



**Washington County**  
620 S. 400 E. Suite #400  
St. George, UT 84770  
435-673-3528

**Iron County**  
260 E. DL Sargent Dr.  
Cedar City, UT 84720  
435-586-2437

**Beaver County**  
75 W. 1175 N.  
Beaver, UT 84713  
435-438-2482

**Kane County**  
245 S. 200 E.  
Kanab, UT 84741  
435-644-2537

**Garfield County**  
609 N. Main St.  
Panguitch, UT 84759  
435-676-8800

## LIMITED USE POOL PLAN

### YEARLY OPERATION, MAINTENANCE & SANITATION PLAN FOR LIMITED USE POOLS

Name of Limited Use Pool \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

HOA Board Members (if applicable)

Name	Phone	Name	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Designated person(s) to monitor pool (DPM) \_\_\_\_\_  
\_\_\_\_\_

Name of QPO \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Property Management Company (if applicable)

Address \_\_\_\_\_ Phone \_\_\_\_\_  
\_\_\_\_\_ Contact Person \_\_\_\_\_  
\_\_\_\_\_

Type of pool      Indoor       Outdoor       Usage All year       Seasonal from \_\_\_\_ to \_\_\_\_  
Type of Spa      Indoor       Outdoor       Usage All year       Seasonal from \_\_\_\_ to \_\_\_\_

Inspection Plan:      QPO/DPM      Times per Day

Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____
Sunday	_____	_____

**Measurements to be recorded in test Log by CPO and Designated Person(s):**

Chlorine	Ph	Water Clarity	Estimated Bather Load
Flow Rate	General appearance		

**Additional items that need to be tested by QPO only:**

Calcium Hardness	Cyanuric Acid	Filter maintenance	Chemicals used	Water Temperature
ORP Calibration		SVRS Functionality		Monthly Bacteriological Testing

Accepted by C P O \_\_\_\_\_ Date: \_\_\_\_\_

Accepted by HOA \_\_\_\_\_ Date: \_\_\_\_\_

Accepted by SWUPHD \_\_\_\_\_ Date: \_\_\_\_\_

This plan is to be updated and submitted yearly.  
All plans expire on December 31<sup>st</sup> of the year they are submitted.