Use:
 Algae Control Measures:

Rate 0.00 ppm
 Rate 0.00 ppm

Remarks

Date of Inspection

Discussed with (Signature)

Inspected by (Signature)

01/18/2012

Kay Desai
 Title: owner

Wanda Boutwell
 Title: Environmental Health Specialist IV

SATISFACTORY					
UNSATISFACTORY					
ENFORCEMENT					
None					
Permit Suspended					
✓ Closed Voluntarily					
Re-inspection needed within days					
Hearing Requested/Recommended					
Permit No.					
106-P69					
Expiration Date					
2012	12 31				
YR MO DA					
Purpose					
5	1. Routine 2. Re-inspection 3. Request 4. Complaint 5. Other opening for year				
Length of Inspection <u>01:00</u> Hours					
Pool Type:					
✓ Swimming/Pool Spa Special Purpose Pool: Activity/Interactive/Wading Type: Pool					
Required Turnover Rate: <u>33.00</u> gpm					
Type of Disinfection: _____					
Required Concentration: _____					
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		3	4		
Bather Load					
Purpose					
1	1. None 2. Water 3. Other				
Reason for Sample:					

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Eiland Pools	1664 ROLLINS WAY	COLUMBUS	

Item Number	Notes
5	62gpm
6	0 ppm chlorine
7	7.6
8	80
9	n/a
10	n/a
16	chlorine feeder not working
23	n/a
28	n/a
32	n/a

33 no trained operator on duty