ANNUAL FACILITY EVALUATION FORM

To be completed prior to the first meet held at the facility in the swim year.

Facility Name: _____

Competed by: _____ Date: _____

	ACCEPTABLE	NEEDS ATTENTION
SPECIALITY AREAS:		
Are HVAC and building operational equipment rooms functional and inspected?	☐	☐
Are sprinkler system rooms functional and inspected?	☐	☐
Are electrical system rooms functional and inspected?	☐	☐
Are computer router rooms functional and inspected?	☐	☐
Are storage rooms for cleaning equipment and cleaning chemicals inspected and secure?	☐	☐
Are pool equipment treatment rooms inspected and functional?	☐	☐
Are record storage areas and private offices inspected and functional?	☐	☐
FILTER ROOM:		
Is the pool pump functional and inspected?	☐	☐
Are pump strainer baskets cleaned and functional?	☐	☐
Are pipes and valves functional and inspected??	☐	☐
Are pool heaters functional and inspected?	☐	☐
Are Ultra Violet units functional and inspected??	☐	☐
Are automatic chlorinator units inspected and functional?	☐	☐
Are shower and bathroom water heaters functional and inspected?	☐	☐
HVAC:		
Are heating and air conditioning for shower rooms functional and inspected yearly?	☐	☐
Are exterior units bringing in outside air cleaned and inspected annually?	☐	☐
Are back up fuses stocked for all units?	☐	☐
Are fan and blower motors lubricated according to suggested guidelines regularly?	☐	☐
DEHUMIDIFIER:		
Are dehumidifiers cleaned regularly preventing a chlorine smell in the facility?	☐	☐
Are filters, compressors, belts, etc. checked annually?	☐	☐
Are ducts and vents cleaned annually?	☐	☐
LIGHTING:		
Is lighting in working order?	☐	☐

Form is fillable. Save form to computer then complete and save again. If using a Mac, select 'Print' and then 'Save as pdf.)

Submit completed form to: businessoffice@virginiaswimming.org

Rev. 9/3/2024