

PUBLIC POOL BATHING PLACE

UserId: NedzweckasMJ

STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY HEALTH DEPARTMENT
PUBLIC POOL AND BATHING PLACE
INSPECTION REPORT

Geocoded 26.581182/-81.884286

PURPOSE:

- ROUTINE REINSPECTION
 CONSTRUCT. CHANGE OF OWNER
 COMPLAINT CONSULTATION
 QA SURVEY EPIDEMIOLOGY
 OTHER

TYPE: Public Pool <= 25000 Gallons



NAME of POOL: Tanglewood Elementary Pool
 ADDRESS: 1620 Manchester Boulevard CITY: Fort Myers
 OWNER: The School District of Lee County * ZIP: 33919
 PERSON IN CHARGE: Fred Hopspea PHONE: (239) 334-1102
 POOL OPERATOR: Tri-City PHONE: (239)234-1992
 E-MAIL: sherrimw@leeschools.net

- RESULTS:
 Satisfactory
 Incomplete
 Pool Closed
 Unsatisfactory
 OUT OF BUSINESS

Correct Violations by

- Next Inspection
 8:00 AM on:

BEGIN TIME	END TIME	DATE ASSESSED	POSITION #	EXISTING FACILITIES - PERMIT NUMBER
12:00	12:30	10/09/2013	54489	36-60-00874

Re-Inspection Date
10/25/2013

Items marked below are not in compliance the requirements of Chapters 64E-9 of the Florida Administrative Code and must be corrected. Continued operation of this facility without making these corrections is a violation of Chapter 64E-9 of the Florida Administrative Code and Chapters 386 and 514, Florida Statutes. Violations must be corrected as indicated in the Results section above or an administrative fine or other legal action will be initiated.

POOL AREA	POOL SAFETY	EQUIPMENT ROOM	POOL SPECIFICATIONS
<input type="checkbox"/> 1. Appearance/Algae Control	<input type="checkbox"/> 14. Life Hook w/ Pole	<input type="checkbox"/> 25. Spa Requirements	VOLUME 17280
<input type="checkbox"/> 2. Deck/Walkways	<input type="checkbox"/> 15. Life Ring w/ Rope	<input type="checkbox"/> 26. Wading Pool: Quick Dump	POOL LOAD 20
<input type="checkbox"/> 3. Tile/Pool Finish	<input type="checkbox"/> 16. Safety Line/2" Marking	<input type="checkbox"/> 27. Water Level/Control	FLOW RATE 100
<input type="checkbox"/> 4. Depth Markers	<input type="checkbox"/> 17. Rules Posted	<input type="checkbox"/> 28. Disinfection Feeder	FILTER TYPE CV
<input type="checkbox"/> 5. Handrail/Ladder	<input type="checkbox"/> 18. Certification	<input type="checkbox"/> 29. pH Feeder	
<input type="checkbox"/> 6. Step Markings	SANITARY FACILITIES	<input type="checkbox"/> 30. Chem. Container Label	
<input type="checkbox"/> 7. Main Drain Grate	<input type="checkbox"/> 19. Supplies	<input type="checkbox"/> 31. Filter Pump	
<input type="checkbox"/> 8. Gutter Grates/Skimmer	<input type="checkbox"/> 20. Clean	<input type="checkbox"/> 32. Vacuum Cleaner	
<input type="checkbox"/> 9. Lighting	WATER QUALITY	<input type="checkbox"/> 33. Flowmeter 110	
<input type="checkbox"/> 10. No Dive Markings	<input checked="" type="checkbox"/> 21. Approved Test Kit	<input type="checkbox"/> 34. Thermometer 79	
<input type="checkbox"/> 11. Diving Board	<input type="checkbox"/> 22. Free Chlorine Bromine 2.5	<input type="checkbox"/> 35. Pressure/Vacuum Gauge	
<input type="checkbox"/> 12. Pool Cover	<input type="checkbox"/> 23. pH 7.4	<input type="checkbox"/> 36. Equip. Room	
<input type="checkbox"/> 13. Pool Side Shower	<input type="checkbox"/> 24. Chlor. Stabilizer 30		
		<input type="checkbox"/> 37. Cross Connection	
		<input type="checkbox"/> 38. Gas Chlorine Equip.	
		<input type="checkbox"/> 39. Waste Water Disposal	
		<input type="checkbox"/> 40. D.E. Separator	
		<input type="checkbox"/> 41. Other Equipment	
		<input checked="" type="checkbox"/> 42. Equipment Change	
		<input type="checkbox"/> 43. Approved Chemicals	
		<input type="checkbox"/> 44. Maintenance Log	
		<input type="checkbox"/> 45. Inspection Posted	
		<input type="checkbox"/> 46. 514.0315(2), FS, Safety	
		<input type="checkbox"/> 47. Fences	
		<input type="checkbox"/> 48. Other	
		<input type="checkbox"/> 49. Other	

COMMENTS AND INSTRUCTIONS

Violation #21 DPD powder bad in test kit

Violation #42 equipment modified without approval-tablet chemical feeder to liquid feeder, contact engineering for permitting procedures environmental engineering- 239-274-2200

INSPECTION CONDUCTED BY: Michael Nedzweckas PHONE: (239) 690-2100 ex.
 INSPECTION COND SIGNATURE: *M. Nedzweckas* PHONE 2: (239) 690-2100 ex.
 COPY OF REPORT RECEIVED BY: *Y. [Signature]* DATE: 10/09/2013

STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY PUBLIC HEALTH UNIT
Swimming Pools/Spa



Name: Tanglewood Elementary Pool

Date: 10/09/2013

Identification No: 36-60-00874

Comments and Instructions (Continued from Page 1):

Copy of Report
Received By:

Inspector Michael Nedzweckas

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