



SWIMMING POOL/SPA INSPECTION REPORT



Story County Environmental Health
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Nevada, Iowa 50201
515-382-7240
healthweb@storycountyia.gov
Form Revision 3/31/2023

Date of Inspection:	4/5/23			Registration #	<input checked="" type="checkbox"/> Pool <input type="checkbox"/> Spa <input type="checkbox"/> Other
Facility Name:	Fairfield Inn			Registration #	<input type="checkbox"/> Pool <input type="checkbox"/> Spa <input type="checkbox"/> Other
Facility Physical Address:				Registration #	<input type="checkbox"/> Pool <input type="checkbox"/> Spa <input type="checkbox"/> Other
City:	Ames	County:		State:	IA
Person Contacted:				E-Mail:	
Name of CPO(s)					

CHEMICAL FEED SYSTEMS AND SECONDARY DISINFECTANT

Disinfection make and model #:

Type:

☐ Bromine ☐ Trichlor ☐ Calcium Hypochlorite ☐ Sodium Hypochlorite ☐ Lithium Hypochlorite ☐ Cl (gas) ☐ Other: _____

WATER CHEMISTRY

Type (Pool, Spa, Plunge Pool, etc)	Free Chlorine <small>Pool 1.0-8.0 Spa 2.0-8.0</small>	Combined Chlorine	Total Chlorine	Bromine <small>Pool 2.0-18.0 Spa 4.0-18.0</small>	pH <small>Pool 7.2-7.8 Spa 7.2-7.8</small>	Cyanuric Acid <small>Pool 0-40 Spa 0-40</small>	Controller <small>ORP 700-880</small>	Controller <small>pH 7.2-7.8</small>	Spa Temp <small><= 104°</small>
Pool	3.16	.55	3.71		7.3				
Spa	11.4	0	11.4		7.1				

Ladders/Railings/Stairs/Ramps (Pool 15.4(4) - Spa 15.51(4))

#	S	U	N/A	
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b(2) & b(5): Ladders and rungs are securely anchored.
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b(3): The bottom end of ladder is within one inch of the pool wall and covered with a smooth non-metallic cap.
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b(4) & b(2): Steps, rungs, and ramps are slip resistant.
4	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b(5): Pool over 30 ft wide have recessed steps, ladders, ramps, or stairs installed on each side.
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b(6)-(7): Grab rails or handrails securely anchored.
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	b(8): Stairs have slip resistant color contrasting stripe at least 1 inch wide marked at the leading edge of each

Emergency Equipment and Signage (Pool 15.4 - Spa 15.51)

#	S	U	N/A	
7	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(4)f(1): Required lifesaving equipment provided.
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)f(4): First-aid kit containing bandages, 4x4 bandage compress, self-adhering gauze bandage, disposable gloves & chemical cold compress. Signage if required.
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)f(6) & d: A designated emergency telephone with instruction. Signage posted as required.
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(6)b(1)-(3): Legible pool rules signs posted at two locations (No Diving, No Rough Play, No Running).
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(6)d(1): 'No Lifeguard' (Children under 12 must be accompanied by an adult) sign posted at each swimming

Deck (Pool 15.4 - Spa 15.51)

#	S	U	N/A	
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)c(2): Starting blocks removed, covered, or a sign posted to prevent use by the during general use peri-
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)d(2) & (1)g(2): Vacuum breaker backflow preventers provided on all hose bibs on the deck.
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)j(1): Depth markers within 3 ft from edge of pool.
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)j(2): Depth markers in 1 ft depth intervals and not more than 25 ft apart in shallow water.
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)j(3): Depth markers not more than 25 ft apart around the deep end of swimming pool.
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)j(6): "No Diving" marked in areas where diving is not permitted (not more than 25 ft apart).
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)j(7): Letters, numbers & graphics marked on decks and slip resistant.
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)k(1)-(3) & (4)h(1)-(4): Decks are slip resistant, have durable and cleanable surface, are free of litter, obstructions & tripping hazards.
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)k(3) & (4)i: No underwater or overhead projections or obstructions.
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)m(1) & (4)j(1): Electrical outlets serving pool deck equipped with (GFCI).
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)m(2) & (4)j(4): Artificial lighting provided for indoor or outdoor pools/spas used after sunset (overhead and/or underwater lights) are functional.

Fence/Wall (Pool 15.4(4) - Spa 15.51(4))

#	S	U	N/A
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(1) & k(1): Pool enclosed by a fence, wall, building enclosure or combination not less than 4 ft high.		
24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(2) & k(2): The distance between the ground & the top of the lowest horizontal support is at least 45". Fence, wall, or other means of enclosure has no openings greater than 4".		
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(3) & k(3): A gate at least 36" wide provided for emergency purposes.		
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(4) & k(3): Gates are lockable.		
27	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(5) & k(4): Gates/doors are self-closing and self-latching (where lifeguards are not provided). Indoor pool enclosed by barrier at least 3' high if there are sleeping rooms, hallways, apartments, condos or permanent recreation areas used by children that open directly into the pool area.		
28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(6): Wave pool continuous barrier at least 42 inches high along the full length of each side of the wave pool.		

Skimmers (Pool 15.4 - Spa 15.51)

#	S	U	N/A
29	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	(1)b(4)1 & (1)e(1)-(2): Skimmers have self-adjusting weirs and removable baskets.		
30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(4)g & (4)e: Pool/spa water levels maintained at the skimming level.		
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(4)h(4) & (4)f (5): Skimmer equalizer openings VGB compliant or the equalizers plugged.		

Pool (Pool 15.)

#	S	U	N/A
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	4(2)c: Grate clearly visible. Grate openings visible in water less than 8ft deep.		
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	4(3)b(1): Pool/spa does not require cleaning.		
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	4(4)h: Fully submerged outlets not missing or broken.		
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	4(4)h(3): A pool/spa with a single submerged outlet that is not unlockable is equipped with a SVRS.		
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	4(4)i(1): The bottom and sides of pool are white or light color.		
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	4(4)m(2)2: Underwater lights more than 15 V equipped with a GFCI.		
38	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	5(18)c: Each section of a multi-section pool is separated from the other sections by a float line (built or reconstructed since March 10, 1993).		
39	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	5(13)f(3): Where pool depth changes from shallow to deep, a 4-inch-wide stripe is marked (floor and wall) at 5 feet depth (built or reconstructed since March 14, 1990).		

Diving Boards (Pool 15.4(4)c)

#	S	U	N/A
40	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(6): Diving boards/platforms have slip-resistant surfaces.		
41	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(8)-(9): Diving board handrails and guard rails present and secure.		
42	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(10): Diving board supports, platforms & steps have no obvious visual structural problems.		

Water Slides (Pool 15.4)

#	S	U	N/A
43	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(4)d(5): Lifeguard (or shallow water guard) at the top and bottom of slide.		
44	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(4)o(1): Structures are free of obvious structural defects.		
45	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(4)o(2): The walkable surface is smooth and continuous.		
46	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(4)o(3): The walkable surface of flume has no sharp edges within reach of a user while in the proper sliding position.		
47	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(6)e(1)-(6): Water slide rules are posted near the slide.		

Spray Pads (Pool 15.5(19))

#	S	U	N/A
48	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	a: The surface of a spray pad shall be impervious and durable. Padding specifically designed for spray pads may be used with play features.		
49	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	b: The spray pad surface shall slope to drain. Deck or other areas outside the spray pad shall not drain into the spray pad.		
50	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	c: Unless the spray pad is supervised by facility staff, a sign shall be posted near the spray pad that addresses: No running on or around the spray pad, No rough play, No facility supervision. Parents are responsible for supervising their children.		
51	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	d: Spray pads drains shall be gravity outlets. At least two drains or a single drain that is unblockable shall be provided.		
52	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	e(2): On independent treatment systems the tank shall be accessible for cleaning and inspection.		
53	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	e(3): On independent treatment systems the recirculation treatment system and play feature pump and piping system shall be separate.		
54	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	e(5): On independent treatment systems the play feature pump system shall be designed so that it will not operate if the recirculation system is not operating.		

