### RECREATIONAL FACILITY INSPECTION REPORT

**Environmental Health Division**

2120 Diamond Boulevard, Suite 100, Concord, CA 94520

(925) 608-5500 FAX (925) 608-5502  (http://cchealth.org/eh/

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**DBA/Name:**

**Identifier:**

**Date:**

**Address:**

**City/Zip:**

**Phone:**

**Program Record #:**

**Owner/Operator:**

**Onsite Contact Person:**

**Re-Inspection Date (on or after):**

**Current Permit:** Yes [ ] No [ ]

**Program Element:**

**Service Code:**

**Time In:**

**Time Out:**

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### MEASUREMENTS

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A $____/hour (1 hr. minimum) fee will be charged for verified complaints, to reopen facilities ordered closed, re-inspections for change of ownership, or when listed violations are not corrected. Inspection reports may be posted on the Contra Costa Environmental Health website.

**KEY:** (IN) = In Compliance, (N/A) = Not Applicable/No Access, (OUT) = Out of Compliance

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#### WATER TREATMENT

1. **D**i**S**i**N**fe**C**tant **(free):** ppm
2. **pH** (7.2 to 7.8)
3. **C**YA ≤ 100 ppm
4. **S**PA **T**EMPERATURE ≤ 104°F
5. **C**lar**i**ty (main drain visible)
6. **D**e**B**ris/ALGAE/FECAL/VOMIT
7. **B**acteriolog**i**cal

#### POOL STRUCTURE

8. **P**ool **S**hell
9. **W**ater **L**ine **T**iles
10. **C**op**i**ng or **E**quivalent
11. **D**epth **M**akers

#### POOL SHELL

12. **D**epth **M**arking **L**ine
13. **P**rotrusions/Decor**a**tive **D**esigns
14. **S**kimmer/Over**f**low **S**ystem
15. **R**eturn **I**nlet **F**ittings

#### LIGHTING

16. **H**and **A**nd **G**rab **R**ails/STAIRS
17. Ladders/Step Holes
18. **D**eck (trip hazards/slope/artificial cover)
19. **D**eck (4 ft. perimeter clearance)
20. **D**iving **B**oards/Starting Blocks
21. **V**isible **E**lectrical **H**azards/GFCI

#### SUPervision

22. **T**owels/ **S**wim **W**ear
23. **A**nimals **P**resent
24. **E**mployee **E**nforcement

#### SAFFETY EQUIPMENT

25. **L**ife **R**ing with **A**ttached **R**ope
26. **S**pa **E**mergency Shut-Off Switch
27. **S**uction **O**utlet **F**ittings/Covers
28. **S**econdary **A**nti-Entrapment Device

#### DOORS/GATEs/ENCLOSURE

29. **N**o **A**ccess **P**rovided **T**o **E**nviron. **H**ealth
30. **G**ate **S**elf-Latching & Self-Closing
31. **G**ate **O**pens Outwards **A**way **F**rom **P**ool
32. **N**o **P**oint **A**ccess **F**rom **R**esidences
33. **E**mergency Exit
34. **F**ence/Gate
35. **C**limbing Hazards

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**SAFETY SIGNS**

58. “WARNING—NO LIFEGUARD ON DUTY”
59. “CHILDREN UNDER 14 WITH PARENT/ADULT GUARDIAN”
60. “NO DIVING”
61. “NO USE OF POOL AFTER DARK”
62. “KEEP CLOSED” PROVIDED ON GATE
63. “EMERGENCY EXIT”
64. “EMERGENCY EXIT”
65. “EMERGENCY CONTACT INFORMATION”
66. “ARTIFICIAL RESPIRATION/CPR”
67. “SPCA CAUTION & EMERGENCY SHUT-OFF”
68. “DIARRHEA”

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**SPECIALIST:** ___________________  **PHONE:** _______________  **RECEIVED BY:** ___________________

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To Be Emailed To:

Page 1 of [DA Serial Number]
15. Skimmer/Overflow System/Water Level

A) Missing wiers. Each skimmer assembly shall have an automatically adjusting weir, and be kept in good repair. Repair/replace weir(s).

B) Missing “o-ring” gaskets in float valves in skimmers located at far end of pool, near handrail, and closest to restroom. Each skimmer assembly shall have an air-lock protective device, and be kept in good repair. Replace “o-ring” gasket(s).

Each skimmer assembly shall have an automatically adjusting weir, an air-lock protective device, a removable and cleanable screen or basket, and be kept in good repair. [§116040, 116043, 3108B.4, 3110B.1]

<table>
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<tr>
<th>RE-CIRCULATION EQUIPMENT</th>
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<td>Pump Make:</td>
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<td>Pump Model:</td>
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<td>No. of Pumps:</td>
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<td>Disinfectant Feeder Make:</td>
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<td>UV System Make:</td>
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<td>UV System Model:</td>
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<tr>
<td>Acid Feeder Make:</td>
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General Inspection Observations

Please be aware that the recommended service life for main drain and skimmer equalizer covers may vary depending on manufacturer. If your covers are older than this they can become brittle due to exposure from pool chemicals, heat, and other environmental conditions. Covers that are past their recommended service life should be replaced with approved covers and a new AB1020 compliance form must be completed and submitted by a state licensed contractor or engineer within 30 days of the installation. Should you have any questions on this, please contact your inspector.

CLOSURE DIRECTIVE

The facility is hereby ordered to close in accordance with the California Code of Regulations, Title 22, Section 65545 and is to remain closed until written authorization to re-open is given by an authorized representative of Contra Costa County Environmental Health. Any posted closure signs are to be removed only by an authorized representative of Contra Costa County Environmental Health.

Once the violations that led to the closure have been corrected, contact this office at (925)-692-2500 to request a re-inspection.