



Recreational Water Inspection Report

<b>Establishment Information</b>	
Facility Name LA CROSSE YMCA NORTH - ONALASKA	Facility Type Water Attraction with up to 2 Slides/Waterslides (RWT)
Facility ID # ASTS-9KJR2Y	Facility Telephone # 608
Facility Address 400 MASON ONALASKA, WI 54650	
Licensee Name LA CROSSE AREA FAMILY YMCA	Licensee Address 1140 MAIN ST LA CROSSE, WI 54601 -4190

<b>Pool Parameters</b>	
Free Available Chlorine/Bromine	1.4
Combined Chlorine	0.4
Oxidation Reduction Potential	
Disinfectant Type	Chlorine-Erosion
Secondary Disinfectant Type	
Secondary Disinfectant Level	
pH	7.4
Alkalinity	70
Cyanuric Acid	
Temperature	85
Calcium Hardness	
Saturation Index	
Flowmeter Reading(s)	1249
Pressure Gauges Reading(s)	14/19
Turnover Rate	

<b>Inspection Information</b>		
Inspection Type Routine	Inspection Date February 28, 2019	Total Time Spent

**OPERATOR** - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

**Observed Violations**

**Total # 1**

**Observed Violations - 26 - Permissible patron load, Rescue equipment, first aid equipment, telephone present, located, good condition, phone numbers posted**

**OBSERVATION:** The maintenance number is not posted near the designated emergency phone.

**CORRECTIVE ACTION(S):** Post the emergency numbers near the designated emergency phone. Correct By: 28-Feb-2019

**CODE CITATION:** ATCP 76.26 Rescue equipment. (2) TELEPHONE. For outdoor pools, a working telephone shall be available in the pool area. For indoor pools, a working telephone shall be available within the enclosed area around a pool. A current list of emergency numbers and the facility's location shall be attached to or posted near the telephone. Cellular or cordless phones may not be used to comply with this subsection.

Note: A request for an alternative location for a telephone or another system of communication that provides access to emergency service during hours of pool operation may be made under s. ATCP 76.02 (2).

**Comments:**

[Slide not open during inspection.](#)

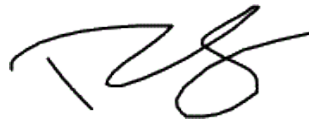
Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge



**Carl Klubertanz**

Sanitarian



**Doug Schaefer**  
**(608) 785-9679**



Recreational Water Inspection Report

<b>Establishment Information</b>	
Facility Name LA CROSSE YMCA NORTH - ONALASKA	Facility Type Indoor Pool
Facility ID # HSAT-7QWK4B	Facility Telephone # 608 783-9622
Facility Address 400 MASON DR ONALASKA , WI 54650	
Licensee Name LA CROSSE AREA FAMILY YMCA	Licensee Address 1140 MAIN ST LA CROSSE , WI 54601 -4190

<b>Pool Parameters</b>	
Free Available Chlorine/Bromine	1.4
Combined Chlorine	0.4
Oxidation Reduction Potential	
Disinfectant Type	Chlorine-Erosion
Secondary Disinfectant Type	
Secondary Disinfectant Level	
pH	7.4
Alkalinity	70
Cyanuric Acid	
Temperature	85
Calcium Hardness	
Saturation Index	
Flowmeter Reading(s)	1249
Pressure Gauges Reading(s)	14/19
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