

# Public Swimming Pool Inspection Report

Health District: Darke County

Name of facility	Type visit	Type pool	Setting	Special feature (SF)	
<u>Lazy R Campground</u>	<input type="checkbox"/> Standard <input type="checkbox"/> Re-inspection <input checked="" type="checkbox"/> Complaint <input type="checkbox"/> Epi Investigation <input type="checkbox"/> Consultation	<input checked="" type="checkbox"/> Pool <input type="checkbox"/> SPA <input type="checkbox"/> SUP	<input type="checkbox"/> Wading pool <input type="checkbox"/> School <input type="checkbox"/> Indoor <input type="checkbox"/> Apartment/Condo <input type="checkbox"/> Other	<input type="checkbox"/> Zero Entry <input type="checkbox"/> Govt <input checked="" type="checkbox"/> Outdoor <input type="checkbox"/> Hotel/motel	<input type="checkbox"/> Kiddie slide <input type="checkbox"/> Playground slide <input type="checkbox"/> Rec slide <input type="checkbox"/> Water slide <input type="checkbox"/> Fountain <input type="checkbox"/> Other

Insp date (mm/dd/yy) <u>07/01/16</u>	Insp Time	Travel Time	ID no.	License no. <u>10</u>
Surface area (sf) <u>714</u>	Required turnover rate (min) [ie 30] <u>480</u>	Volume (gallons) <u>22759</u>	Required flow min: (gpm) [Volume/TRate] <u>72</u>	

☐ Check if in violation of the Ohio Administrative Code 3701-31-04 (A-E); NA= Not Applicable

<input type="checkbox"/> Flow measure reading (gpm)	<input type="checkbox"/> Max allow. filter flow: (gpm) [filter label]	<input type="checkbox"/> Max allow. flow: SF pump capacity (gpm)	<input type="checkbox"/> Max allow. flow: Jet pump capacity (gpm)
---	---	--	---

## Critical violations (3701-31-04(B)(1)(a-l))

<input type="checkbox"/> (a) Outlet covers installed/secured/in compliance	<input type="checkbox"/> (d) Circulation/Disinfection system operating properly	<input type="checkbox"/> (g) Water clarity: (can see pool bottom)	<input type="checkbox"/> (j) Pool treated after RWI
<input type="checkbox"/> (b) SVRS devices functioning	<input type="checkbox"/> (e) Automatic chemical controller functioning properly	<input type="checkbox"/> (h) Natural or artificial light sufficient	<input type="checkbox"/> (k) Proper use/storage of chemicals
<input type="checkbox"/> (c) Disinfection residual as required	<input type="checkbox"/> (f) Lifeguards on duty	<input type="checkbox"/> (i) Fecal accident treated properly	<input type="checkbox"/> (l) No Electrical hazards present

## Water Quality 3701-31-04 C, D

(Circle disinfectant used) Calcium Hypochlorite Sodium Hypochlorite Bromine Di-Chlor Tri-Chlor Salt **Monopersulfate (if present will interfere with DPD test kit results)	<input type="checkbox"/> (D)(6) Total Chlorine- $Cl_2$ (ppm) <input type="checkbox"/> (D)(6) Free Chlorine- $Cl_2$ (ppm) [ $\geq 1$ ; 2] <input type="checkbox"/> (D)(6) Combined- $Cl_2$ / (ppm) [ $\leq 1$ ]	<u>0.5</u> <u>0.5</u> <u>0</u>	<input type="checkbox"/> (C)(2) pH [7.2-7.8] <input type="checkbox"/> (C)(3) Alkalinity (ppm) [min 60] <input type="checkbox"/> (C)(6) Pool water temp [ $\leq 90^\circ F$ ]	
Secondary disinfection (circle if used) UV light (MJoules/cm <sup>2</sup> ) Ozone (ppm) Ionization: Copper-Silver (ppm)	<input type="checkbox"/> (D)(6) Total Bromine- $Br_2$ (ppm) [ $\geq 2$ ; 4] <input type="checkbox"/> (D)(6) ORP/HRR (millivolts) [ $\geq 650$ ] <input type="checkbox"/> (D)(5) Cyanuric acid (ppm) $\leq 70$		<input type="checkbox"/> (C)(7) Spa water temp [ $\leq 104^\circ F$ ] <input type="checkbox"/> (C)(8) Spa water replaced every 30 days	

## Responsibilities of the Operator 3701-31-04

<input type="checkbox"/> (A) License is displayed or on file	<input type="checkbox"/> (B)(7) No domestic animals unless otherwise permitted	<input type="checkbox"/> (D)(9) Chemicals are manually added while bathers are not present
<input type="checkbox"/> (A) All construction or alterations of a pool done with approved plans	<input type="checkbox"/> (D)(1) No gas chlorine for disinfection	<input type="checkbox"/> (E)(1) Exclusion of people with obvious infectious wound or experiencing diarrhea/vomiting
<input type="checkbox"/> (B) All facilities are maintained clean, safe and sanitary condition and in good repair	<input type="checkbox"/> (D)(2) Pool is continuously disinfected by a feeding device connected to circulation system	<input type="checkbox"/> (E)(2) Safety equipment is visible and accessible
<input type="checkbox"/> (B)(2) Authorized representative available within 30 minutes	<input type="checkbox"/> (D)(3) Mixing tank for spray ground has disinfection	<input type="checkbox"/> (E)(3) Appropriate signs are posted
<input type="checkbox"/> (B)(3) Staff are knowledgeable of equipment and pool operation	<input type="checkbox"/> (D)(4) Secondary disinfection device is not adversely affecting water quality	<input type="checkbox"/> (E)(4) Lifeguards are provided and on duty as required
<input type="checkbox"/> (B)(4 & 5) Operational records maintained and on file	<input type="checkbox"/> (D)(7) Automatic chemical controller is functioning properly	
<input type="checkbox"/> (B)(6) All equipment maintained in clean, safe and sanitary condition and in good repair	<input type="checkbox"/> (D)(8) Test kit is maintained and complete	

THE ITEMS LISTED BELOW ARE IN VIOLATION OF OHIO ADMINISTRATIVE CODE CHAPTER 3701-31 AND MUST BE CORRECTED

Cite the specific rule number, explain where and what violation has occurred, and when the violation must be corrected.

(4B7C) Disinfection residual as required. The chlorine residual was .5ppm at time of inspection. Pool free chlorine residual shall be maintained 1ppm or above. PIC told kids to get out and pool will remain closed until in appropriate range. Chlorine added after pool was empty.

REMARKS  
☐ See additional remarks on the attached form, HEA 5217  
 Re-inspection required? ☐ Yes ☐ No;  
 Compliance date:  
 Sanitarian/other: Megan Kusew Phone: 937-548-4194  
 Operator or Representative: Roger J. Ruff Phone:

Ohio Department of Health  
Swimming Pool and Spa  
Inspection Report  
Supplement

7-1-16  
☐ Outdoor ☐ Indoor ☐ Wading Pool  
☐ Swimming Pool ☐ Special Use Pool  
☐ Spa ☐ M ☐ F ☒ Other

Page 2 of 2

Name of Establishment

Lazy R Campground

Address

8714 US Rt. 36 Bradford

COMMENTS (continued)

~~Noticed~~ Observed a black residue build  
up. PIC is cleaning pool at time of  
inspection. Chemicals added at time of  
inspection.

Please maintain cleanliness.

X Roger J. Rathoff

OPERATOR

Darke Co H/D

SANITARIAN

Myra Karsen

DATE

7-1-16