



Record ID: PR0002825

### SWIMMING POOL/SPA Inspection Report

<b>Facility Name</b> Peach Tree Golf and Country Club		<b>Total Violations</b> 9		<b>Date:</b> 08/30/2018	<b>Total Time:</b> 60
<b>Facility Address</b> 2043 Simpson Dantoni RD		<b>Total Significant Violations</b> 1		<b>Start:</b> 11:30 am	<b>Finish:</b> 12:30 pm
<b>City/State</b> Marysville, CA	<b>Zip Code</b> 95901	<b>Phone</b> (530) 743-1897	<b>Operator Name</b> MARK NIMRICK		<b>Operator Phone</b> (530) 743-1897
<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 checked="" type="checkbox"/> NVO	<input 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 type="checkbox"/> NVO	<input checked="" type="checkbox"/> OUT	<input type="checkbox"/> N/O	<input type="checkbox"/> COS	<input checked="" 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 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
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 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
27	First Aid Kit	<input checked="" type="checkbox"/> NVO	<input type="checkbox"/> OUT	<input 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 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 type="checkbox"/> NVO	<input checked="" type="checkbox"/> OUT		<input type="checkbox"/> COS	<input type="checkbox"/> MAJ

Facility Name		Date:	Page 2 of 4
Peach Tree Golf and Country Club		08/30/2018	
<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 checked="" type="checkbox"/> NVO <input 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 checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> R	<input type="checkbox"/> M
39	Condition	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> R	<input type="checkbox"/> M
<b>POOL LIGHT</b>			
40	Non-functioning pool light	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
41	Pool Light Separating from Wall	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input 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 type="checkbox"/> NVO <input checked="" 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 type="checkbox"/> NVO <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> COS	<input type="checkbox"/> MAJ
46	Floating Debris in Pool	<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"/> 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"/> N/A <input type="checkbox"/> R	<input type="checkbox"/> MAJ
<b>ANCILLARY FACILITY</b>			
51	Adequacy of Bathrooms	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
52	Poor Sanitation of Bathrooms	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
53	Structural Defect in Bathrooms	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
54	Hot Water Provided in Bathrooms	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> R <input type="checkbox"/> N/O	<input type="checkbox"/> M
55	Poor Sanitation of Showers	<input checked="" type="checkbox"/> NVO <input type="checkbox"/> OUT <input 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**

<b>Item No</b>	<b>Remarks</b>
1	Disinfectant Residual (ppm): 2.5
2	pH: 7.6
3	Cyanuric Acid (ppm): 0
4	<p>Inadequate Record Keeping: Records for the pool facility are Inadequate/ Missing. The facility shall Correct this violation immediately and must be submitted to Environmental Health in 7 days after the routine inspection date. Failure to provide an accurate, readable Daily Log, the facility shall be CLOSED for one week; (7) Days. After the one week closure of the pool facility a Daily log must be submitted to Environmental Health. Failure to do so will result in another one week CLOSURE of the pool facility and so on until adequate records are kept. The facility shall maintain a Daily log of the pool chemistry including;</p> <ol style="list-style-type: none"> <li>1. Disinfectant Residual</li> <li>2. pH</li> <li>3. Cyanuric Acid ( if applicable)</li> <li>4. Chemicals Added</li> <li>5. Filter Back Flushing</li> </ol>
10	<p>Flowmeter: The Flow meter was observed broken. The pool facility shall provide a accurate, clear, and visible flow meter to check if the flow of the pool facility is meeting the 6 hour turn over rate required for proper sanitation. Correct within 14 days.</p> <p>CBC § 3125B.3 Flow meter. A flow meter shall be provided on each recirculation system accurate to within 10 percent of flow and installed according to the manufacturer's written instructions with increments in the range of normal flow.</p>
17	Basket: Skimmer baskets should be emptied regularly.
23	Emergency Phone Number Sign: Sign is faded. Replace before new pool season.
30	Grab Rail and/or Stair Rail Loose: Grab rails nearest to equipment room are loose. Repair/replace immediately.
32	Obstructions on deck: All umbrellas, chairs, and tables must be 4 ft from the pool.
38	Non-slip Surface: Non-slip surface is deteriorated and must be replaced before next pool season.
43	<p>Dirty Tiles: The pool facility was observed with dirt, scum, and debris on the tiles and depth markers. The facility shall maintain the tiles and depth markers so that they are free of dirt, scum, and debris. Correct within 7 days.</p> <p>§ 65533. Public Pool Cleanliness.</p> <p>(a) The pool operator shall maintain clean pool water while the public pool is in use. The pool operator shall not allow debris, including, but not limited to, floating scum, sputum, trash or leaves to accumulate in the public pool. The pool operator shall ensure that water levels shall be maintained and operated to remove such material continuously through the pool skimming system in accordance with Section 3136B, Title 24, California Building Code.</p> <p>(b) The pool operator shall clean the bottom, sides and other surfaces of the public pool as often as necessary to keep the bottom, sides and public pool surfaces clean and free of slime and algae.</p>
45	<p>Pool Bottom Dirty: The pool facility was observed with dirt, scum, and debris within the pool. The facility shall maintain the water and the premises free of dirt, scum, and debris. Correct within 7 days.</p> <p>§ 65533. Public Pool Cleanliness.</p> <p>(a) The pool operator shall maintain clean pool water while the public pool is in use. The pool operator shall not allow debris, including, but not limited to, floating scum, sputum, trash or leaves to accumulate in the public pool. The pool operator shall ensure that water levels shall be maintained and operated to remove such material continuously through the pool skimming system in accordance with Section 3136B, Title 24, California Building Code.</p> <p>(b) The pool operator shall clean the bottom, sides and other surfaces of the public pool as often as necessary to keep the bottom, sides and public pool surfaces clean and free of slime and algae.</p>

<b>Facility Name</b> Peach Tree Golf and Country Club		<b>Date:</b> 08/30/2018	<b>Page 4 of 4</b>
46	<p>Floating Debris in Pool: The pool facility was observed with dirt, scum, and debris floating on the surface. The facility shall maintain the water free of dirt, scum, and debris. Correct within 7 days.</p> <p>§ 65533. Public Pool Cleanliness.</p> <p>(a) The pool operator shall maintain clean pool water while the public pool is in use. The pool operator shall not allow debris, including, but not limited to, floating scum, sputum, trash or leaves to accumulate in the public pool. The pool operator shall ensure that water levels shall be maintained and operated to remove such material continuously through the pool skimming system in accordance with Section 3136B, Title 24, California Building Code.</p> <p>(b) The pool operator shall clean the bottom, sides and other surfaces of the public pool as often as necessary to keep the bottom, sides and public pool surfaces clean and free of slime and algae.</p>		
<b>Overall Inspection Comments:</b> No Overall Inspection Comments			
<b>Received By</b>		<b>Title:</b>	<b>Date:</b> 8/30/2018
<b>Inspector</b> JODI BIRD		<b>Title:</b> EH Technician	<b>Date:</b> 8/30/2018