

**Demerit Score:** \_\_\_\_\_ Health Department \_\_\_\_\_  
**Date of Insp/Chg** \_\_\_\_\_ **Current Facility ID** \_\_\_\_\_  
**Status Code:** \_\_\_\_\_ Old Facility ID \_\_\_\_\_

<b>Water Supply:</b>	<input type="checkbox"/> Community	<input type="checkbox"/> Non-Transient Non-Community	<b>Water sample taken today?</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	<input type="checkbox"/> Transient Non-Community	<input type="checkbox"/> Non-Public Water Supply	<input type="checkbox"/> Inspection	<input type="checkbox"/> Name Change	
<b>Wastewater System:</b>	<input type="checkbox"/> Community	<input type="checkbox"/> On-Site Systems	<input type="checkbox"/> Re-Inspection	<input type="checkbox"/> Verification of Closure	
			<input type="checkbox"/> Visit	<input type="checkbox"/> Status Change	

**Name of Establishment:** \_\_\_\_\_ **Pool Operator:** \_\_\_\_\_  
**Location Address:** \_\_\_\_\_ **Mailing Addr.:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** NC **Zip:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

	Points Deducted (Circle)	* Indicates critical item (6-point demerit)
<b>WATER QUALITY: (.2535)</b>		
*1. Water clear enough to clearly see bottom of pool and pool drain .....	6	_____
*2. Disinfectant residual provided by: free chlorine = _____ (at least 1.0 ppm or 2.0 ppm where required); bromine = _____ (at least 2.0 ppm); or biguanide = _____ (30 to 50 ppm).....	6	_____
*3. Pool water pH = _____ (7.2 to 7.8).....	6	_____
*4. Water temperature of heated pool _____ °F; does not exceed 90°F (swimming pool) or 104°F (spa) .....	6	_____
5. Daily written records of water quality and test kit kept on site .....	4	_____
<b>POOL MAINTENANCE:</b>		
*6. Submerged suction outlets meet ANSI/APSP/ICC-16 2017. Single drains protected. (.2537, .2539) GPM= _____ Field verification complete= _____	6	_____
7. Pool walls and floor kept clean, free of debris and in good repair (.2537).....	4	_____
8. Surface skimmers (with weirs, baskets and covers) or gutters clean, in good repair, and functioning properly, no floating debris (.2518, .2537) .....	4	_____
9. Depth markings and no diving markers or signs visible and properly located (.2523, .2537).....	4	_____
10. Safety ropes with floats and contrasting color bands provided at shallow area breakpoints (.2515, .2523).....	2	_____
11. Diving equipment, ladders, steps and handrails properly placed, in good repair (.2517, .2521).....	2	_____
12. Inlets and other fittings in place and in good repair (.2537).....	4	_____
13. Contrasting band on steps and benches (.2521, .2516, .2532).....	4	_____
14. Spa timer working properly (.2537).....	4	_____
<b>PREMISES:</b>		
*15. Body hook and ring buoy with throw rope or lifeguard with rescue tube provided and properly located (.2530, .2537) .....	6	_____
16. Fence or barrier with self-closing, self-latching gates properly constructed and maintained (.2528, .2537) .....	4	_____
17. Decks unobstructed, properly drained, free of trip hazards (.2522, .2537).....	4	_____
18. Lifeguards present or warning signs posted (.2530) .....	4	_____
19. Signs prohibit glass containers or pets in pool area(.2530) .....	4	_____
20. Caution signs posted at hot water spas (.2532) .....	4	_____
21. Pool and deck lighting provided at pools that operate at night (.2524, .2537) ...	4	_____
*22. Emergency telephone provided (.2530) .....	6	_____
<b>EQUIPMENT ROOM:</b>		
23. Chlorine or bromine automatic feeders that meet NSF Standard 50 (.2535) .....	4	_____
24. Approved pump, filter, and flow meter operating properly (2518, .2519) .....	4	_____
25. Equipment and chemicals kept in a dry, well-ventilated enclosure (.2533, .2534, .2537) .....	2	_____
26. Valves and pipes identified by color codes or labels (.2518) .....	2	_____
27. Filter backwash discharged through an air gap (.2513) .....	2	_____
<b>DRESSING AND SANITARY FACILITIES:</b>		
28. Bathhouse or rest rooms accessible; shower sign posted (.2526) .....	2	_____
29. Required fixtures provided, clean, and in good repair (.2526) .....	2	_____
30. Approved water source, no cross connections (.2512) .....	2	_____
31. Sewage disposed of in a properly operating sewage system (.2513) .....	2	_____
32. Floors smooth, slip-resistant, kept clean(.2526) .....	2	_____
33. Hose bibbs and floor drains provided (.2526) .....	2	_____

Inspection Conducted by: \_\_\_\_\_ EHS I.D.# \_\_\_\_\_ Comment Sheet Attached  
 Report received by: \_\_\_\_\_  Yes  No

**Purpose:** General Statute 130A-282 requires the Commission for Public Health to adopt rules governing Public Swimming Pools. 15A NCAC 18A .2511 specifies the contents of an inspection form to record the results of inspections. This form is developed to be used in making inspections of public swimming pools, spas, wading pools and water recreation attractions. **Preparation:** Local environmental health specialists shall complete the form every time they conduct an inspection. Prepare an original and two copies for: **1.** Original to be left with the responsible person. **2.** Copy for the local health department. **3.** Copy for the Environmental Health Section. **Disposition:** This form may be destroyed in accordance with Standard-8.B.6., Inspection Records, of the *Records Disposition Schedule* published by the NC Division of Archives and History. Additional forms may be ordered from: Environmental Health Section, 1632 Mail Service Center, Raleigh, NC 27699-1632.  
 EHS 3960 (Revised 11/23)