

Pool Inspection (1 of 2)

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				
OTHER:				

Pool	OK	Action Needed	Action Taken	Date Completed
Vacuumed				
Water meets health standards				
Test logs completed				
OTHER:				

Lighting	OK	Action Needed	Action Taken	Date Completed
All ceiling lights				
Emergency lights				
OTHER:				

Signage	OK	Action Needed	Action Taken	Date Completed
Appropriate signs in place				
OTHER:				

Pool Inspection (2 of 2)

Name of Pool: _____

Location: _____

Date Inspected: _____ Inspected by: _____

Exits	OK	Action Needed	Action Taken	Date Completed
All Entrances/ Exits free of debris				
All Entrances/ Exits in good working order				
Exit signs visible and functioning				
OTHER:				

Emergency Equipment	OK	Action Needed	Action Taken	Date Completed
Telephone: Working				
Telephone: Accesible				
Emergency Numbers / Location Posted				
Emergency Procedures Posted				
First-Aid Kits Accesible and well-stocked				
Spinal Board				
Other				

Comments:
