



Recreational Water Establishment Inspection Report

Establishment Information	
Facility Name LA CROSSE YMCA NORTH - ONALASKA	Facility Type Indoor Pool
Facility ID # HSAT-7QWK4B	Facility Telephone # 608 783-9622
Facility Address 400 MASON DR ONALASKA , WI 54650	
Licensee Name LA CROSSE AREA FAMILY YMCA	Licensee Address 1140 MAIN ST LA CROSSE , WI 54601 -4190

Pool Parameters	
Free Available Chlorine/Bromine	3.4
Combined Chlorine	0.4
pH	7.4
Alkalinity	
Cyanuric Acid	
Temperature	84
Flowmeter Reading(s)	930
Pressure Gauges Reading(s)	

Inspection Information		
Inspection Type Routine	Inspection Date 02/08/2016	Total Time Spent

OPERATOR - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

Observed Violations
Total # 0

Comments
<p>Repair the corner grate as discussed.</p> <p>Refresher training for life guards on active scanning is needed.</p> <p>Life guard plan has been submitted to DHS for review by inspector.</p> <p>Adjust lifeguard plan to patron loading.</p> <p>Tighten the grab rails throughout the pool room.</p>

Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge

Sanitarian

Doug Schaefer
(608) 785-9679