

Pool Inspection

Name of Pool: _____

Location: _____

Date Inspected: _____ Inspected By: _____

Pool Deck	OK	Action Needed	Action Taken	Date Completed
Free of Debris, Excess Water				
No Loose Equipment				
<i>OTHER:</i>				

Pool	OK	Action Needed	Action Taken	Date Completed
Vacuumed - Regular Basis				
Water Meets Health Standards				
Test Logs Completed				
<i>OTHER:</i>				

Pool Inspection

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Lighting	OK	Action Needed	Action Taken	Date Completed
All Ceiling Lights Functioning				
Emergency Lights Functioning				
<i>OTHER:</i>				

Exits	OK	Action Needed	Action Taken	Date Completed
All Entrances / Exits Free of Debris and Hazards				
All Entrances / Exits in Good Working Order				
Exit Signs Visible/Functioning				
<i>OTHER:</i>				

Signage	OK	Action Needed	Action Taken	Date Completed
Appropriate signs in place (Slippery When Wet; Water Depths)				
<i>OTHER:</i>				

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Emergency Equipment	OK	Action Needed	Action Taken	Date Completed
Telephone: Working				
Telephone: Accessible				
Emergency Numbers / Location Posted				
Emergency Procedures Posted				
First-Aid Kits Accessible / Well-Stocked				
Spinal Board				
<i>OTHER:</i>				

Comments:

Date: _____ Signature: _____