



# YOUTH RECREATION CAMP INSPECTION REPORT

Drinking Water and Groundwater Bureau  
Water Division



Date Opening: 7-13-08  
Date Closing: 7-27-08  
Date Last Inspected: \_\_\_\_\_

Camp Name: <u>WATERVILLE VALLEY SUMMER CAMP</u>	Inspected: <u>7</u> / <u>23</u> / <u>08</u> Month / Day / Year
Town: <u>WATERVILLE VALLEY</u> Phone: <u>978-756-0779</u>	
Director: <u>GEORGE VOZPOLAS</u>	License #: <u>171</u> Date Issued: <u>5-28-08</u>
Owner: <u>SPORTS FOR A LIFETIME ACADEMY LLC</u>	General Rating: Excellent (✓) Good ( ) Fair ( ) Poor ( )
Address: <u>10 SNOWS BROOK</u> Phone: <u>SAME</u>	Pre-Season Needed: ( )
<u>WATERVILLE VALLEY NH</u>	Reason: <u>EXCELLENT SMALL CAMP. SUPER PROGRAMS FACILITY AND STAFF.</u>
Residence Camp: ( ) Day Camp: ( )	

WATER SUPPLY		*
Source: Bedrock Well ( ) Dug Well ( )	Spring ( ) Public Water System (✓)	
Other: _____		
EPA ID #: <u>TOWN WATER</u>		
Water Survey Date: _____		
Location of Well(s): _____		
Map Available: Yes ( ) No ( )		
Analysis: Date: _____ Results: _____	State Lab: _____ Other: _____	
Chlorination: ( ) Adequate Records: ( )		
Bubblers: ( ) Coolers: ( )		
Secondary Source: <u>NO</u>		
Use: _____		
Comments: _____		

WATER SAFETY		*
LG (✓) WSI ( ) Other ( )	Safety Equipment (✓) 1st Aid Kit (✓)	
Pool: Fenced ( ) Chlorination ( )	Depths marked ( ) Records ( )	
Shower ( )		
Swim Area: _____		
Comments: <u>POOLS ARE USED WITH STAFF LIFE GUARDS. ALL WATER ACTIVITIES ARE SUPERVISED BY LIFE GUARDS.</u>		

BUILDINGS/SLEEPING QUARTERS		*
Cabins ( ) Tents ( ) Other ( ) <u>COTTAGES</u>		
2nd Floor Sleeping (✓) Proper egress (✓)		
Screened (✓) Smoke Det./Batt. ( ) Elec. (✓)		
Extinguishers: Tagged (✓) Mounted (✓) Sign (✓)		
Showers: Floor sealed (✓) Sanitized (✓)		
Other: _____		
Comments: <u>EXCELLENT ACCOMMODATIONS.</u>		

FOOD SANITATION		*
Kitchen/Dining Hall: Floor (✓) Screens ( )	Cleanliness (✓) Other ( )	
Refrigeration: Thermometers (✓)		
Coolers: Walk-in (✓) Other: _____		
Freezers: Walk-in (✓) Other: _____		
Dishwashing: Mechanical (✓) Rinse Temp (✓)		
Hand: Low Temp ( ) Sanitizing ( )		
Food Storage: Location: Clean (✓) Dry (✓)		
Suppression System: Yes (✓) No ( )		
Dumpster: Yes (✓) No ( )		
Comments: <u>FOOD PROVIDED BY SELECT RESTAURANT. VERY PROFESSIONAL</u>		

SEWAGE DISPOSAL		*
Septic Tank ( ) Leachfield ( ) Dry Well ( )		
Lagoon ( ) Other: _____		
Toilets: Flush (✓) Latrines (✓)	Portajohns ( )	
Proper Maintenance: (✓)		
Equipment/Supplies: (✓)		
Comments: _____		

