



Recreational Water Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name <b>ERICKSON POOL - SPRAY PAD</b>	Facility Type <b>Water Attraction (RWI)</b>
Facility ID # <b>ASTS-9J8MD3</b>	Facility Telephone # <b>608 789-7193</b>
Facility Address <b>2324 THOMPSON LA CROSSE , WI 54601</b>	
Licensee Name <b>LA CROSSE PARKS DEPARTMENT</b>	Licensee Address <b>400 LA CROSSE ST LA CROSSE , WI 54601</b>

<b>Pool Parameters</b>	
Free Available Chlorine/Bromine	3.4
Combined Chlorine	.2
pH	7.4
Alkalinity	40
Cyanuric Acid	<30
Temperature	80.8
Flowmeter Reading(s)	1300
Pressure Gauges Reading(s)	26

<b>Inspection Information</b>		
Inspection Type <b>Routine</b>	Inspection Date <b>06/01/2016</b>	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.

<b>Observed Violations</b>
<b>Total # 0</b>

<b>Comments</b>

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

**kerry gloede**

Sanitarian

**Aron Newberry**  
**(608) 785-9730**



Recreational Water Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name <b>ERICKSON POOL</b>	Facility Type <b>Outdoor Pool</b>
Facility ID # <b>HSAT-7QWQMH</b>	Facility Telephone # <b>608 878-7193</b>
Facility Address <b>2324 THOMPSON ST LA CROSSE , WI 54601</b>	
Licensee Name <b>LA CROSSE PARKS DEPARTMENT</b>	Licensee Address <b>400 LA CROSSE ST LA CROSSE , WI 54601</b>

<b>Pool Parameters</b>	
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Cyanuric Acid	<30
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Pressure Gauges Reading(s)	1300

<b>Inspection Information</b>		
Inspection Type <b>Routine</b>	Inspection Date <b>06/01/2016</b>	Total Time Spent

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<b>Total # 0</b>

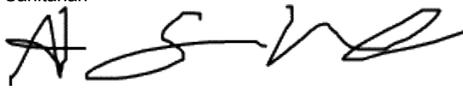
<b>Comments</b>

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Person in Charge

  
**kerry gloede**

Sanitarian

  
**Aron Newberry**  
**(608) 785-9730**



Recreational Water Establishment Inspection Report

<b>Establishment Information</b>	
Facility Name <b>ERICKSON POOL</b>	Facility Type <b>Water Attraction with up to 2 Slides/Waterslides (RWT)</b>
Facility ID # <b>ASTS-9J8MCG</b>	Facility Telephone # <b>608 789-7193</b>
Facility Address <b>2324 THOMPSON LA CROSSE , WI 54601</b>	
Licensee Name <b>LA CROSSE PARKS DEPARTMENT</b>	Licensee Address <b>400 LA CROSSE ST LA CROSSE , WI 54601</b>

<b>Pool Parameters</b>	
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