



MONTHLY FACILITY INSPECTION REPORT

FACILITY NAME: _____

Date _____

MAINTENANCE EQUIPMENT

	CONDITION	BRAND/ADDITIONAL INFORMATION	Recommend Replacement?	Yes	No
Vacuum Head	_____	_____	_____	_____	_____
Vacuum Hose	_____	_____	_____	_____	_____
Vacuum Pole	_____	_____	_____	_____	_____
Leaf Rake	_____	_____	_____	_____	_____
Leaf Net	_____	_____	_____	_____	_____
Metal Brush	_____	_____	_____	_____	_____
Vinyl Brush	_____	_____	_____	_____	_____

SAFETY EQUIPMENT

	CONDITION	BRAND/ADDITIONAL INFORMATION	Recommend Replacement?	Yes	No
Test Kit	_____	_____	_____	_____	_____
Test Kit Restock	_____	_____	_____	_____	_____
First Aid Kit	_____	_____	_____	_____	_____
OSHA Clean up Kit	_____	_____	_____	_____	_____
Haz Mat Kit	_____	_____	_____	_____	_____
Rescue Flotation Device	_____	_____	_____	_____	_____
Ring Buoy	_____	_____	_____	_____	_____
Throw Rope	_____	_____	_____	_____	_____
Back Board	_____	_____	_____	_____	_____
Neck Brace	_____	_____	_____	_____	_____
AED Machine	_____	_____	_____	_____	_____
Bag Valve	_____	_____	_____	_____	_____
Oxygen Tank	_____	_____	_____	_____	_____
V-Vacuum Suction Device	_____	_____	_____	_____	_____
Rescue Swim Mask/Snorkel	_____	_____	_____	_____	_____
Swimming Fins	_____	_____	_____	_____	_____
Binoculars	_____	_____	_____	_____	_____
Rescue Board	_____	_____	_____	_____	_____
Rescue Watercraft	_____	_____	_____	_____	_____
Rescue Vehicles	_____	_____	_____	_____	_____
Life Jackets	_____	_____	_____	_____	_____
911 Sign	_____	_____	_____	_____	_____
Pool Rules Sign	_____	_____	_____	_____	_____
Baby Pool Sign	_____	_____	_____	_____	_____
No Guard Sign	_____	_____	_____	_____	_____
Blue/White Buoys	_____	_____	_____	_____	_____
Deep End Rope	_____	_____	_____	_____	_____
Rope Hooks	_____	_____	_____	_____	_____
Shepherds Hook	_____	_____	_____	_____	_____
Brass Wing Nuts For Hook	_____	_____	_____	_____	_____
Safety Pole	_____	_____	_____	_____	_____
Telephone	_____	_____	_____	_____	_____
Telephone box	_____	_____	_____	_____	_____
CPO Sign	_____	_____	_____	_____	_____
Permit Box	_____	_____	_____	_____	_____

ADDITIONAL NOTES ON SAFETY EQUIPMENT NEEDS:

WHITE GOODS/FLOW FITTINGS

	CONDITION	BRAND/ADDITIONAL INFORMATION	Number To Be Replaced
Weirs	_____	_____	_____
Equalizer Valves	_____	_____	_____
VGB Equalizer Grates	_____	_____	_____
Throttle Devices	_____	_____	_____
Skimmer Baskets	_____	_____	_____
Skimmer Lids	_____	_____	_____
Return Eyes	_____	_____	_____
VGB Main Drain Grates	_____	_____	_____
VGB Vacuum Plugs	_____	_____	_____
Vacuum Attachment	_____	_____	_____
Overflow Grate	_____	_____	_____
Hose Backflow Preventer	_____	_____	_____
Do All Skimmers Pull?	Yes _____ No _____	How many do not Pull? _____	
Does In-Line Vacuum Work?	Yes _____ No _____		
Do Any Skimmers Leak	Yes _____ No _____	How many do Leak? _____	

FILTRATION EQUIPMENT

	CONDITION/SIZE	BRAND/ADDITIONAL INFORMATION
Filter Tank	_____	Miami_____ TR_____ Starite_____ Astral_____
Number of filter tanks?	_____	Size/model#? _____
Filter Lid O-ring	_____	
Filter Media	_____	Sand_____ DE_____ Cartridge_____
Filter Control	_____	Multiport_____ 4-valve_____ Gang Lever_____
Filter Control Size	_____	Condition? _____
B/W Sight Glass	_____	Top Mount_____ Side Mount_____ In-line_____
Air Bleed Assembly	_____	Manual_____ Automatic_____
Influent PSI Gauges	_____	# of Gauges_____
Effluent PSI Gauges	_____	# of Gauges_____
Flow Meter	_____	Size_____
Piping	_____	Any Visible Leaks? _____
Aqua Lube	_____	

