



CLARK COUNTY PUBLIC HEALTH
 1601 E. Fourth Plain Blvd. ♦ PO Box 9825
 Vancouver, WA 98666-9825
 Phone: 360.397.8428

SPA LOG

Pool Name _____ Address _____ Month _____ Year _____
 Pool Manager _____ Minimum Turnover Required (gpm) _____
 Type of Disinfectant _____

Date	Test Daily					Test Weekly		Record When Applied								
	Time/PPM	Time/PPM	Time/PPM	Time/PPM	Time/PPM	Disinfectant: Free Chlorine Residual (Minimum 3.0 ppm, Maximum 10.0 PPM). Check at least 3 times daily.	Combined chlorine total-free= Combined (<50% F)	pH (7.2 - 8.0)	Temp (Max 104 F)	Flow Rate (gpm)	Bather Load	Alkalinity: Suggest range of 80-200 ppm	Cyanuric Acid: if used, Max 90 ppm	Disinfectant Qty/Day: ___ Lbs ___ Gals ___ Oz ___ Tabs	Other Chemicals Added. Note chem/qty	Misc. Problems: closures, remarks, backwash of filter, clarity, injury, etc.
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