

## **Water Recreation Facility Closure Form**

Facility Name:			Ac	ddress:		City:	Zip Code:		
Date:		Time Started:			Permit Type:	Permit #:			
The	iolation(s) <sup>1</sup>	of WAC 246	-260/WAC 246-262	2 identified du	at the above turing the inspection:	facility must <u>clos</u>	e due to the following		
Item#		Violatio	n	Pool	Corrective Action	n Taken by Pool C	Operator		
Pool operator was on site during the inspection Pool operator was <u>not</u> on site during the inspection									
Pool operator Spokane Regional Health District (SRHD) has posted the above pool(s)/facility as closed. It must remain closed, with the sign in place, until approved to reopen by SRHD as follows:  FORMAL CLOSURE – The above pool(s)/facility must remain closed until all the violations identified on the Water Recreation Facility Inspection Form are corrected and a formal re-inspection is conducted by a representative of SRHD. The requirements that must be met prior to reopening following a formal closure are outlined on the back of this form.  INFORMAL CLOSURE – The above pool(s)/facility must remain closed until the above violation(s) are corrected. To assure the above item(s) have been addressed as required, the SRHD inspector must be contacted at 324-1560, ext. 4 and informed of the current status of the violations (e.g., current water chemistry readings) before reopening the pool(s)/facility. See back of this form.  FAILURE TO COMPLY with the closure requirements outlined in this notice will result in permit suspension or other action as deemed appropriate by Spokane Regional Health District.									
			=	_	e inspector has reviewed the clo	sure requiremen	ts and conditions for		
			cility with pool ope	erator/person	in-charge.  Signature of Health Authori	itv			
Signature of Owner/Operator					Signature of Health Authority				
Print Na	me				Print Name				
					esulting in automatic closure of a pool or non-critical violations – see inspection re				
This Section To Be Completed by SRHD Following the Inspection									
Date	Time	Phone #	Contact Person	EPH Rep	F	Regarding			

## Before Opening Your Pool - Be Sure To Read and Follow The Following Requirements

FORMAL CLOSURE - This pool(s)/facility must remain closed until all the violations<sup>2</sup> identified on the *Water Recreation*Facility Inspection Form are corrected and a formal re-inspection is conducted by a representative of SRHD. The following submittals must be received by SRHD before scheduling the re-inspection as follows:

- All fees shown on the enclosed invoice for the re-inspection must be paid.
- A signed, written statement must be submitted to SRHD documenting the corrective action taken for each violation<sup>2</sup> on the *Water Recreation Facility Inspection Form* and requesting a re-inspection.
- Copies of the most recent daily log sheet must be provided to show correction of water chemistry related issues (e.g., disinfection levels, pH).
- Note: Failure to correct all violations<sup>2</sup> documented on the Water Recreation Facility Inspection Form before
  requesting a re-inspection will result in continued closure of the facility and a second re-inspection at an additional
  fee.

INFORMAL CLOSURE - This pool(s)/facility must remain closed until all the violation(s) noted on the front of this closure form are corrected. To assure that the violations identified on the front of this form are corrected as required, the SRHD inspector must be contacted at the phone number shown and informed of the current status of these violations (e.g., current water chemistry readings) before reopening the pool(s)/facility.

A formal re-inspection of the facility will be conducted within 30 days to verify that all violations<sup>2</sup> documented on the *Water Recreation Facility Inspection Form* have been corrected. Any repeat violations<sup>2</sup> identified during the first re-inspection will result in a second re-inspection at an additional fee.

NOTE – Failure to comply with the closure requirements outlined in this notice will result in permit suspension or other action as deemed appropriate by Spokane Regional Health District.

Violations and Other Conditions Resulting In Automatic Closure of the Pool or Pool Feature <sup>3</sup>							
ITEM NUMBER	CONDITION REQUIRING CLOSURE	ITEM NUMBER	CONDITION REQUIRING CLOSURE				
0110, 0120	Disinfection Levels – Outside allowable ranges (see below)	1015	Overflow system not functioning				
0210, 0220	pH – Outside allowable range (see below)	1030	Equalizer cover broken, missing, or not properly secured				
0400	Main drain or pool bottom not visible	1300	Diving Board not properly secured/needs repair (close the board)				
0500	Spa temperature > 104° F	1700, 1710	Pumps and filters not operating properly				
0810 to 0850	No/Inadequate barrier around enclosure	3200	Shower temperature > 120° Fahrenheit				
0900	Main drain cover broken, missing or not properly secured	3800, 3810	Lifeguards/attendants not present when required				
0920	Pool w/single main drain - no safety system or device to prevent entrapment	4210	Emergency anti-entrapment equipment (shutoff/SVRS) not operating as required				
0925	Spa without required safety system or device	5900	Imminent hazard				

<sup>&</sup>lt;sup>3</sup> The health official may also require the facility to close if other conditions not listed above are observed and considered an imminent health or safety hazard to facility users. Examples include, but are not limited to, lightning, electrical power outage, lack of lighting, lack of potable water supply, sewer back-up into public or water contact areas, gross chemical or physical contamination of the pool water, incidence of acute human illness or severe injury directly attributed to the facility.