Spa (Spa 15.51)

#	S	U	N/A
55	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(2)e(3): Spa temperature recorded when water quality testing is done.		
56	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(2)e(1)-(8): Spa: ORP and pH at opening and every 2 hours; free Cl (Br) and temperature 2x daily+; combined Cl and cyanuric acid daily; total alkalinity weekly and at each fill; calcium hardness at each fill & bacteria testing		
57	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	(3)b(1): Spa does not require cleaning.		
58	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(3)b(2): Spa drained, cleaned & refilled: 500 gal or less 1x week, 500 -2000 gal 1x every two weeks, more than 2000 gal 1x every three weeks.		
59	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(4)c: Spa water temperature does not exceed 104°F.		
60	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(4)f: Fully submerged outlets not missing or broken.		
61	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(4)f(2)3: Submerged outlet (VGB) certification of compliance (main drain, equalizer, feature outlets, etc.) is on-site.		
62	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(4)f(4)1-3: SVRS product information that demonstrates compliance is on-site. SVRS tested monthly and the test dates recorded.		
63	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(4)j(4)2: Underwater lights more than 15 V equipped with a GFCI.		
64	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(4)l: Agitation system control out of reach of persons and timer is 10 minutes or less.		
65	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(5)b: Spa rules sign (8 required stipulations) posted.		
66	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	(5)c: Max spa depth posted (letters or numbers 3in high).		

Bathhouse (Pool 15.4 - Spa 15.51)

#	S	U	N/A
67	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(1)d(2) & (1)g(2): Vacuum breaker backflow preventers provided on all hose bibs in the bathhouse.		
68	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(4)m(1) & (4)j(1): Electrical outlets in the public dressing, lavatory, and shower areas are protected by GFCI receptacles at the outlet or breaker serving the outlet.		
69	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(5): Showers, dressing rooms & sanitary facilities are clean & free of debris.		
70	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(5)a-b: Floors slip-resistant and maintained without standing water.		
71	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(5)c: Carpet not in wet areas of the bathhouse/dressing area.		
72	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(5)d: Lavatories, showers & sanitary facilities functional.		
73	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	(5)e: Soap at each lavatory and indoor shower fixtures.		

Mechanical Room (Pool 15.4 - Spa 15.51)

#	S	U	N/A	
74	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)a & (1)a: Filtration system is in good working condition.
75	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)b(1) & (1)c: The recirculation system is operating continuously (except for backwashing or servicing).
76	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)b(1) & (1)c: The circulation system flow meter(s) are functional.
77	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)b(2) & (1)b: Pressure gauges (before and after) filter pump
78	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)c & (1)f: Wastewater and backwash is discharged through an air break or air gap.
79	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)d(1) & (1)g(1): Water supplied to a pool/spa is discharged to the system through an air gap or a reduced principle backflow device.
80	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)d(2) & (1)g(2): Vacuum breaker backflow preventers provided on hose bibs in mechanical room.
81	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)e(2) & (1)h(2): Gas-fired heaters have AGA seal and equipped with a pressure relief valve.
82	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)e(3) & (1)h(3): Fuel-burning water heaters are vented to the outside.
83	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)e(4) & (1)h(4): Rooms with fuel-burning equipment has opening to the outside for providing combustion air.
84	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(2)f(4)-(5) & (2)f(4)-(5): ORP/pH controller with numerical analog or digital display
85	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(3)a(1) & (3)a(1): Continuous disinfection feed equipment installed and operational.
86	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(3)a(2) & (11)h: Continuous pH chemical feed equipment installed and operational.
87	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(6)j & (5)i: A schematic drawing of the recirculation system is posted or clear labeling of piping with flow direction and water status (unfiltered, treated, back-

