



**RECREATIONAL HEALTH - OFFICIAL INSPECTION REPORT**

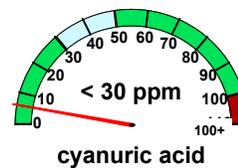
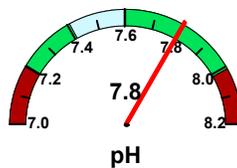
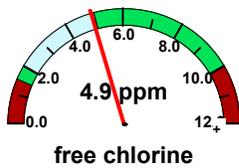
FACILITY NAME <b>ECONO LODGE</b>				REINSPECTION <b>Not Specified</b>	INSPECTOR <b>William Kirschman</b>	DATE <b>7/29/2016</b>
LOCATION <b>17133 VALLEY BL, FONTANA, CA 92335</b>				PERMIT <b>4/30/2017</b>	IDENTIFIER: Spa	
TIME IN <b>10:50 AM</b>	TIME OUT <b>11:20 AM</b>	FACILITY ID <b>FA0002698</b>	RELATED ID <b>PR0015540</b>	PE <b>3623</b>	SERVICE: 003 - INSPECTION - FOLLOW UP INSPECTION	
					RESULT: 03 - CORRECTIVE ACTION / NO FOLLOW UP REQ	
					ACTION: 01 - NO FURTHER ACTION REQUIRED	

**RECREATIONAL HEALTH - Public Pool - Additional Spa at Facility**

Based on an inspection this day, the items marked below identify the violation(s) in operation or facilities which must be corrected. Failure to correct listed violation(s) prior to the designated compliance date may necessitate an additional inspection to be billed at the hourly rate as provided in the San Bernardino County Code, [Schedule of Fees](#).

Administrative Order to Show Cause (OSC): 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; otherwise the right to a hearing shall be deemed waived.

Ideal
In Compliance
Not in Compliance



temperature (°F)	No Data
observed flow (gpm)	No Data
required flow (gpm)	54
volume (gal)	1,700
area (sq ft)	86
occupancy	8

**IMPORTANT: Replacement of Suction Outlet Covers**  
Suction Outlet covers (anti-entrapment covers over main drains and skimmer equalizer outlets) shall be replaced upon expiration. The expiration (in years) is stamped on the front of each cover, indicating the amount of time the cover is valid after installation. Each replacement cover shall:

- Meet the latest ANSI/APSP-16 performance standard
- Be rated for the maximum designed flow-rate of the pump

Retain all records which indicate the make/model number of the replacement cover and date of installation. Records shall be made available to your

**36K994 Reinspection**

**POINTS**  
**NA**

Compliance Date: Not Specified  
Not in Compliance  
Violation Reference - HSC

**Inspector Comments:** ok to re-open spa

**Description:** Reinspection conducted at this time to determine compliance from prior inspection.

**Overall Inspection Comments**

No summary comments have been made for this inspection.

**Signature(s) of Acknowledgement**

NAME:  
TITLE:

Total # of Images: 0