Swimming Pool/Spa Inspection Form

As Governed by Title 50, Chapter 53, Montana Code Annotated (MCA) and the Administrative Rules of Montana (ARM): Title 37, Chapter 115, Subchapters 101-2100. Failure to comply with any time limits for correction of critical item violations may result in cessation of pool operations [ARM 37.115.2001(5)]

<table>
<thead>
<tr>
<th>Establishment:</th>
<th>Number of Repeat Violations:</th>
<th>Date: _____ / _____ / _____</th>
</tr>
</thead>
<tbody>
<tr>
<td>City: Montana</td>
<td>Zip:</td>
<td>County:</td>
</tr>
<tr>
<td>Establishment Owner:</td>
<td>License Type: Pool ___ Spa ___ Splash Deck ___</td>
<td>Time In Time Out</td>
</tr>
<tr>
<td>Establishment Telephone:</td>
<td>Hot Spring ___ Wading Pool ___ Other ___</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Purpose of inspection:</th>
<th>Routine</th>
<th>Critical Point</th>
<th>Follow-Up</th>
<th>Pre-Opening</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>License #</td>
<td>pH</td>
<td>Cl</td>
<td>Br</td>
</tr>
<tr>
<td>A.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C.</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>D.</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>E.</td>
<td></td>
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</tr>
</tbody>
</table>

ARM 37.115.1308 ACCEPTABLE RANGES FC 2.0-8.0ppm; CC<0.5ppm; Br 2.0-10.0ppm; pH 7.2-7.8; TA 50-220ppm; CaH 200-400ppm; CYA<100ppm; ORP>650mv

<table>
<thead>
<tr>
<th>#</th>
<th>Compliance Status</th>
<th>Categories</th>
<th>Safety</th>
<th>#</th>
<th>Compliance Status</th>
<th>Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>01.</td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
<td>N/O</td>
<td>Disinfectant Residual (301 (1)(b)); (1308 Table 6)</td>
<td>Facility Safety and Emergency Equipment; Plans (15xx)</td>
</tr>
<tr>
<td>02.</td>
<td>IN</td>
<td>OUT</td>
<td>N/O</td>
<td>pH Range (301(1)(p)); (1308 Table 6)</td>
<td>Feature Safety (18xx)</td>
<td></td>
</tr>
<tr>
<td>03.</td>
<td>IN</td>
<td>OUT</td>
<td>N/O</td>
<td>Water Clarity (301 (1)(f)); (1308 Table 6)</td>
<td>Chemical Storage; Use (12xx)</td>
<td></td>
</tr>
<tr>
<td>04.</td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
<td>N/O</td>
<td>Total Alkalinity (1308 Table 6)</td>
<td></td>
</tr>
<tr>
<td>05.</td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
<td>N/O</td>
<td>Total Chlorine (1308 Table 6)</td>
<td></td>
</tr>
</tbody>
</table>

Personnel

<table>
<thead>
<tr>
<th>#</th>
<th>Compliance Status</th>
<th>Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>06.</td>
<td>IN</td>
<td>OUT</td>
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<tr>
<td>07.</td>
<td>IN</td>
<td>OUT</td>
</tr>
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</table>

Monitoring

<table>
<thead>
<tr>
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<th>Compliance Status</th>
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</thead>
<tbody>
<tr>
<td>08.</td>
<td>IN</td>
<td>OUT</td>
</tr>
<tr>
<td>09.</td>
<td>IN</td>
<td>OUT</td>
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</table>

Recirculation / Filtration / Disinfection

<table>
<thead>
<tr>
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<th>Compliance Status</th>
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</thead>
<tbody>
<tr>
<td>10.</td>
<td>IN</td>
<td>OUT</td>
</tr>
<tr>
<td>11.</td>
<td>IN</td>
<td>OUT</td>
</tr>
<tr>
<td>12.</td>
<td>IN</td>
<td>OUT</td>
</tr>
<tr>
<td>13.</td>
<td>IN</td>
<td>OUT</td>
</tr>
<tr>
<td>14.</td>
<td>IN</td>
<td>OUT</td>
</tr>
<tr>
<td>15.</td>
<td>IN</td>
<td>OUT</td>
</tr>
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</table>

Inspection Results

<table>
<thead>
<tr>
<th>OUT</th>
<th>#</th>
<th>Location Feature #</th>
<th>R</th>
<th>COS</th>
<th>Code Reference</th>
<th>Out of Compliance Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>OUT</td>
<td></td>
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</tr>
</tbody>
</table>

CPO Name: __________________________ CPO Expiration Date: _____ / _____ / _____ CPO Phone Number: __________________________

Remarks: __________________________

Inspector: __________________________ Received by: __________________________

This Section To Be Completed By Inspector

Follow Up: Yes ___ No ___

Compliance ___ Closure ___ Re-Inspection ___

Phone: __________________________ Title: __________________________

FCS September 2014