# WATER CONTAMINATION RESPONSE LOG

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| **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** |  |