



Record ID: PR0000882

### SWIMMING POOL/SPA Inspection Report

<b>Facility Name</b> CASTLEWOOD MOBILE HOME PARK		<b>Total Violations</b>	5	<b>Date:</b> 07/06/2018	<b>Total Time:</b> 45
<b>Facility Address</b> 6057 GRIFFITH AVE		<b>Total Significant Violations</b>	0	<b>Start:</b> 1:30 pm	<b>Finish:</b> 2:15 pm
<b>City/State</b> LINDA, CA	<b>Zip Code</b> 95901	<b>Phone</b> (530) 743-7416	<b>Operator Name</b> KYREN SHIMMIN		<b>Operator Phone</b> (530) 743-7416
<b>Program:</b> 0860 - PUBLIC SWIMMING POOL-SPA PERMIT		<b>Service:</b> ROUTINE INSPECTION		<b>Result:</b> MINOR VIOLATIONS	

Fill in the designated compliance status (IN, OUT, N/O, N/A) for each numbered item Fill in the appropriate box for COS and/or R

**In** = In compliance    **OUT** = Not In compliance    **N/O** = Not observed    **N/A** = Not applicable    **COS** = Corrected on-site during inspection    **R** = Repeat violation

#### SWIMMING POOL & SPA

1	Disinfectant Residual (ppm)	<input type="checkbox"/> NVO	<input checked="" type="checkbox"/> OUT	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ
2	pH	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ
3	Cyanuric Acid (ppm)	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input type="checkbox"/> MAJ

#### RECORD KEEPING

4	Inadequate Record Keeping	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/O	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ
5	DPD Test Kit	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/O	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ

#### CLARITY

6	Poor Clarity	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input type="checkbox"/> COS	<input type="checkbox"/> MAJ
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#### ALGAE

7	Algae Growth	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT			<input type="checkbox"/> MAJ
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#### RECIRCULATION EQUIPMENT

8	Pressure Gauges	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/O	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ
9	Chlorinator	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/O	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ
10	Flowmeter	<input type="checkbox"/> NVO	<input checked="" type="checkbox"/> OUT	<input type="checkbox"/> N/O	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ
11	Filter	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/O	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ
12	Water Leakage	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/O	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ
13	Cleanliness of Area	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/O	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ
14	AB1020 Compliant	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/O	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ

#### SKIMMERS

15	Retarded Flow	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/A	<input type="checkbox"/> R	<input type="checkbox"/> COS	<input type="checkbox"/> M
16	Weir	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/A	<input type="checkbox"/> R	<input type="checkbox"/> COS	<input type="checkbox"/> M
17	Basket	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/A	<input type="checkbox"/> R	<input type="checkbox"/> COS	<input type="checkbox"/> M
18	Skimmer Cover	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/A	<input type="checkbox"/> R	<input type="checkbox"/> COS	<input type="checkbox"/> M

#### RESCUE & SAFETY EQUIPMENT

19	Rescue Pole with Crook	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input type="checkbox"/> COS	<input type="checkbox"/> MAJ	
20	Life Ring with Rope	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input type="checkbox"/> COS	<input type="checkbox"/> MAJ	
21	Artificial Respiration Procedure Sign	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input type="checkbox"/> COS	<input type="checkbox"/> MAJ	
22	Warning-No Lifeguard on Duty Sign	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input type="checkbox"/> COS	<input type="checkbox"/> MAJ	
23	Emergency Phone Number Sign	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input type="checkbox"/> COS	<input type="checkbox"/> MAJ	
24	Keep Closed Sign on Gate	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input type="checkbox"/> COS	<input type="checkbox"/> MAJ	
25	"No Diving" Sign	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input type="checkbox"/> N/A	<input type="checkbox"/> R	<input type="checkbox"/> COS	<input type="checkbox"/> M
26	No Use After Dark Sign	<input type="checkbox"/> NVO	<input checked="" type="checkbox"/> OUT	<input type="checkbox"/> N/A	<input type="checkbox"/> R	<input type="checkbox"/> COS	<input type="checkbox"/> M
27	First Aid Kit	<input type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input checked="" type="checkbox"/> N/O	<input type="checkbox"/> COS	<input type="checkbox"/> MAJ
28	Maximum Occupancy Sign	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input type="checkbox"/> COS	<input type="checkbox"/> MAJ	
29	Diarrhea Sign	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input type="checkbox"/> COS	<input type="checkbox"/> MAJ	
30	Grab Rail and/or Stair Rail Loose	<input type="checkbox"/> NVO	<input checked="" type="checkbox"/> OUT	<input type="checkbox"/> N/O	<input checked="" type="checkbox"/> COS	<input type="checkbox"/> MAJ	

#### DECK

31	Cracks in decking	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT			<input type="checkbox"/> MAJ
32	Obstructions on deck	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT		<input type="checkbox"/> COS	<input type="checkbox"/> MAJ

