

Facility Name: _____ **Public Swimming Pool Operator Record** Facility Address: _____



Month	*Daily Disinfectant & pH Levels measured				Daily Water Temperature Spa (≤104 F)	Daily Self Checks Check (v)	Weekly Total Alkalinity (60-180 ppm)	Flowmeter Reading (gpm)	Current Occupancy Load (inside barrier)	Pressure Gauge Reading (psi)	See Addendum for recording of: corrections, chemicals & backwashing Check (v) if used	Trained Operator or Responsible Person (signature)
	FC/Br	pH (7.2-7.8)	FC/Br	pH (7.2-7.8)								
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2												
3												
4												
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* The pH, disinfectant and temperature monitoring frequencies are different for heated spas and pools.

Cyanuric Acid: _____ppm

Calcium Hardness _____ppm

Trained Operator Name: _____ Phone #: _____

Public Swimming Pool Operator Record Addendum

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This form is for use in conjunction with the Public Swimming Pool Operator Record to document observations, activities and corrective actions taken at the facility. This form can also be used for recording general information on the facility operations.

Facility Name:

Trained Operator Name:

Date:

Address:

City/State:

Zip Code:

Day

OPERATOR ACTIVITIES, OBSERVATIONS AND CORRECTIVE ACTIONS

Trained Operator Certification:

Trained Operator (Signature)

Date