

BRIDGEWATER TOWNSHIP SANITARY INSPECTION REPORT

IDENTIFICATION					
OWNER INFORMATION <i>(Complete this section only if different from establishment information)</i>			ESTABLISHMENT INFORMATION		
NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT			ESTABLISHMENT TRADING NAME <i>Four Seasons</i>		
NUMBER AND STREET		COUNTY	NUMBER AND STREET		COUNTY
			<i>500 Victoria Drive</i>		<i>Sourcet</i>
MUNICIPALITY		STATE	MUNICIPALITY	ZIP CODE	TELEPHONE NO.
			<i>Bridgewater</i>		
ZIP CODE	COMUN. CODE		ESTABLISHMENT STATE LICENSE NO. (if appl.)	COMUN. CODE	
INSPECTION					
TYPE OF ESTABLISHMENT <input type="checkbox"/> RETAIL <input checked="" type="checkbox"/> POOL <input type="checkbox"/> CAMP <input type="checkbox"/> OTHER		ESTABLISHMENT CODE GOODS <input type="checkbox"/> DESTROYED <input type="checkbox"/> EMBARGOED		<input checked="" type="checkbox"/> INITIAL INSPECTION <input type="checkbox"/> REINSPECTION <i>(other than initial inspection)</i>	
				TIME - (2400 HOURS)	
		DATE	BEGIN	END	
		<i>5/24/22</i>			
EVALUATION					
<input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> CONDITIONALLY SATISFACTORY <input type="checkbox"/> UNSATISFACTORY					
OFFICIAL(S)					
LOCAL BOARD OF HEALTH			INSPECTING OFFICIAL		
NAME, ADDRESS AND TELEPHONE NUMBER Bridgewater Township 100 Commons Way Bridgewater, N.J. 08807 908-725-5750			INSPECTOR'S NAME AND TITLE <i>Patricia Timko-Parker</i> <i>R.E.H.S.</i>		
			INSPECTOR'S SIGNATURE <i>Patricia Timko-Parker</i>		
HEALTH OFFICER <i>Kenn Sommer</i>			INSPECTOR'S PERM. REG. NO. <i>61934</i>		

CONTINUATION SHEET

(for Inspections, Surveys, Audits, etc.)

Name (Individual, Facility, Establishment, etc.) Four Seasons Pool Date 5/24/22

BRIDGEWATER TOWNSHIP

Item No.	Remarks
	Bonding + Grounding OK CPO etc
	Lifeguard cart for Gina Stravic etc
	Trp Electrical Inspection scheduled for 5/26/22
	Emergency phone inside clubhouse w/ emergency sign Safety equip etc
	12000 FAR - one lifeguard required by code
	Emergency shut off for Pool + spa etc
	Alarm for spa tested etc
	* Need thermometer for HOT TUB/SPA clock posted.
	signage etc
	pool is clean + clear
	Garden State Labs tests Pool + SPA
	<p style="text-align: center;">Posted Satisfactory</p>

Signature of Individual Completing Form
[Signature]

Signature of Owner of Facility, Establishment, etc. if required
[Signature]