Facility Name		Date:	Page 2 of 3
CASTLEWOOD MOBILE HOME PARK		07/06/2018	
<b>SWIMMING POOL &amp; SPA</b>			
33	Inadequate drainage of pool area	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT	<input type="checkbox"/> MAJ
<b>BOTTOM DRAIN</b>			
34	Cover Plate VGBA Compliant	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT	<input type="checkbox"/> MAJ
35	Drain Visible from Deck	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> R	<input type="checkbox"/> COS <input type="checkbox"/> M
<b>POOL FINISH</b>			
36	Cracks in pool shell	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/O	<input type="checkbox"/> MAJ
37	Rough areas in pool shell	<input type="checkbox"/> NVO <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	<input type="checkbox"/> MAJ
<b>DIVING BOARD</b>			
38	Non-slip Surface	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R	<input type="checkbox"/> M
39	Condition	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R	<input type="checkbox"/> M
<b>POOL LIGHT</b>			
40	Non-functioning pool light	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
41	Pool Light Separating from Wall	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
<b>TILE</b>			
42	Cracked Tiles	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS	<input type="checkbox"/> MAJ
43	Dirty Tiles	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS	<input type="checkbox"/> MAJ
44	Depth Markers	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> R	<input type="checkbox"/> M
<b>CLEANLINESS</b>			
45	Pool Bottom Dirty	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS	<input type="checkbox"/> MAJ
46	Floating Debris in Pool	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> COS	<input type="checkbox"/> MAJ
<b>FENCING</b>			
47	Adequacy of Fencing	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS	<input type="checkbox"/> MAJ
48	Gates Self-closing	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS	<input type="checkbox"/> MAJ
49	Gates are Self-latching	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS	<input type="checkbox"/> MAJ
50	One Means of Keyless Egress	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT	<input type="checkbox"/> MAJ
<b>ANCILLARY FACILITY</b>			
51	Adequacy of Bathrooms	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
52	Poor Sanitation of Bathrooms	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
53	Structural Defect in Bathrooms	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
54	Hot Water Provided in Bathrooms	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
55	Poor Sanitation of Showers	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
<b>SPA REQUIREMENTS</b>			
56	Spa Temperature	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R	<input type="checkbox"/> M
57	Spa Pool Warning Signs	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R	<input type="checkbox"/> COS <input type="checkbox"/> M
58	Spa Thermometer	<input type="checkbox"/> NVO <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> R	<input type="checkbox"/> COS <input type="checkbox"/> M

**VIOLATIONS, OBSERVATIONS AND CORRECTIVE ACTIONS**

Item No	Remarks
1	Disinfectant Residual (ppm): 10.5 ppm
2	pH: 7.6
3	Cyanuric Acid (ppm): 37 ppm
10	Flowmeter: Leaking & no movement during inspection. Possibly due to vacuuming being done right now.
26	<p>No Use After Dark Sign: The pool facility was observed without/unreadable NO SWIMMING AFTER DARK sign when applicable. The facility must provide a clearly readable NO SWIMMING AFTER DARK sign when applicable. Correct within 24 hours.</p> <p>SECTION 3120B REQUIRED SIGNS</p> <p>3120B.9 No use after dark. Where pools were constructed for which lighting was not required, a sign shall be posted at each pool entrance on the outside of the gate(s) stating, "NO USE OF POOL ALLOWED AFTER DARK."</p>
30	Grab Rail and/or Stair Rail Loose: Grab rail was loose - corrected during inspection.
37	<p>Rough areas in pool shell: The pool shell was observed cracked/pitted/not in good repair. There is also significant staining due to use of well water. The facility shall maintain the pool shell in good repair. Correct within 1 year.</p> <p>SECTION 3108B POOL CONSTRUCTION</p> <p>3108B.1 Pool shell. The pool shall be built of reinforced concrete or material equivalent in strength, watertight and able to withstand anticipated stresses under both full and empty conditions taking into consideration factors such as climatic effects, geological conditions and integration of the pool with other structures.</p> <p>3108B.2 Finish. The finished pool shell shall be lined with a smooth waterproof interior finish that will withstand repeated brushing, scrubbing, and cleaning procedures. The interior pool finish shall completely line the pool to the tile lines, coping, or cantilevered deck.</p> <p>3108B.3 Finish color. The finish color shall be white except for the following which shall be of contrasting color:</p> <ol style="list-style-type: none"> <li>1. Lane and other required pool markings described in Section 3110B;</li> <li>2. The top surface edges of benches in spa pools;</li> <li>3. The edge of pool steps;</li> <li>4. Tiles installed at the waterline; and</li> <li>5. Tiles installed at the 4 1/2-foot (1372 mm) depth line.</li> </ol> <p>Exception: A spa pool may be finished in a light color other than white when approved by the enforcing agent.</p> <p>3108B.4 Projections and recessed areas. The pool shell shall not have projections or recessed areas except for pool inlets and outlets as specified in Section 3137B.</p> <p>Exception: This section shall not apply to handholds, recessed steps, ladders, stairs, handrails, skimmers or perimeter overflow systems.</p>

**Overall Inspection Comments:**

*Pool okay to open once chlorine residual is within acceptable limits (2.0-10.0 ppm) and the "No use of pool after dark" sign is installed on outside of gate. Pool shell is continuing to deteriorate. Pool must be resurfaced prior to use next year.*

<b>Received By</b>	<b>Title:</b>	<b>Date:</b>
JODI BIRD	EH Technician	7/6/2018