



Recreational Water Inspection Report

Establishment Information	
Facility Name SPRINGBROOK ASSISTED LIVING	Facility Type Indoor Pool
Facility ID # HSAT-7QXLCA	Facility Telephone # 608 783-2292
Facility Address 861 CRITTER CT ONALASKA, WI 54650	
Licensee Name SPRINGBROOK ASSISTED LIVING	Licensee Address 2850 MONARCH CT ALTOONA, WI 54720

Pool Parameters	
Free Available Chlorine/Bromine Combined Chlorine	10.5
Oxidation Reduction Potential	
Disinfectant Type	Bromine
Secondary Disinfectant Type	
Secondary Disinfectant Level	
pH	7.4
Alkalinity	90
Cyanuric Acid	
Temperature	93
Calcium Hardness	
Saturation Index	
Flowmeter Reading(s)	75
Pressure Gauges Reading(s) Turnover Rate	16

Inspection Information		
Inspection Type Routine	Inspection Date June 26, 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.

Comments:
[No violations. Contact Sam \(785-9732\) with questions. VGBA documentation is on hand.](#)

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

Sanitarian

Rob Wiese

Samuel Welch
(608) 785-9732