2026 POOL/SPA SURVEY

COMPLETE INFORMATION REQUIRED FOR EACH POOL AND EACH SPA ON SITE

NAME OF FACILITY: _____

POOL #1 **MAIN** **INTERMEDIATE** **WADING** **SPA**

VOLUME IN GALLONS _____ **TURNOVER RATE IN HOURS:** _____

DEPTH OF POOL (FEET/INCHES): **SHALLOW END** _____ **DEEP END**_____

LIST DEPTH OF SPA IN INCHES: _____

TOTAL SQUARE FEET OF POOL/SPA:_____ **FLOW RATE (GPM):** _____

METHOD OF FILTRATION: **SAND** **SAND&GRAVEL** **CARTRIDGE** **DE**

DISINFECTANT TYPE (LIQUID, GRANULAR, TABLET) LIST ALL USED:

TYPE	**BRAND NAME**
1)_____	_____
2)_____	_____
3)_____	_____

POOL # 2

TYPE: **MAIN** **INTERMEDIATE** **WADING** **SPA**

VOLUME IN GALLONS _____ **TURNOVER RATE IN HOURS:** _____

DEPTH OF POOL (FEET/INCHES): **SHALLOW END** _____ **DEEP END**_____

LIST DEPTH OF SPA IN INCHES: _____

TOTAL SQUARE FEET OF POOL/SPA:_____ **FLOW RATE (GPM):** _____

METHOD OF FILTRATION: **SAND** **DIATAMACEOUS EARTH** **CARTRIDGE**

DISINFECTANT TYPE (LIQUID, GRANULAR) LIST ALL USED

TYPE	**BRAND NAME**
1)_____	_____
2)_____	_____
3)_____	_____

FORM COMPLETED BY: _____
(Name)
_____
(Position or Title)