### Public Swimming Pool Equipment Inventory Report

**Name of Facility:** Circle Ivy Ranch  
**Address:** 164 Amsterdam Rd SE  
**City:** Sid  
**Health District:** Carroll County

<table>
<thead>
<tr>
<th>Inspect date (mm/dd)</th>
<th>Inspect time</th>
<th>Travel time (min)</th>
<th>Turnover rate (min)</th>
<th>Min. required flow (gpm)</th>
<th>Volume (gallons)</th>
<th>Special feature</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/17/19</td>
<td>30 min</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Surface area (sf):** Volume (gallons)  
**Type visit:** Standard  
**Type pool:** Indoor  
**Setting:** Indoor  
**Special feature:** Indoor

**Authority:** OAC 3701-31-03[17]  
The following section shall be completed for each public swimming pool to verify the equipment installed and that there have been no unauthorized changes.

#### Filter(s)

<table>
<thead>
<tr>
<th>Make</th>
<th>Model</th>
<th>Total filter area (sq ft)</th>
<th>Max. allowable filter flow (gpm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pentair</td>
<td>TR-20</td>
<td>51.1</td>
<td>1.66</td>
</tr>
</tbody>
</table>

**Pumps**

<table>
<thead>
<tr>
<th>Make</th>
<th>Model</th>
<th>HP</th>
<th>Max. allowable flow (gpm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pentair</td>
<td>W-E-B</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>

**Air pump**

<table>
<thead>
<tr>
<th>Make</th>
<th>Model</th>
<th>HP</th>
<th>Max. allowable flow (gpm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pentair</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Meters and Gauges:** Meters and gauges shall be properly installed and maintained in good repair at all times the pool operates.

- **Flow meter (Circulation):**
  - Flow reading
  - Range (gpm)
  - Reading (gpm)

- **Flow meter (Jet/hydrotherapy):**
  - Flow reading
  - Range (gpm)
  - Reading (gpm)

- **Flow meter (Special features):**
  - Flow reading
  - Range (gpm)
  - Reading (gpm)

- **Pressure gauge:**
  - Gauge on top of filter(s)
  - Range (psi)
  - Reading (psi)

- **Vacuum gauge:**
  - On hair-line strainer
  - Range (psi)
  - Reading (psi)

- **Disinfection Primary feeder:**
  - Calcium hypoctrite
  - Sodium hypoctrite
  - Brome
  - Salt
  - Make: Pentair  
  - Model: TR-20

- **Secondary units:**
  - UV light
  - Ozone
  - Ionization: Copper-Silver
  - Make: Pentair  
  - Model: TR-20

- **Auto chemical controller:**
  - Displays pH & ORP/HRR
  - Make: Pentair  
  - Model: TR-20

- **pH feeder:**
  - Muratic acid
  - Sulfuric acid
  - Sodium bisulfate
  - Make: Pentair  
  - Model: TR-20

- **Safety vacuum Release system:**
  - Make: Pentair  
  - Model: TR-20

- **Fill water/approved source:**
  - Public water supply
  - Non-community
  - Well
  - Make: Pentair  
  - Model: TR-20

- **Waste water**
  - Discharge to sanitary sewer: Yes  
  - Backflow prevention for waste lines: Yes
  - Air gap provided: Yes

**Remarks**

For equipment changes, other than IDENTICAL, an Equipment Replacement Notification report form (HEA 5234) must be submitted for approval.

**Equipment labels are intact and legible or information is on file for reference?** Yes  
**Backflow Prevent Valve ASSE #**
Public Swimming Pool Inspection Report

Name of facility: Circle G Ranch
Address: 1104 Amsterdam Rd SE
City: Sebo

Health District: Carroll County
Special feature (SF)
- Wading pool
- Zero Entry
- Spray ground
- MHP
- Indoor
- Outdoor
- Camp
- Apartment/Condo
- Hotel/motel
- Kiddie slide
- Playground slide
- Rec slide
- Water slide
- Fountain
- Other:

Inspection

Date: 9/8/19
Time: 12:45 PM
Travel Time: 30 min
ID no.
License no.

Surface area (sf)
Required turnover rate (min) [ie 30]
Volume (gallons)
Required flow min: (gpm) [Volume/10 Rate]

Flow measure reading (gpm)
45
Max allowable filter flow: (gpm) / filter label
Max allowable flow: SF pump capacity (gpm)
Max allowable flow: Jet pump capacity (gpm)

Critical violations (3701-31-04)(B)(1)(a-l)
- Outlet covers installed/secured/in compliance
- Circulation/Disinfection system operating properly
- Water clarity: (can see pool bottom)
- Pool treated after RWI
- SVRS devices functioning
- Automatic chemical controller functioning properly
- Natural or artificial light sufficient
- Proper use/storage of chemicals
- Disinfection residual as required
- Lifeguards on duty
- Fecal accident treated properly
- No Electrical hazards present

Water Quality 3701-31-04 C, D

Calcium Hypochlorite
Sodium Hypochlorite
Bromine
Di-Chlor
Tri-Chlor
Monopersulfate

Total Chlorine-Cl₂ (ppm)
Free Chlorine-Cl₂ (ppm) [≥ 1.2]
Combined-Cl₂ (ppm) [≤ 1]
Total Bromine-Bₗₚ (ppm) [≥ 2.4]
ORP/HRP (millivolts) [≥ 650]
Cyanuric acid (ppm) ≤ 70

Responsibilities of the Operator 3701-31-04
- License is displayed or on file
- No domestic animals unless otherwise permitted
- Chemicals are manually added while bathers are not present
- Gas Chlorine for disinfection
- Exclusion of people with obvious infectious wound or experiencing diarrhea/vomiting
- Safety equipment is visible and accessible
- Appropriate signs are posted
- Staff are knowledgeable of equipment and pool operation
- Secondary disinfection device is not adversely affecting water quality
- Lifeguards are provided and on duty as required
- 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.

* November 2018 - completely updated + approved by ODH.

Read to operate 2019

REMARKS
- See additional remarks on the attached form, HSA 5217
- Re-inspection required: Yes

Sanitation/Chem Phone 330-627-4966
Operator/Representative Phone 330-627-3101

HEA 5/22 (Rev 04/11) Authority: Chapter 3749, Ohio Revised Code
Ohio Department of Health, Bureau of Environmental Health
Distributions: White-Licensee
Canary-Licensor