INTAKE, RETURN, AND BACKWASH LINES

	SIZE	VALVE TYPE	REPAIRS NEEDED?
Main Drain #1	_____	_____	_____
Main Drain #2	_____	_____	_____
Skimmer #1	_____	_____	_____
Skimmer #2	_____	_____	_____
Vacuum Line	_____	_____	_____
Return Line #1	_____	_____	_____
Return Line #2	_____	_____	_____
Backwash Line	_____	_____	_____
Fill Line	_____	_____	_____

MOTOR AND PUMP EQUIPMENT #1:

	CONDITION	BRAND/SERIAL NUMBER/ADD. INFO.				
Motor Condition	_____	HP_____	Phase_____	RPM_____	Frame_____	Recommend Replacement? Yes_____ No_____
Pump	_____					Recommend Replacement? Yes_____ No_____
Impeller	_____					Recommend Replacement? Yes_____ No_____
Volute	_____					Recommend Replacement? Yes_____ No_____
Hair Lint Pot	_____					Recommend Replacement? Yes_____ No_____
Seals/Gaskets	_____					
Conduit/Wire	_____					Recommend Replacement? Yes_____ No_____
Is Motor Properly Grounded?	Yes_____	No_____			Condition_____	
Does Motor Have a GFCI Breaker?	Yes_____	No_____			Condition_____	
Does Motor Have a Starter?	Yes_____	No_____			Condition_____	
Does Motor Have a Timer?	Yes_____	No_____			Condition_____	

MOTOR AND PUMP EQUIPMENT #2:

	CONDITION	BRAND/SERIAL NUMBER/ADD. INFO.				
Motor Condition	_____	HP_____	Phase_____	RPM_____	Frame_____	Recommend Replacement? Yes_____ No_____
Pump	_____					Recommend Replacement? Yes_____ No_____
Impeller	_____					Recommend Replacement? Yes_____ No_____
Volute	_____					Recommend Replacement? Yes_____ No_____
Hair Lint Pot	_____					Recommend Replacement? Yes_____ No_____
Seals/Gaskets	_____					
Conduit/Wire	_____					Recommend Replacement? Yes_____ No_____
Is Motor Properly Grounded?	Yes_____	No_____			Condition_____	
Does Motor Have a GFCI Breaker?	Yes_____	No_____			Condition_____	
Does Motor Have a Starter?	Yes_____	No_____			Condition_____	
Does Motor Have a Timer?	Yes_____	No_____			Condition_____	

MOTOR AND PUMP EQUIPMENT #3:

	CONDITION	BRAND/SERIAL NUMBER/ADD. INFO.				
Motor Condition	_____	HP_____	Phase_____	RPM_____	Frame_____	Recommend Replacement? Yes_____ No_____
Pump	_____					Recommend Replacement? Yes_____ No_____
Impeller	_____					Recommend Replacement? Yes_____ No_____
Volute	_____					Recommend Replacement? Yes_____ No_____
Hair Lint Pot	_____					Recommend Replacement? Yes_____ No_____
Seals/Gaskets	_____					
Conduit/Wire	_____					Recommend Replacement? Yes_____ No_____
Is Motor Properly Grounded?	Yes_____	No_____			Condition_____	
Does Motor Have a GFCI Breaker?	Yes_____	No_____			Condition_____	
Does Motor Have a Starter?	Yes_____	No_____			Condition_____	
Does Motor Have a Timer?	Yes_____	No_____			Condition_____	

MOTOR AND PUMP EQUIPMENT #4:

	CONDITION	BRAND/SERIAL NUMBER/ADD. INFO.				
Motor Condition	_____	HP_____	Phase_____	RPM_____	Frame_____	Recommend Replacement? Yes_____ No_____
Pump	_____					Recommend Replacement? Yes_____ No_____
Impeller	_____					Recommend Replacement? Yes_____ No_____
Volute	_____					Recommend Replacement? Yes_____ No_____
Hair Lint Pot	_____					Recommend Replacement? Yes_____ No_____
Seals/Gaskets	_____					
Conduit/Wire	_____					Recommend Replacement? Yes_____ No_____
Is Motor Properly Grounded?	Yes_____	No_____			Condition_____	
Does Motor Have a GFCI Breaker?	Yes_____	No_____			Condition_____	
Does Motor Have a Starter?	Yes_____	No_____			Condition_____	
Does Motor Have a Timer?	Yes_____	No_____			Condition_____	

CHEMICAL FEED EQUIPMENT

	CONDITION	BRAND/ADDITIONAL INFORMATION	
Chlorinator	_____	Salt _____ Erosion _____	Recommend Replacement? Yes _____ No _____
Ph Adjuster	_____	Acid _____ Soda Ash _____	Recommend Replacement? Yes _____ No _____
Injectors	_____	Number of Injectors _____	Recommend Replacement? Yes _____ No _____
Neoprene	_____	Number of Neoprene _____	Recommend Replacement? Yes _____ No _____
Tubing	_____	Number of Feet _____	Recommend Replacement? Yes _____ No _____
Is there an Automatic Controller?	Yes _____ No _____	Condition/Type _____	
Are Chemical Outlets wired to Pump?	Yes _____ No _____		
If Running on Salt, how many Cells?	_____	Acid Drum? Yes _____ No _____	
Projected replacement date for salt cells:	_____		

