



**Public Health**  
**Environmental Health Services**

**RECREATIONAL HEALTH - OFFICIAL INSPECTION REPORT**

FACILITY NAME COUNTRY CLUB MOBILEHOME ESTATES			DATE 7/15/2015	REINSPECTION DATE Not Specified	PERMIT EXPIRATION 12/31/2015
LOCATION 54999 MARTINEZ TR, YUCCA VALLEY, CA 92284				INSPECTOR Marilyn Krichbaum	
MAILING ADDRESS 54999 MARTINEZ TR, YUCCA VALLEY, CA 92284			<input checked="" type="checkbox"/> FACILITY <input type="checkbox"/> OWNER <input type="checkbox"/> ACCOUNT IDENTIFIER: Spa SERVICE: 001 - INSPECTION - ROUTINE RESULT: 01 - CORRECTIVE ACTION NOT REQUIRED ACTION: 01 - NO FURTHER ACTION REQUIRED		
TIME IN 10:25 AM	TIME OUT 10:55 AM	FACILITY ID FA0007207	RELATED ID PR0014731	PE 3623	

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

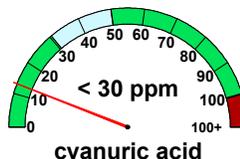
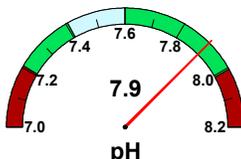
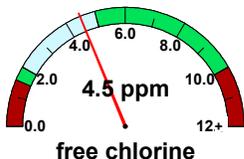
Based on an inspection this day, the items marked below identify the violation(s) in operation or facilities which must be corrected. The Permittee has the right to a hearing if requested in writing within 15 calendar days of receipt of this notice, to show cause why the permit to operate should not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

**99**

SCORE

Failure to correct listed violation(s) prior to the designated compliance date may necessitate an additional reinspection at a charge of \$ 4.08 per 1 minute with a minimum time of 30 minutes, and a minimum charge of \$122.50.

Ideal
In Compliance
Not in Compliance



temperature (°F)	102.0
observed flow (gpm)	60
required flow (gpm)	56
volume (gal)	1,688
area (sq ft)	100
occupancy	10

**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:

1. Meet the latest ANSI/APSP-16 performance standard
2. 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 inspector upon request.

**36K508 Water Quality – Non-Critical – Water pH 7.2 to 7.8**

**POINTS**  
**1**

Compliance Date: Not Specified  
 Not In Compliance  
 Violation Reference - HSC - 65530

Inspector Comments: Observed a high ph level of 7.9. Lower the ph level 7.9. Lower the ph level so that it is 7.2-7.8.

Violation Description: The pool operator shall maintain public pool water at pH 7.2 to 7.8.

**Overall Inspection Comments**

No summary comments have been made for this inspection.

**Signature(s) of Acknowledgement**

NAME: Robert  
 TITLE:

Total # of Images: 0