

Commercial Pool Pump & Chemical Room Inspection Checklist

Site / Project	_____	Address	_____
Inspector name	_____	Company	_____
Date	_____	Time	_____

Documentation aid only. Adapt this resource to the site, manufacturer instructions, and applicable local requirements. It does not replace a competent person, professional judgment, legal advice, or a required statutory form.

Inspection checklist

Chemical Storage & Handling

☐ Are incompatible chemicals (e.g., Sodium hypochlorite and Muriatic acid) stored separately with adequate physical barriers?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐ Are all chemical containers clearly labeled with the chemical name, hazard warnings, and first aid instructions?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐ Is a readily accessible chemical spill kit available, complete with appropriate PPE and absorbent materials?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐ Is the chemical storage area secured to prevent unauthorized access?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐ Is a current inventory of all chemicals stored on-site maintained and readily available?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐ Are written procedures for safe chemical handling and mixing readily available and followed?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐ Are chemicals stored at the recommended temperature to prevent degradation or hazardous reactions?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐ Are empty chemical containers properly disposed of according to local regulations and manufacturer's instructions?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐ Are chemical deliveries inspected for damage and leaks before acceptance?	☐ Pass	☐ Fail	☐ N/A	Notes: _____

☐	Is adequate secondary containment provided for all liquid chemical storage containers to prevent spills from reaching the environment?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	--	-------------------------------	-------------------------------	------------------------------	--------------

Ventilation & Air Quality

☐	Is the ventilation system operating correctly and providing adequate air exchange to prevent the buildup of toxic chloramine gas?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	---	-------------------------------	-------------------------------	------------------------------	--------------

☐	Is the ventilation system regularly maintained, including filter replacement and duct cleaning?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	---	-------------------------------	-------------------------------	------------------------------	--------------

☐	Is air quality periodically monitored to ensure chloramine gas levels are within acceptable limits?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	---	-------------------------------	-------------------------------	------------------------------	--------------

☐	Are exhaust fans functioning properly and free from obstructions?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	---	-------------------------------	-------------------------------	------------------------------	--------------

☐	Are air intakes located away from potential sources of chemical fumes or exhaust?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	---	-------------------------------	-------------------------------	------------------------------	--------------

☐	If gas-powered equipment is used, is a carbon monoxide detector installed and functioning properly?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	---	-------------------------------	-------------------------------	------------------------------	--------------

☐	Are ventilation system alarms tested regularly to ensure proper function?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	---	-------------------------------	-------------------------------	------------------------------	--------------

☐	Is local exhaust ventilation used during chemical mixing or transfer to capture fumes at the source?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	--	-------------------------------	-------------------------------	------------------------------	--------------

☐	Is there documentation of ventilation system inspections, maintenance, and repairs?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	---	-------------------------------	-------------------------------	------------------------------	--------------

☐	Is there an emergency override to maximize ventilation in case of a chemical release?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	---	-------------------------------	-------------------------------	------------------------------	--------------

Personal Protective Equipment (PPE)

☐	Is appropriate PPE (e.g., chemical-resistant gloves, eye protection, face shield, apron) readily available and in good condition?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	---	-------------------------------	-------------------------------	------------------------------	--------------

☐	Are all PPE items inspected for damage (tears, punctures, deterioration) before each use?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	---	-------------------------------	-------------------------------	------------------------------	--------------

☐	Is PPE properly fitted to each employee to ensure adequate protection?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	--	-------------------------------	-------------------------------	------------------------------	--------------

☐	Is an eyewash station readily accessible (within 10 seconds reach) and unobstructed?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
--------------------------	--	-------------------------------	-------------------------------	------------------------------	--------------

☐	Is the eyewash station tested weekly to ensure proper function and water flow?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Is a safety shower readily accessible and unobstructed?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Is the safety shower tested annually to ensure proper function and water flow?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Have all employees been trained on the proper use, maintenance, and storage of PPE?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Are PPE items cleaned and sanitized after each use?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	If respiratory protection is required, is a respiratory protection program in place, including fit testing and medical evaluations?	☐ Pass	☐ Fail	☐ N/A	Notes: _____

Pump & Equipment Safety

☐	Are all pumps and piping inspected for leaks and corrosion?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Are all moving parts of pumps and equipment properly guarded to prevent accidental contact?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Are all electrical connections and wiring in good condition and properly grounded?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Are maintenance records for all pumps and equipment up-to-date and readily available?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Are chemical feeder pumps calibrated regularly to ensure accurate chemical dosing?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Is an emergency shutdown switch readily accessible and clearly labeled?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Are pressure relief valves functioning properly and set to the correct pressure?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Is vibration monitoring performed on pumps to detect potential mechanical issues?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Are all pipes adequately supported to prevent stress and leaks?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Are backflow prevention devices installed and functioning properly to prevent contamination of the water supply?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Is water quality monitored regularly to ensure proper chemical balance and disinfection?	☐ Pass	☐ Fail	☐ N/A	Notes: _____

Housekeeping & Site Conditions

☐	Are floors clean, dry, and free from slip hazards?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Is adequate lighting provided throughout the pump and chemical room?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Are aisles and walkways clear and unobstructed?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Are emergency exits clearly marked and unobstructed?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Is appropriate safety signage posted, including hazard warnings, emergency contact information, and PPE requirements?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Is a pest control program in place to prevent infestations?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Are waste containers properly labeled and emptied regularly?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Is a fire extinguisher readily accessible and inspected regularly?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Have employees been trained on the proper use of fire extinguishers?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Is a well-stocked first-aid kit readily available?	☐ Pass	☐ Fail	☐ N/A	Notes: _____
☐	Is a regular housekeeping schedule in place and followed?	☐ Pass	☐ Fail	☐ N/A	Notes: _____

Findings

#	Item	Location	Severity	Action required
1				
2				
3				
4				
5				
6				

#	Item	Location	Severity	Action required
7				
8				

Signature

Inspector signature _____

Name _____

Date _____