

# SWIMMING POOL OPERATION RECORD



Month \_\_\_\_\_ Year \_\_\_\_\_ Type of Pool: \_\_\_\_\_Swimming \_\_\_\_\_Wading \_\_\_\_\_Spa \_\_\_\_\_Flume

Name of Certified Pool Operator: \_\_\_\_\_

Name of Pool: \_\_\_\_\_

Address: \_\_\_\_\_ Disinfectant: \_\_\_\_\_Chlorine \_\_\_\_\_Bromine

**State Regulations require this record to be retained for 6 years.**

DATE	SYSTEM OPERATION		CHEMICALS ADDED			WATER CHEMISTRY								Covers, Grates & Mounting Rings Inspected Daily	REMARKS (Include other occurrences such as equipment maintenance/malfunctions, any accidents, injuries, water added, additional chemicals added, cleaning, superchlorination, back wash, pool closure, etc.)				
			(lb/gal)			DISINFECTANT RESIDUAL													
	Flow Rate	Filter Pressure (PSI)	Disinfectant	Acid	Soda Ash	AM				PM						pH	Alkalinity	Cyanuric Acid	Ca Hardness
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2																			
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\*Combined chlorine = total chlorine (DPD #3) minus free chlorine (DPD #1)

I certify this report is true and accurate:

Signature of Operator

Date of Signature