POOL LIGHTS

	CONDITION	BRAND/SERIALNUMBER/ADD.INFO.	
Pool Lights	_____	Number of Lights _____	Recommend Repair? Yes _____ No _____
Pool Light Bulbs	_____	Number of Bulbs Not Working _____	
Light Wedges	_____		
Are Pool lights on GFCI Breakers?	Yes _____ No _____		
Are Pool lights on a Timer?	Yes _____ No _____		

DECK EQUIPMENT

	CONDITION	BRAND/ADDITIONAL INFORMATION	
Hand Rails	_____		Number To Be Replaced _____
Ladder Treads	_____		Number To Be Replaced _____
Ladder Bumpers	_____		Number To Be Replaced _____
Hand Rail Anchors	_____		Number To Be Replaced _____
Grab Rails	_____		Number To Be Replaced _____
Recessed Steps	_____		Number To Be Replaced _____
Grab Rail Anchors	_____		Number To Be Replaced _____
Escutcheons	_____		Number To Be Replaced _____
Guard Stands	_____		Recommend Replacement? Yes _____ No _____
Umbrella for Guard Stand	_____		Recommend Replacement? Yes _____ No _____
ADA Lift Chair	_____		Recommend Replacement? Yes _____ No _____
Dive Stand	_____		Recommend Replacement? Yes _____ No _____
Dive Board	_____		Recommend Replacement? Yes _____ No _____
Dive Board Mounting Kit	_____		Recommend Replacement? Yes _____ No _____
Dive Board Fulcrum	_____		Recommend Replacement? Yes _____ No _____
Water Slide	_____		Recommend Replacement? Yes _____ No _____
Water Feature	_____		Recommend Replacement? Yes _____ No _____

DECK AND POOL SHELL

	CONDITION	BRAND/ADDITIONAL INFORMATION	
Deck Condition	_____		Recommend Repair? Yes _____ No _____
Deck Drains	_____		Recommend Repair? Yes _____ No _____
Expansion Joints	_____		Recommend Repair? Yes _____ No _____
Coping/Cantilever	_____		Recommend Repair? Yes _____ No _____
Coping Expansion Joint	_____		Recommend Repair? Yes _____ No _____
Tile Depth Markers on Deck	_____		Recommend Repair? Yes _____ No _____
Tile FT Markers on Deck	_____		Recommend Repair? Yes _____ No _____
Tile No Dive Marker on Deck	_____		Recommend Repair? Yes _____ No _____
Pool Surface	_____		Recommend Repair? Yes _____ No _____
Waterline Pool Tile	_____		Recommend Repair? Yes _____ No _____
Grout	_____		Recommend Repair? Yes _____ No _____
Coping/W. Pool Tile Jt.	_____		Recommend Repair? Yes _____ No _____
Lane Line Anchors	_____		Recommend Repair? Yes _____ No _____
Lane Line Pool Tile	_____		Recommend Repair? Yes _____ No _____
Deep End Rope Anchors	_____		Recommend Repair? Yes _____ No _____
Deep End Drop Off Tile	_____		Recommend Repair? Yes _____ No _____
Safety Tile on Steps	_____		Recommend Repair? Yes _____ No _____
Depth Markers on Waterline	_____		Recommend Repair? Yes _____ No _____
FT Markers on Waterline	_____		Recommend Repair? Yes _____ No _____
No Dive Marker on Waterline	_____		Recommend Repair? Yes _____ No _____

MEMBERSHIP CONTROLS

	CONDITION	BRAND/ADDITIONAL INFORMTAION	
Security Cameras	_____		Recommend Repair? Yes _____ No _____
Self Closing Gate	_____		Recommend Repair? Yes _____ No _____
Magnetic Swipe System	_____		Recommend Repair? Yes _____ No _____
Punch Code System	_____		Recommend Repair? Yes _____ No _____
Lock box	_____	Code: _____	Replace? Yes _____ No _____
Signage	_____		Recommend Repair? Yes _____ No _____
Does facility use a gate Monitor?	_____	Is a gate Monitor Needed?	_____

ELECTRICAL

	CONDITION	BRAND/ADDITIONAL INFORMATION	
Breaker Panel	_____		
Breakers	_____		
Do all outlets work?	_____	If No, list which ones: _____	
Do all light switches work?	_____	If No, list which ones: _____	
Pump Room Lighting	_____		Recommend Repair? Yes _____ No _____
Pump Room Ventilation	_____		Recommend Repair? Yes _____ No _____

