

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

Name of Facility <u>Jim Skate Center</u>		Address <u>4817 Milgen Road</u>	City <u>Columbus GA</u>	County <u>51907</u>	<input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY
Certified Pool Operator <u>CPO - Chelsea Latimore -31-203328</u>		Address <u>Columbus GA</u>	City <u>GA</u>	County <u>51907</u>	
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	1. Water supply approved, adequate	✓			
	2. Depth properly marked	✓	<u>3'-5'</u>		
	3. Overflow facilities adequate	✓			
	4. Constant water level	✓			
	5. Turnover adequate	✓	<u>60-75</u> <u>70</u>		
	* 6. Disinfectant residual: Concentration	✓	<u>1.5-5</u> <u>7</u>		
	* 7. pH (7.2-7.8)	✓	<u>7.2-7.8</u> <u>7.4</u>		
	8. Total Alkalinity	✓	<u>60-120</u> <u>90</u>		
	9. Calcium Hardness	NA			
	10. Cyanuric Acid	NA			
	* 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	✓	<u>closed after 6pm</u>		
WATER AND FACILITIES	20. Hot & cold water under pressure	✓			
	21. Adequate toilet facilities & showers	✓	<u>inside building</u>		
SEWAGE DISPOSAL	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	✓	<u>3-4'</u>		
	24. Warning/Safety sign posted in clearview of pool area	✓			
	25. First aid kits available & properly equipped	✓	<u>Life guard station</u>		
	26. Emergency & lifesaving equipment in conspicuous place	✓			
	27. Emergency phone provided and hard wired	✓	<u>duplicate to 911</u>		
	28. Gas cylinder precautions adequate	NA			
	29. Proper barrier around pool	✓			
	30. Main drains properly covered and maintained	NA	<u>No drains</u>		
OPERATOR AND RECORDS	31. Certified Pool Operator: 1. On-site 2. Contract	1	<u>Chelsea Latimore 31-203328</u>		
	32. Lifeguard(s) (if provided) has proper certification	1	<u>Maggie Morgan exp 5-2012</u>		
	33. Trained operator on duty	✓			
	34. Appropriate records on file	✓			
	35. Pool test kit(s) available and adequate for all necessary tests	✓			
	36. Other	✓			

ENFORCEMENT

None

Permit Suspended

Closed Voluntarily

Re-inspection needed within _____ days

Hearing Requested/Recommended

Permit No.

	P	7	4
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Expiration Date

09	12	31
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Purpose:

2

1. Routine

2. Follow-up

3. Request

4. Complaint

5. Other _____

Length of Inspection 30 Minutes

Pool Type:

Swimming/Pool

Spa

Special Purpose Pool:

Type: Day Care

Required Turnover Rate 60 gpm

Type of Disinfectant Trichlor

Required Concentration 1.5-5

	4	5
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Bather Load

Laboratory Sample

1

1. None

2. Water

3. Other

Reason for Sample:

Remarks: Advised them to add Chlorine Balancer, outside Pool, in high sun

Date of Inspection <u>7-7-09</u>	Discussed with (Signature & Title) <u>Sandy King Childcare Director</u>	Inspected by (Signature & Title) <u>Cherry Ogden EHSI</u>
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