

WATER CONTAMINATION RESPONSE LOG

Person Conducting Contamination Response						
Supervisor on Duty						
Date (mm/dd/yyyy) of Incident Response						
Time of Incident Response						
Water Feature or Area Contaminated						
Number of People in Water						
Type/Form of Contamination in Water: Fecal Accident (Formed Stool or Diarrhea), Vomit, Blood						
Time that Water Feature was Closed						
Stabilizer Used in Water Feature (Yes/No)						
	Water Quality Measurements					
	Level at Closure	1	2	3	4	Level Prior to Reopening
Free Residual Chlorine (1-4 are measurements spread evenly thru the closure time)						
pH (1-4 are measurements spread evenly thru the closure time)						
Date (mm/dd/yyyy) that Water Feature was Reopened						
Time that Water Feature was Reopened						
Total Contact Time (Time from when disinfectant reached desired level to when disinfectant levels were reduced prior to opening)						

Remediation Procedure(s) Used and Comments/Notes	