

Swimming pool inspection checklist (monthly)

This checklist has been developed to assist operators with identifying and addressing common swimming pool safety requirements, this checklist is a generic guide and does not cover all possible hazards, risks and compliance requirements.

Date: _____ / _____ / _____

Completed by: _____

Swimming pool reference or no: _____

Instructions: Tick the checklist items as you complete them, NA items not relevant, note down any actions issues (report all safety / maintenance issues).

Inspection and task checklist:	Inspection results (Yes, No or NA)	Comments / issues / actions:
Is the fencing a constant height of at least 1.2m, free from any climbable objects and free from damage.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Is the access gate magnetic latch in working order and self closes.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Is pool safety signage including CPR in place and legible.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Is the pool area free from debris that may be hazardous (branches, glass, needles or animal fouling).	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Are external surfaces free from slip and trip hazards including slip rated surfaces installed	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Is the pool surface, walls and floor clean and free from debris and algae (clean as required).	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Is lifesaving equipment such as a life buoy installed in the pool area and accessible.	SAMPLE - INTENTIONALLY FADED Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Are skimmer gutters and gratings clean and free from algae, slime and scum marks.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Are skimmer box lids free from damage and secured / locked.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Are access ladder, rails and stairs into the pool free from damage and in working order.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Have the pump filters been cleaned and water been tested and treated.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	

Inspection and task checklist:	Inspection results (Yes, No or NA)	Comments / issues / actions:
Are the pumps and water jets in good working order.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Have filters / traps been cleared of debris and in working order.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Is the pump room secure and water treatment chemicals appropriately stored / contained.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Is the pump room electrical equipment in good working order with current test tags.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Are water testing results recorded and maintained / in date.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
SAMPLE - INTENTIONALLY FADED		
Is a fire extinguisher installed in the pump room with current maintenance tags.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Is the pool safety certificate on display and in date (12 monthly).	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Are other structure in the area such as seating and shade sales in good working order and free from damage or excessive deterioration such as corrosion.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Have maintenance requirements been reported and recorded on the maintenance log.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Have any safety issues been identified which requires the pool to be removed from service.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Has a final check been conducted to ensure the pool is clean and in good condition.	Yes <input type="checkbox"/> No <input type="checkbox"/> Na <input type="checkbox"/>	
Additional comments: <div style="border: 1px solid black; height: 100px; width: 100%;"></div>		