

Capitol Indemnity Corporation

P.O. Box 5900
Madison, WI 53705

SWIMMING POOL QUESTIONNAIRE

- 1. Pool Yes No Lake, River, Pond Yes No
- 2. Pool Dimensions: _____ Length _____ Width
- 3. Are depth markings clearly indicated? Yes No
- 4. What type of surface around pool area?

(i.e: smooth, non-slip, etc.)
- 5. Diving boards? Yes (Not Acceptable) No
- 6. Water slides? Yes (Not Acceptable) No
- 7. Is there fencing surrounding the pool area? Yes Describe _____
 No (Not Acceptable)
- 8. Are "NO RUNNING" signs posted? Yes No
- 9. Please describe the chemical storage

- 10. Do you have a self closing gate to the pool area? Yes No
- 11. Are lifeguards employed? Yes No Are they Red Cross certified? Yes No
Or other certification (please list)

- 12. Are written emergency procedures present?

- 13. Is life saving equipment available? Yes No
- 14. Any additional comments:

