

CHLORINE LOG SHEET

Facility Name: _____ Pool / Spa / Wading / Spray

Week Beginning **Monday**, _____, **20** _____

MAIN DRAINS MUST BE CLEARLY VISIBLE AT ALL TIMES WHEN THE POOL IS OPEN

Total alkalinity must be recorded at least once a **week** Date: _____ ppm: _____

Filters Backwashed Date: _____ Pool Superchlorinated as needed Date: _____

Spa must be drained and cleaned **weekly** Date: _____

Cyanuric acid (**outdoor pools only**) must be recorded weekly Date: _____ ppm: _____

Required Chlorine Levels **Pool 1 - 5 ppm** **Spa 1 - 5 ppm** **with Cyanric Acid 1.5 - 5 ppm**
Combined Chlorine 0 - 0.2 ppm **pH 7.2 - 7.8** **Total Alkalinty 50 - 180 ppm**

		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Pre Opening	Free Chlorine							
	Combined Chlorine							
	pH							
	Flow Meter Reading							
	Water Temperature							
	Time							
	Initials							
Morning	Free Chlorine							
	Combined Chlorine							
	pH							
	Time							
	Initials							
Midday	Free Chlorine							
	Combined Chlorine							
	pH							
	Time							
	Initials							
Afternoon	Free Chlorine							
	Combined Chlorine							
	pH							
	Time							
	Initials							
Closing	Free Chlorine							
	Combined Chlorine							
	pH							
	Time							
	Initials							
Chemicals Added & Notes								