Aquatic Facility Inspection Report

Jackson County Environmental Health
3651 NE Ralph Powell Road Lee's Summit, MO 64064
Phone 816-881-6690 Fax 816-881-1650

☐ Category 1 ☐ Category 2 ☐ Category 3
☐ Seasonal ☐ Yearly

Swimming Pool	☑	Pre-Opening	☑
Wading Pool	☐	Routine	☐
Spray Park	☐	Re-inspection	☐
Hot Tub	☐	Complaint	☐
Spa	☐	Other	☐

Facility Name Trexology

Address 800N W WARD Rd

Phone Number ______

Pool Manager ______

CPO Holder ______

IN=In Compliance OUT=Out of Compliance N/A=Not Applicable N/O=Not Observed

Failure to comply with the regulations shall result in a re-inspection, revocation and/or delays in issuance of your operating permit.

Permit / Supervision	IN	OUT	N/A	N/O
Permit posted	✓			
Licensed operator reachable by phone within 30 minutes	✓			
Licensed Operator valid license/posted	✓			
Qualified Lifeguards (number, chairs, certification)			✓	
Regulatory Authority Access	✓			
Variance/Other______				
Restrooms / Shower Rooms				
Shower facilities (Required for Cat. 1)	✓			
Clean/Good Repair	✓			
Sanitary Supplies Provided	✓			
Other				
Documentation				
Daily Chemical Readings	✓			
Chemicals used	✓			
Incidents (fecal/vomit/blood)				✓
Spa (super-chor/drain weekly)			✓	
Filteration Maintained (backwash/disposal)	✓			
Other				

Water	IN	OUT	N/A	N/O
Chlorine (FAC) 1.2 (pool 1-10/spa 3-10/spray 2-10)	✓			
Bromine______ (pool 2-10, spa 4-10)			✓	
Ph 7.9 (7.2-7.8)	✓			
Alkalinity______ (60-180)				
Spa-Water Temp (<104°F) ______			✓	
Spa (calcium hard. 150-250) ______			✓	
Clarity	✓			
Cleanliness	✓			
Chemical Testing Equipment	✓			
Other				
Signage				
Pool/Spa/Spray Ground Rules	✓			
Max patron load posted	✓			
Max patron load maintained				✓
"No Smoking"				
"NO Diving" (signs as req.)	✓			
No Lifeguard on Duty Signage @ entrance & throughout.	✓			
Other				

Equipment / Equipment Room	IN	OUT	N/A	N/O
Accessible (clean/organized)	✓			
Automatic Disinfection Installed (working/filled/good repair)	✓			
Filtration Maint (good repair)	✓			
Chemical storage (off ground, out of sunlight.)	✓			
Ventilation (pool area & chemical room)	✓			
Flow Meter	✓			
Safety				
General Safety	✓			
Barrier Provided/Adequate	✓			
Self-Close/Self-Latch Door or Gate	✓			
Ring Buoy w/Rope, Shepherds Crook.	✓			
Emergency Phone & Address	✓			
Underwater Lighting	✓			
Depth Markers (deck & wall)	✓			
Point of Transition (5'+)	✓			
Ladders/Ramps/Stairs (Non-slip & handrails, maintained)	✓			
Voluntary Closure Events				✓
VGB Compliance (Main Drain)	✓			
Skimmers	✓			
Spa Timer				✓
Other				

OBSERVATIONS/COMMENTS

- No Smoking Sign Posted in Chemical Room
- ~~[illegible]~~

- Pool is Approved to Open

☐ POOL OPERATOR NOT AVAILABLE -Report was left here: ______

☐ RE-INSPECTION: Scheduled for ______ due to deficiencies noted and/or history of repeat violations

☐ POOL CLOSED: Facilities closed by this office MAY NOT re-open until approval is given.

Inspected By [signature] Received By ______ Date 5/20/25

JACKSON COUNTY, MISSOURI
ENVIRONMENTAL HEALTH

Aquatic Venue Permit

THIS BUSINESS HAS MET THE REQUIREMENTS OF JACKSON COUNTY, MISSOURI IN ACCORDANCE WITH APPLICABLE REGULATIONS. THIS PERMIT IS GRANTED AND VALID FOR ONE YEAR UNLESS SUSPENDED OR REVOKED. PERMIT MUST BE POSTED IN A CONSPICUOUS PLACE.

Permit Name: Trilogy Apartments

Address: 800 NW Ward Rd
Lee's Summit, MO 64086

Venue: AV - Pool

Issued: 04/30/2025

Expires: 04/30/2026

Deb Sees
Health Officer

THIS PERMIT IS NOT TRANSFERABLE.