

BRIDGEWATER TOWNSHIP SANITARY INSPECTION REPORT

IDENTIFICATION

OWNER INFORMATION <small>(Complete this section only if different from establishment information)</small>				ESTABLISHMENT INFORMATION		
NAME OF OWNER(S), CORPORATION OR REGISTERED AGENT				ESTABLISHMENT TRADING NAME		
				Hilton Pool Somerset		
NUMBER AND STREET		COUNTY		NUMBER AND STREET		COUNTY
				500 Promenade		Somerset
MUNICIPALITY		STATE		MUNICIPALITY	ZIP CODE	TELEPHONE NO.
				Bridgewater	08807	
ZIP CODE	COMUN. CODE			ESTABLISHMENT STATE LICENSE NO. (if appl.)	COMUN. CODE	

INSPECTION

TYPE OF ESTABLISHMENT	ESTABLISHMENT CODE	<input checked="" type="checkbox"/> INITIAL INSPECTION <input type="checkbox"/> REINSPECTION <small>(other than initial inspection)</small>		
<input type="checkbox"/> RETAIL <input checked="" type="checkbox"/> POOL <input type="checkbox"/> CAMP <input type="checkbox"/> OTHER	GOODS <input type="checkbox"/> DESTROYED <input type="checkbox"/> EMBARGOED	TIME - (2400 HOURS)		
		DATE	BEGIN	END
		6/9/2022		

EVALUATION

SATISFACTORY
 CONDITIONALLY SATISFACTORY
 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 Patricia Timko-Parker R.E.H.S.
HEALTH OFFICER Kevin Sumner	INSPECTOR'S PERM. REG. NO. B1934

CONTINUATION SHEET

(for Inspections, Surveys, Audits, etc.)

Name (Individual, Facility, Establishment, etc.)
HILTON POOL

Date 6/9/21

BRIDGEWATER TOWNSHIP

Item No.	Remarks
	<p>*Note: Need Twp Electrical Inspection. To call to confirm on the list to inspect.</p>
	<p>Bonding + Grounding ok</p>
	<p>CPD ok</p>
	<p>Log book ok</p>
	<p>Safety Equipment ok</p>
	<p>Signage ok - NO lifeguard on duty at front desk + posted in pool area</p>
	<p>Hours 5am - 10pm</p>
	<p>chlorine range 5-10 ppm as its a salt water system</p>
	<p>PH - 7.8</p>
	<p>POOL HAS NO physical hazardous</p>
	<p>(2) Drain covers secure on bottom</p>
	<p>Depth markings ok</p>
	<p>NO Diving posted.</p>
	<p>restroom ok</p>
	<p>Pool is posted SATISFACTORY</p>

Signature of Individual Completing Form
Julian Tarkenton

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