Chlorine Gas (Pool 15.4(4)n)

#	S	U	N/A	
88	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1)1: Chlorine gas room has an exhaust system.
89	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1)2: An air intake provided near the ceiling.
90	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1)3: The exhaust fan shall be operated from a switch labeled "Chlorine Exhaust Fan" in a nearby location outside the chlorine room or building.
91	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1)4: Discharge from exhaust outside of pool enclosure.
92	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1)5: Artificial lighting provided in chlorine room.
93	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(1)7: A plastic bottle of commercial strength ammonia solution for leak detection.
94	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(2)1: Chlorine gas cylinders are individually anchored with safety chains or straps.

Chemical Storage & Equipment (Pool 15 - Spa 15.51)

#	S	U	N/A	
95	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4(2)f(1)-(3) & (2)f(1)-(3): A swimming pool/spa facility has water testing equipment for free chlorine & combined chlorine, or total bromine; pH; total alkalinity; calcium hardness; & cyanuric acid.
96	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4(3)b(2): A vacuum cleaning system is provided.
97	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4(4)a(2) & (4)a(2): Swimming pool/spa chemicals properly stored & handled.
98	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4(4)a(4) & (4)a(4): Chemical containers clearly labeled.
99	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4(4)a(5) & (4)a(5): A chemical hazard warning placed at the entrances to rooms where chemical are used or stored.
100	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(11)g: Sodium hypochlorite tanks larger than 55 gallons have secondary containment (built or reconstructed since May 4, 2005).

Facility Records (Pool 15.4) - Spa 15.51)

#	S	U	N/A	
102	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(2)a(1)-(6) & (2)a(1)-(6): Water quality readings recorded are in the correct range (or closures noted when out of range).
103	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(2)e(1)-(6): Swimming pool: ORP and pH at opening and every 4 hours; free Cl (Br) 2x daily; combined Cl, total alkalinity and cyanuric acid weekly; calcium hardness & bacteria testing monthly.
104	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(4)h(1)3 & (4)f(2)3: Submerged outlet (VGB) certification of compliance (main drain, equalizer, feature outlets, etc.).
105	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1)b(2) & (1)b: Pressure gauges (before and after) filter pump
106	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(4)h(3)1-3 & (4)f(4)1-3: SVRS product information that demonstrates compliance is on-site. SVRS tested monthly and the test date(s) recorded.
107	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(6)h: Certified operator, lifeguard, first-aid, & CPR certificates.
108	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(6)f(3) & (5)e(4): Facility maintains reports of complaints, accidents, injuries, & illness. Reports submitted as required.
109	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(6)f(4) & (5)e(5): Dates & quantities of chemical additions, including resupply of chemical feed systems.
110	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(6)f(5) & (5)e(6): Dates when filters were backwashed, cleaned, or a filter cartridge was changed.
111	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(6)f(6) & (5)e(8): GFCI receptacles & breakers are tested at least 1x/month and dates of test dates recorded.
112	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(6)f(7) & (5)e(9): MSDS for chemicals on-site, reviewed annually, and date(s) of review recorded.
113	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(6)i(1)-(6) & (5)g(1)-(6): Operations manual on-site (water testing procedures, backwash, vacuuming, etc.).
114	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(6)l: A written emergency plan onsite and reviewed annually by staff, and date(s) of review recorded.

Iowa Smokefree Air Act (Iowa Code §142D)

#	S	U	
115	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No violations observed (No evidence of smoking in prohibited areas, no ashtrays present, signs posted at entrances)

Story County Code of Ordinances Chapter 64**Facility Requirements (64.07)**

#	S	U	N/A	
116	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(1): Carbon Monoxide detectors in place, dated and current.
117	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(2): Designated Signee current.
118	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(3)a: Inspection Agency Placard posted.
119	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(3)b: Water test results posted (if required).

