

SWIMMING POOL OFFICIAL INSPECTION REPORT
GLENN COUNTY ENVIRONMENTAL HEALTH

247 North Villa Avenue, Willows, CA 95988
 Phone: (530) 934-6102 • Fax: (530) 934-6103

Name of Facility/DBA: ORLAND INN POOL		Inspection Date: 5/22/23	
Address: 1052 South St., ORLAND, CA 95963		Reinspection Date (on or after): NEXT INSPECTION <small>(Reinspections are subject to fees)</small>	
Owner/Permittee: R & R VENTURES	Phone Number: 865-7632	Inspection Time: 10:00	Permit Expiration Date:
Pool Type: <input checked="" type="checkbox"/> Swimming Pool <input type="checkbox"/> Spa Pool <input type="checkbox"/> Wading Pool <input type="checkbox"/> Interactive Water Feature <input type="checkbox"/> Other	Service: <input checked="" type="checkbox"/> Routine Inspection <input type="checkbox"/> Reinspection <input type="checkbox"/> Complaint <input type="checkbox"/> Construction/Pre-Opening <input type="checkbox"/> Other		
pH: 7.7	Free Chlorine: 2.4 PPM	Combined Chlorine: -	Cyanuric Acid: 30 PPM
	Flow Rate: 60 GPM	Temperature: -	Other: -
<i>Applicable Laws & Regulations: California Health & Safety Code § 116025 et. seq.; California Code of Regulations Title 24, Chapter 31 & Title 22, Chapter 20</i>			

Pool Construction 1. <input type="checkbox"/> Pool Shell 2. <input type="checkbox"/> Bottom & Sides 3. <input type="checkbox"/> Decks & Coping 4. <input type="checkbox"/> Diving Boards 5. <input type="checkbox"/> Depth Markers 6. <input type="checkbox"/> Ladders/Steps/Railings 7. <input type="checkbox"/> Underwater Lighting & Electrical	Water Quality 16. <input type="checkbox"/> pH 17. <input type="checkbox"/> Chlorine/Bromine 18. <input type="checkbox"/> Cyanuric Acid 19. <input type="checkbox"/> Debris in Pool 20. <input type="checkbox"/> Water Clarity 21. <input type="checkbox"/> Temperature 22. <input type="checkbox"/> Flow Rate/Turnover	General Facilities 31. <input type="checkbox"/> Exterior Lighting 32. <input type="checkbox"/> Indoor Ventilation 33. <input type="checkbox"/> Restrooms & Toilets 34. <input type="checkbox"/> Handwash Sinks 35. <input type="checkbox"/> Dressing Rooms 36. <input type="checkbox"/> Showers 37. <input type="checkbox"/> Drinking Fountains
Recirculation Equipment 8. <input type="checkbox"/> Filters 9. <input type="checkbox"/> Pumps 10. <input type="checkbox"/> Flowmeter 11. <input type="checkbox"/> Pressure/Vacuum Gauges 12. <input type="checkbox"/> Skimmers & Gutters 13. <input type="checkbox"/> Pipes & Fittings 14. <input checked="" type="checkbox"/> Chemical Feeders 15. <input type="checkbox"/> Water Supply/Backflow Prevention	Safety Equipment 23. <input type="checkbox"/> Gates/Enclosure 24. <input type="checkbox"/> Drain Covers 25. <input type="checkbox"/> Anti-Entrapment Shutoff 26. <input type="checkbox"/> Rescue Pole 27. <input type="checkbox"/> Life Ring 28. <input type="checkbox"/> Safety Signs 29. <input type="checkbox"/> First Aid Kit 30. <input type="checkbox"/> Chlorine Gas Safety	Miscellaneous 38. <input type="checkbox"/> Chemical Test Kits 39. <input type="checkbox"/> Chemical Testing Frequency 40. <input checked="" type="checkbox"/> Record Keeping (AP) 41. <input type="checkbox"/> Lifeguards 42. <input type="checkbox"/> Communicable Disease Control 43. <input type="checkbox"/> Site Supervision & Control 44. <input type="checkbox"/> General Sanitation 45. <input type="checkbox"/> Other:

Comments: CORRECT THE FOLLOWING:

(14) THE FACILITY APPEARS TO BE BOTH USING A TABLET EROSION FEEDER & A LIQUID PERISTALTIC FEEDER TO SUPPLY SANITIZER TO THE POOL. ONLY ONE TYPE OF CHLORINE SHALL BE USED IN THE FEEDER SYSTEM.

(14) THE ~~TABLET~~ LIQUID CHLORINATOR PUMP SYSTEM SHALL BE ELECTRICALLY INTERLOCKED WITH THE POOL CIRCULATION SYSTEM. **(CBS) (AP)**

(40) ~~TEST AND RECORD ONCE PER MONTH THE CYANURIC STABILIZER LEVELS IN THE POOL.~~

~~* DISPLAN IN THE POOL ROOM THE VARIABLE SPEED PUMP SCHEDULE INFORMATION.~~

~~* PLAN CHECK IS REQUIRED FOR POOL REPLASTER. SUBMIT PAPERWORK.~~

Received By: Mayra Nunez REHS: Andrew Patis

DPD TEST KIT - FREE AVAILABLE CHLORINE