Δαμatic Facility Permit #·	Aquatic Venue Identifier:	Date [,]

Aquatic Facility Inspection FormBased on CDC's 2024 Model Aquatic Health Code

	Nam	ne of Aquatic Facility Address			City		State	Zip Code		
Venue 1	Гуре:	Pool Hot tub/Spa Wading Pool Interactive water play venue	e Floa	itation Ta	ank	Other				
Area	Item	Descriptions (▲ = critical violations)	Points	ln	Out	N/A	Risk Type*:			
	1	▲ Enclosure: fencing, walls, gates and doors in good repair	10				1 2	! 3		
	2	▲ Self-closing/Self-latching gates or doors operational	10							
	3	▲ Protected overhead electrical wires/GFCI electrical receptacles	10				_ Time:			
	4	Grab rails, ladders secured; shell, deck in good repair	5							
	5	Float/safety line clearly present	5				In			
	6	▲ "Depth" & "no diving" markers; stair stripes; in good repair and visible	10				Out			
	7	Skimmers: Weirs and baskets installed; clean and operating; covers in good repair	5				Out			
g	8	Recirculation inlets functional	5					0/		
Pool/ pa Are	9	▲ Main drain grate secured in place & in good repair	10				Score:	%		
Pool/ Spa Area	10	▲ Water is clear, main drain visible	10				Letter Grade:			
	11	Starting blocks removed, covered, or access blocked	5				Lottor drade.			
	12	Pool deck free from obstructions; emergency exit marked	5				Previous Score: %			
	13	Emergency phone or other communication device available and well-marked	5							
	14	First Aid Kit available	5				Purpose of Vis	sit (Select one)		
	15	▲ Appropriate safety equipment present & in good repair	10					(,		
	16	▲ Adequate supervision of the aquatic facility	10				Routine			
	17	Signs: Bathing load/rules/chemicals/spa legible and in good repair	5				Complaint			
	18	Water temperature ≤ 104°F (40°C)	5							
	19	Approved NSF/ANSI Standard 50 DPD test kit	5				Follow-Up			
r	20	⚠ Proper disinfectant level	10				Ī			
Water Chemicals	21	⚠ pH properly maintained	10				Illness			
	22	Combined chlorine < 0.4 ppm	5				Incident			
	23	A Proper cyanuric acid level	10							
	24	Automated feeder operable	10				Other			
	25	Automated controller operable	5				1			
	26	Piping and valves identified and marked	5				Water Quality	Readings		
ΣĘ	27	Flow meter present and operating	5				1 ———			
Equipment/ Chemical Room	28	A Recirculation pump: approved, good repair, operating	10				Free	nnm		
<u> </u>	29	⚠ Filter: approved, good repair, operating	10					ppm		
E E	30	Pump strainer: baskets in good condition, not clogged	5				Free			
교육	31	Filter gauges operable: filter inlet and outlet, strainer; sight glass	5				bromine _	ppm		
	32	Proper functioning UV system; ozone system	5							
	33	⚠ Chemicals: labeled, stored safely, secured	5				pH _			
	34	Appropriate Personal Protective Equipment (PPE) available	5				Total			
	35	Diaper-changing station present; sink, adjacent trash can, sanitizer	5				alkalinity _	ppm		
e s	36	Used equipment separated from cleaned equipment	5				Calcium			
Hygiene Facilities	37	Toilets: clean, good repair, bathroom appropriately stocked	5				hardness _	ppm		
Hyg Faci	38	Rinse showers: good repair, accessible	5					• • • • • • • • • • • • • • • • • • • •		
	39	Cleansing showers: Warm, non-scalding water available; good repair; soap	5				Cyanuric acid _	ppm		
	40	Operator training certification available onsite	5					pp		
	41	Lifeguard training certification available onsite	5				Water	°F		
	42	Inspection report conspicuously posted at each entrance	5				_ Temp _	г		
Records Room	43	Operator inspection daily items: checklist used daily	5				1			
	44	Operator inspection items: evidence of appropriate steps promptly taken	5				Grading System:			
	45	Chemical records: filled out daily	5				A = 95–100%			
	46	Chemical records: miled out daily Chemical records: evidence of appropriate steps promptly taken	5							
	47	Emergency Action Plan available on site	5				B = 85–94%			
_	48	Floatation Tank: Ozone or UV system in proper working order	10				D = 00-3470			
	49	Floatation Tank: Ozone or UV system in proper working order Floatation Tank: Ozone or UV system meets volumetric turnover requirements	10				C = 75-84%			
era	50	Floatation Tank: Ozone or ov system meets volumetric turnover requirements Floatation Tank: Interior surfaces cleaned to prevent build-up of slime and biofilm layers	5							
General	51	Substantial unauthorized alterations/equipment replacement	10				F = 74% or less			
	52	Other: Imminent Health Hazards are a 10-point critical violation	5 or 10				or critical i	item		
Dointe		nts for all scored categories; for in (blue) and out of (red) compliance	TOTAL				1 ,	, , ,		
runts:	auu µUll	no for an ocorea categories, for in (blue) and out of (fed) compliance	TOTAL				http://www.cdc.	gov/mahc/		

Aquatic Facility Permit #:	
AODANC FACION PERIOD #:	

Aquatic Venue Identifier:

Date: _____

Inspection Results

OUT= Out of compliance R= Repeat COS= Corrected On Site During Inspection

Inspection Results	Item #	COS/Correct by date	Description of Violation	Corrective Actions		
OUT						
R						
cos						
OUT						
R						
cos						
OUT						
R						
cos						
OUT						
R						
cos						
OUT						
R						
COS						
Operator Name	e:					
Operator Signature:						
Inspector Name:						
Inspector Signature:						
Inspector's comments:						



^{*} For explanation or definition of inspection items, see the Cheat Sheet for Calculating Scores for the Aquatic Facility Inspection Form.