Spa/ Hot Tub Water Quality Parameters Log

Facility Name: _____ **Month** _____ **Year**_____

Permit #_____ **Operator:** _____

Date	Time	Chlorine (ppm)		Combined Chlorine/ Chloramine (ppm)		Bromine (ppm)		pH Level		Temp	Total Alkalinity		Notes/ Corrections Made
		Required Range 2.0-7.0 ppm	In Range? Y/N	Required Range < .5 ppm	In Range? Y/N	Required Range 4.0-10.0 ppm	In Range? Y/N	Required Range 7.2-7.8	In Range? Y/N		Required Range > 79 ppm	In Range? Y/N	