Aquatic Facility Personnel (64.08)

#	S	U	N/A	
120	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(1): Certified Operator in Charge (COC).
121	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(1)b: CPO info current.
122	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(2): Only a Responsible Person shall be allowed to perform operational tasks.
123	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(2)b: Training records maintained and current.

Daily Pre-Opening Checklist (64.09)

#	S	U	N/A	
124	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Daily Pre-Opening Checklist completed.

Include the number to the left of the violation with your response to the method and date of correction in your Corrective Action Plan.

If any of the conditions identified below occur during operation of the swimming pool or spa, the owner or their representative (i.e. CPO, Lifeguard, Manager, etc.) must immediately close the pool/spa and document the closure in the daily logs in accordance to 641 IAC Chapter 15. The pool or spa must remain closed until proper operating conditions are achieved and recorded in the daily logs.

- The swimming pool shall be closed if the free chlorine measurement is less than 0.6 ppm or the total bromine measurement is less than 1.0 ppm.
- The spa shall be closed if the free chlorine measurement is less than 1 ppm or the total bromine measurement is less than 2.0 ppm.
- The spa shall be closed if the temperature is greater than 104°.
- The swimming pool or spa shall be closed if the free chlorine measurement is greater than 8.0 ppm or the total bromine measurement is greater than 18.0 ppm.
- The swimming pool or spa shall be closed if the ORP is less than 650 mV or greater than 880 mV.
- The swimming pool or spa shall be closed if the pH measurement is less than 6.8 or is greater than 8.2.
- The swimming pool or spa shall be closed if the cyanuric acid measurement is greater than 80 ppm.
- The swimming pool or spa (when the spa agitation system is off) shall be closed if the main drain is not clearly visible. (This can be caused by problems such as poor water clarity, surface reflection, and/or inadequate lighting.)
- The swimming pool or spa shall be closed if submerged suction outlets (drain cover, equalizer cover, feature outlets, etc.) are missing or broken.
- The swimming pool or spa shall be closed when chemical additions are made from the deck for at least one-half hour or until the disinfectant residual returns to acceptable levels
- Two consecutive positive test results for coliform bacteria. (After the first positive result, the local inspection agency office should be contacted, and the pool shall be super chlorinated (the addition of chlorine disinfectant compound to a concentration of at least 10 ppm free chlorine) at the facility's earliest convenience but not to exceed 24 hours. A recheck sample shall be taken once the disinfectant residual returns to acceptable levels. The pool shall be closed if the second sample is positive and may reopen once no coliform bacteria are detected and the above listed requirements are met.

A list of the deficiencies that were identified in the inspection report require a Corrective Action Plan. Please respond within **10 days** of receipt of the report to the identified deficiencies by completing a Corrective Action Plan with an explanation of how the deficiencies will be corrected and the timeframe. If a deficiency cannot be completed before you respond, you must set a fixed time for correction. Failure to respond within the required timeframe may result with enforcement action against your facility pursuant to Iowa Code 135I and 641 IAC 15.6.

Example:

Date: 3/1/2023

Corrective Action Plan for Stay the Night Hotel

#2 Non-metallic cap was replaced 3/3/2023.

#81 Pressure relief valve will be installed by 3/27/2023.

#114 Emergency Action plan will be developed, maintained and staff trained by 4/15/2023.

Wade Walters

CPO/Maintenance Manager

Pool/Spa Representative

IDPH Representative

Date

Date

*The inspection reviewed the facility in relation to the particular requirements of 641 IAC Chapter 15 identified above. The inspection is limited in scope and time noting observed deficiencies. Deficiencies may have occurred before the inspection, may occur after the inspection, or may not have been directly observable by the inspector at the time of inspection. The inspection in no way waives any of the requirements of 641 IAC Chapter 15 and the facility will be required to correct any deficiencies identified through future inspections. The inspection does not review any other local, state, or federal laws, ordinances, regulations, or requirements that may apply to this facility.