



COUNTY _____

STATE OF FLORIDA
DEPARTMENT OF HEALTH
PUBLIC SWIMMING POOL ENGINEERING INSPECTION REPORT

Name of Pool _____ Location _____
Name of Owner _____ Address _____
Name of Operator _____ Phone Number for Pool Business (____) _____
Plan Approval Number _____ Date _____ Bathing Load _____ Persons _____
Operating Permit Number _____ Date _____ Pool Size _____ Gallons _____

Items marked "X" are not in compliance with the requirements of Chapter 64E-9 of the Florida Administrative Code and must be corrected. Use of the pool without making these corrections will be violations of Chapter 64E-9, Florida Administrative Code, and Chapter 514, Florida Statute, and will place the owner subject to legal action. It is requested that the Department of Health agent listed below be notified when the corrections have been made so that a reinspection can be scheduled. Items marked "N/A" do not apply to this pool.

FILTRATION

- Pressure Vacuum
Sand D.E. Cartridge
Manuf.
Model #
Filter Area

- Test Kit
Manuf.
Model #
Testing Capabilities:
FAC CAC pH
CH TA CYA

- Wall Inlets #
15V. Underwater Lights #
Watts
Heater
Manuf.
Model #
By-Pass
Diving Board Meets Code

EQUIPMENT

- Equipment Room Ventilation
Equipment Room Lighting
Equipment Room Drainage
Pump Manuf.
Model #
Horse Power
Hair and Lint Strainer
Flowmeter (gpm)
Pressure Gauge
Inf. psi Eff. psi
Vacuum Gauge
Reading In. Hg
Thermometer Location
Temperature F
Chlorine Feeder
Manuf.
Model
Capacity
Interlock
pH Adjustment Feeder
Manuf.
Model #
Capacity
Interlock
Makeup Water Source
Auto Water Level Controller
Cross Connections
Vacuum Breaker on Bibbs

- Vacuum Cleaner
Number of fittings
Gas Chlorinator
Manuf.
Model
Capacity
Meets 64E-9.007 (16)(a)
Life Hook W/Pole #
Life Ring W/Rope #
Four Foot Deck
Impervious Slip Resist.
No Overhead Wires
Steps Uniform
Step Edges Marked
28" High Handrails Mounted
In Deck
in Bottom Step
28" High Crossbraced Ladder
Mounted in Deck
3" to 6" Wall Clearance
Depth Marking Permanent
Location Slip resistant
Deck "NO DIVING" markings
Main Drain Grates #
Size
Gutter Drain Grates #
Skimmers #
Equalizer
Floor Inlets #

SANITARY FACILITIES

- Toilets M. F.
Lavatories M. F.
Urinals M. F.
Showers M. F.
Toilet Paper, Towels and Soap
Sanitary Facilities Clean

POOL SIGN

- Prohibits Animals, Food, Drink and Glass on Deck or in Pool
Provides Bathing Load
Shower Before Entering
Pool Hours
4" NO DIVING as Required

OPERATION

- 24 Hr./Day Equipment
Operation or Time Clock
Free Chlorine mg/L
pH
Pool Clean
Water level High Low
Water Appearance

COMMENTS AND INSTRUCTION

Copy of this Inspection Report Received by: _____

Date of Inspection 8/26/2003 Department of Health Engineer/Sanitarian _____

Print Name _____

Telephone Number for Dept. of Health Agent(____) _____