

Water Recreation Facility Electrical Inspection Form

Instructions
Please complete ONE electrical inspection for EACH body of water.

Facility Name: _____

Facility Type (Check ONE)
<input type="checkbox"/> Main Pool <input type="checkbox"/> Wading Pool <input type="checkbox"/> Spa Pool <input type="checkbox"/> Diving Pool <input type="checkbox"/> Interactive Water Feature <input type="checkbox"/> Other

Inspection Results			
		Yes	No
1.	Pool was filled with water at time of inspection.	<input type="checkbox"/>	<input type="checkbox"/>
2.	Checked and tightened all loose wires found in panels and disconnects.	<input type="checkbox"/>	<input type="checkbox"/>
3.	Checked breakers and fuses for looseness and working condition.	<input type="checkbox"/>	<input type="checkbox"/>
4.	Checked ground fault circuit interrupter for proper working conditions.	<input type="checkbox"/>	<input type="checkbox"/>
5.	Checked underwater fixtures and deck boxes for water leakage from worn or broken gaskets and for broken or deteriorated cords to the fixtures in their cases. Checked clamps that hold fixtures in their cases.	<input type="checkbox"/>	<input type="checkbox"/>
6.	Checked all pole lights and receptacles around the pool for proper bonding, loose conduit connections, breakage, and damaged or missing plates and covers.	<input type="checkbox"/>	<input type="checkbox"/>
7.	Checked all bond wires on all electrical equipment to pool.	<input type="checkbox"/>	<input type="checkbox"/>
8.	Checked all conduits and connectors for tight connections.	<input type="checkbox"/>	<input type="checkbox"/>
9.	Replaced all defective conduits, panels, disconnects, switches, troughs, pull boxes and junction boxes.	<input type="checkbox"/>	<input type="checkbox"/>

Facility Information
Phone Number: _____
Street Address: _____ City: _____ State: _____ Zip: _____

Owner Information

Name: _____

Phone Number: _____ Email: _____

Street Address: _____ City: _____ State: ____ Zip: _____

Electrical Contractor Information

Company Name: _____

Phone Number: _____ Email: _____

Street Address: _____ City: _____ State: ____ Zip: _____

Certification

I certify that the items listed above have been inspected, and the necessary corrections have been performed. This facility is safe and in full compliance with applicable codes and standards.

Contractor Signature

Date

Contractor Name (printed): _____

Contractor License Number: _____