



**County of San Bernardino • Department of Public Health  
Division of Environmental Health Services  
COMMUNITY ENVIRONMENTAL HEALTH PROGRAM  
RECREATIONAL HEALTH - OFFICIAL INSPECTION REPORT**

[www.sbcounty.gov/dph/dehs](http://www.sbcounty.gov/dph/dehs)

**(800) 442-2283**

|  |                             |                                |                              |                   |  |                                       |  |
|--|-----------------------------|--------------------------------|------------------------------|-------------------|--|---------------------------------------|--|
| FACILITY NAME<br><b>KENDALL PALMS APARTMENTS</b>                       |                             |                                |                              |                   | DATE<br><b>7/29/2014</b>   | SIGNATURE                             |  |
| LOCATION<br><b>3943 N H ST, SAN BERNARDINO, CA 92404</b>               |                             |                                |                              |                   | REINSPECTION DATE<br><b>Not Specified</b>  | PERMIT EXPIRATION<br><b>8/31/2014</b> |  |
| MAILING ADDRESS<br><b>9201 SUNSET BL STE 905, LOS ANGELES CA 90069</b> |                             |                                |                              |                   | REHS<br><b>Dior Porter</b>   |                                       |  |
| FA #<br><b>FA0008920</b>   | PR #<br><b>PR0013853</b>    | SR #<br><b>Not Specified</b>   | CO #<br><b>Not Specified</b> | PE<br><b>3620</b> | PROGRAM IDENTIFIER: Pool<br>SERVICE: 001 - INSPECTION - ROUTINE  |                                       |  |
| TIME IN<br><b>10:19 AM</b>   | TIME OUT<br><b>10:59 AM</b> | CONTACT<br><b>Not Captured</b> |                              |                   | RESULT: 05 - CORRECTIVE ACTION / FOLLOW UP REQUIRED<br>ACTION: 13 - PERMIT SUSPENDED / FACILITY CLOSED |                                       |  |

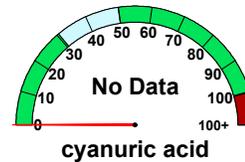
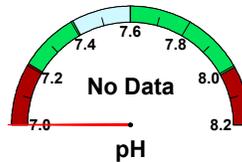
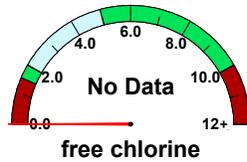
**RECREATIONAL HEALTH - Public Pool - Initial Pool at Facility**

Based on an inspection this day, the items marked below identify the violation(s) in operation or facilities which must be corrected. The Permittee has the right to a hearing if requested in writing within 15 calendar days of receipt of this notice, to show cause why the permit to operate should not be suspended or revoked.

Failure to correct listed violation(s) prior to the designated compliance date may necessitate an additional reinspection at a charge of \$61.25 per 15 minutes with a minimum time of 30 minutes, and a minimum charge of \$122.50.

**92**

SCORE



|                     |         |
|---------------------|---------|
| temperature (F)     | No Data |
| observed flow (gpm) | No Data |
| required flow (gpm) | No Data |
| volume (gal)        | No Data |
| area (sq ft)        | No Data |
| occupancy           | No Data |

**36K995 Permit - Suspension**



|                            |                                |   |
|----------------------------|--------------------------------|---|
| <b>POINTS</b><br><b>NA</b> | Compliance Date: Not Specified | <b>Inspector Comments:</b> Permit suspended due to poor water quality/clarity. Contact the program of Environmental Health once corrections have been made. Pool may only be re-opened by an Environmental Health Specialist. Gate secured with master lock. Closure sign posted. |
|                            | Not In Compliance              |   |
|                            | Violation Reference - HSC      |   |

**Violation Description:** Violation(s) observed pose an immediate threat to public health and safety. The health permit to operate is hereby suspended and the pool/spa ordered closed until the listed violation(s) have been corrected and verified by Environmental Health Services (EHS). The facility is to remain closed until permission from EHS is given. Contact your inspector at your local office to schedule a reinspection to reinstate the health permit. The facility is posted closed; do not move, hide, or remove the sign. Reopening of the pool/spa without the approval by EHS, may result in an hourly billable Professional Services fee.

**36K408 Water Quality - Critical - Clarity**



|                           |  |   |
|---------------------------|--|---|
| <b>POINTS</b><br><b>4</b> | Compliance Date: Not Specified           | <b>Inspector Comments:</b> Observed green pool water and drain(s) not easily visible. Permit suspended. Pool closure sign posted. Contact information left with managers. |
|                           | Not In Compliance                        |   |
|                           | Violation Reference - CCR - 65527, 65543 |   |

**Violation Description:** The recirculation and purification system shall be operated and maintained so as to keep the pool water clean and clear. Under no circumstances shall the pool be used if the main drain is not clearly visible from the deck. The water of every wading pool shall be kept sufficiently clear so that the bottom of the wading pool will be visible at all times.

**36K430 Safety - Equipment/First Aid Kit**

|                           |                                   |   |
|---------------------------|-----------------------------------|---|
| <b>POINTS</b><br><b>2</b> | Compliance Date: Not Specified    | <b>Inspector Comments:</b> Observed missing hook on the rescue pole. Provide an approved body hook. |
|                           | Not In Compliance                 |   |
|                           | Violation Reference - CCR - 65539 |   |

**Violation Description:** Every swimming pool shall be equipped for safety and rescue purposes with one or more rescue poles not less than 12 feet in length with body hooks, and one or more life rings having a minimum exterior diameter of 17 inches readily accessible for use. Such life rings shall have attached to them a 3/16 inch line long enough to span the maximum width of the pool. A first aid kit shall be provided at all swimming pools when required by DEHS.

**36K448 Equipment - Flow Meter**

|                           |                                   |  |
|---------------------------|-----------------------------------|--|
| <b>POINTS</b><br><b>2</b> | Compliance Date: Not Specified    | <b>Inspector Comments:</b> Repair stuck flow meter so that the flowrate may be determined. |
|                           | Not In Compliance                 |  |
|                           | Violation Reference - CCR - 3125B |  |

**Violation Description:** A flow meter shall be provided on each recirculation system accurate to within 10 percent of flow. Flowmeter shall be maintained in good repair, accurately displaying flowrate.

**Overall Inspection Comments**

No summary comments have been made for this inspection.



**COMMUNITY ENVIRONMENTAL HEALTH PROGRAM  
RECREATIONAL HEALTH - OFFICIAL INSPECTION REPORT**

[www.sbcounty.gov/dph/dehs](http://www.sbcounty.gov/dph/dehs)

**(800) 442-2283**

|   |                   |                     |
|---|-------------------|---------------------|
| FACILITY NAME<br>KENDALL PALMS APARTMENTS         | DATE<br>7/29/2014 | SIGNATURE           |
| LOCATION<br>3943 N H ST, SAN BERNARDINO, CA 92404 |                   | REHS<br>Dior Porter |

**Photo Attachments:**

No Photo Attachments