



Public Health
Environmental Health Services

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RECREATIONAL HEALTH - OFFICIAL INSPECTION REPORT

FACILITY NAME MOJAVE MANOR APTS		DATE 4/3/2015	REINSPECTION DATE Not Specified	PERMIT EXPIRATION 1/31/2012
LOCATION 204 WOODHAM AV, BARSTOW, CA 92311			INSPECTOR Dawn LaFlower	
MAILING ADDRESS 6180 RIVERSIDE DR UNIT C27, CHINO CA 91710			IDENTIFIER: Pool	
<input type="checkbox"/> FACILITY <input type="checkbox"/> OWNER <input checked="" type="checkbox"/> ACCOUNT			SERVICE: 001 - INSPECTION - ROUTINE	
TIME IN 10:45 AM	TIME OUT 11:01 AM	FACILITY ID FA0007273	RELATED ID PR0013920	PE 3620
			RESULT: 01 - CORRECTIVE ACTION NOT REQUIRED	
			ACTION: 01 - NO FURTHER ACTION REQUIRED	

RECREATIONAL HEALTH - Public Pool - Initial Pool at Facility

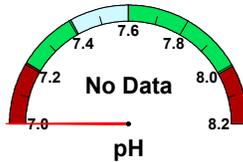
Based on an inspection this day, the items marked below identify the violation(s) in operation or facilities which must be corrected. The Permittee has the right to a hearing if requested in writing within 15 calendar days of receipt of this notice, to show cause why the permit to operate should not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

100

SCORE

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.

Ideal
In Compliance
Not in Compliance



temperature (°F)	No Data
observed flow (gpm)	No Data
required flow (gpm)	75
volume (gal)	16,500
area (sq ft)	576
occupancy	28

36K952 Drained Pool or Spa Inspection

POINTS NA	Compliance Date: Not Specified	Inspector Comments: Inspection conducted on a drained pool. All fencing and gates secured. Observed small dogs being penned inside enclosure.
	Not in Compliance	
	Violation Reference - HSC	

Description: An inspection was conducted at this time on a drained pool or spa. Contact DEHS prior to filling with water and/or operating.

Overall Inspection Comments

There is a past due amount of \$2,206.00. Please submit the past due amount to avoid possible legal action.

Signature(s) of Acknowledgement

SMA

NAME:
TITLE:

Photo Attachments:
No Photo Attachments