**State of Maryland Department of Health and Mental Hygiene**

Operating Records For: _____

Recreational facilities: Record the information for items 1 through 3 in 2-hour intervals, beginning 1/2 hour before opening; record items 4 through 9 a minimum of three times per day, beginning 1/2 hour before opening. Semi-Public facilities: Record all the information 3 times per day, 1/2 before opening, between noon and 2:00 p.m. and 2 hours before closing

| Date | Time | Chlorine Level | Combined Chlorine Level | pH | Water Clarity | Water Temp., if heated | Flow Rate | Influent/ Effluent pressure | Pump Vacuum | Total # of bathers |
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| Weekly Reading | Total Alkalinity: | Calcium Hardness: | Cyanuric Acid: |
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**Record Daily** (time of filter backwash or cleaning, injuries or accidents, chemicals added to water and malfunctioning or broken equipment:

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Certified Operator Signature: _____