SWIMMING POOL - INSPECTION REPORT ME: Applewood TYPE OF POOL: Seasonal INTARIAN: Christiana Mann DATE: Image: Christiana Mann Image: Christiana Mann Image: Christiana Mann DATE: Image: Christiana Mann I	HDEPA	E SWINNING	FAX (765)		N REPORT
Intraniant N. Tillotson Muncie, IN 47304 Intraniant DATE: An inspection of your swimming pool has been made this day and you are directed to correct conditions marked with an (x). A. Pool Structure: 1. Floors, Walls, Rurways () 2. Scum gutters, Skimmers () 3. Ladders, Stairs, Stepholes () 3. Ladders, Stairs, Stepholes () 4. Diving boards, Float, Depth () 5. Inlets, Outlets, Circulation () 6. Piping () 7. Fencing () 8. Other () 9. Other () 1. Food Service () 2. Emergency Equipment () 3. Other () 4. Other () 9. Other () 1. Fload Service () 2. Computers Equipment () 3. Other () 1. Number of Bathers () 2. Communicable Disease () </th <th></th> <th></th> <th>POOL - IN</th> <th></th> <th></th>			POOL - IN		
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NITARIAN: Christiana Mann DATE: 7 0 0 An inspection of your swimming pool has been made this day and you are directed to correct conditions marked with an (x). A. Pool Structure: F. Showers, Toilets, Dressing Rooms: 1. Floors, Walls, Runways () 2. Scum gutters, Skimmers () 2. Ventilation () 2. Scum gutters, Skimmers () 2. Ventilation () 2. Ventilation () 3. Ladders, Stairs, Stepholes () 3. Hot, Cold water () () 4. Diving boards, Float, Depth () 4. Scap, Towels () () 5. Inlets, Outlets, Circulation () 5. Disinfection () () 6. Avatories () 8. Refuse Containers () 7. Fencing () 7. Clothing Storage () 8. Other () 8. Refuse Containers () 9. Other 1. Number of Bathers () 1. God Service () 1. Number of Bathers () 2. Communicable Disease () 3. Operational Data () 1. Filtration, Disinfection () 4. Other ()	CATI	ON / ADDRESS OF POOL N.	Tillotson M	uncie, IN	
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Signature (Operator / Manager) an file