MEDICAL SAFETY		*
RE ( ) ER ( ) EMT ( )		
RN (✓) LPN ( ) ARNP ( )		
FR ( ) Doctor ( ) Other _____		
Hospital Facility: <u>Plymouth / Sports</u>		
Certifications on file (✓) Infirmary (✓)		
Health guidelines (✓) Med Forms (✓)		
Contract with med. ser. (✓) Log Book (✓)		
First Aid Kits (✓) Stretcher (✓)		
Pre camp Physicals (✓) Telephone (✓)		
Staff: <u>8</u> Campers: <u>20</u>		
Comments: <u>EXCELLENT MEDICAL COVERAGE</u>		

Inspector Name: <u>BRIAN D. WILSON</u>
Phone #: <u>271-2542</u>
* Indicates Unsatisfactory Condition



# YOUTH RECREATION CAMP INSPECTION REPORT

**Drinking Water and Groundwater Bureau  
Water Division**



Date Opening: 7/12/09  
Date Closing: 7/26/09  
Date Last Inspected: 7/23/08

Camp Name: Waterville Valley Summer Camp  
Town: Waterville Valley Phone: 978-688-5246

Director: George Vozeolas  
Owner: Sports for a Lifetime Academy  
Address: 46 Birmingham Parkway Phone: 800-892-4242  
Boston, MA 02135-

Residence Camp:  Day Camp:

Inspected: 7 / 16 / 09  
Month Day Year

License #: 171 Date Issued: \_\_\_\_\_  
General Rating: Excellent  Good  Fair  Poor   
Pre-Season Needed:  Reason: NH Magazine voted 2009 best Family Summer Camp. Excellent facility! Well staffed!

### WATER SUPPLY

Source: Bedrock Well  Dug Well   
Spring  Public Water System   
Other: Town Water

EPA ID #: 2441010

Water Survey Date: \_\_\_\_\_  
Location of Well(s): \_\_\_\_\_

Map Available: Yes  No

Analysis: Date: \_\_\_\_\_ Results: \_\_\_\_\_  
State Lab: \_\_\_\_\_ Other: \_\_\_\_\_

Chlorination:  Adequate Records:   
Bubblers:  Coolers:   
Secondary Source: \_\_\_\_\_  
Use: \_\_\_\_\_

Comments: \_\_\_\_\_

### WATER SAFETY

LG  WSI  Other   
Safety Equipment  1st Aid Kit

Pool: Fenced  Chlorination   
Depths marked  Records   
Shower

Swim Area: \_\_\_\_\_

Comments: Staff Lifeguards supervise activities.

### BUILDINGS/SLEEPING QUARTERS

Cabins  Tents  Other  Condos

2nd Floor Sleeping  Proper egress   
Screened  Smoke Det./Batt.  Elec.   
Extinguishers: Tagged  Mounted  Sign   
Showers: Floor sealed  Sanitized   
Other: \_\_\_\_\_

Comments: Nice accommodations. Sleepers should be 6 feet from head to head.

### FOOD SANITATION

Kitchen/Dining Hall: Floor  Screens   
Cleanliness  Other

Refrigeration: Thermometers   
Coolers: Walk-in  Other:   
Freezers: Walk-in  Other:

Dishwashing: Mechanical  Rinse Temp   
Hand: Low Temp  Sanitizing

Food Storage: Location: Clean  Dry   
Suppression System: Yes  No   
Dumpster: Yes  No

Comments: Food provided by resort. Great experience.

### SEWAGE DISPOSAL

Septic Tank  Leachfield  Dry Well   
Lagoon  Other: \_\_\_\_\_

Toilets: Flush  Latrines   
Portajohns

Proper Maintenance:   
Equipment/Supplies:

Comments: \_\_\_\_\_

### MEDICAL SAFETY

RE  ER  EMT   
RN  LPN  ARNP   
FR  Doctor  Other \_\_\_\_\_

Hospital Facility: Spaulds / Plymouth Peds.

Certifications on file  Infirmary   
Health guidelines  Med Forms   
Contract with med. ser.  Log Book   
First Aid Kits  Stretcher   
Pre camp Physicals  Telephone

Staff: 10 Campers: 35

Comments: 3/4 counselors are CPR/First Aid. RN on site is a plus!

Inspector Name: Derek Pagnano  
Phone #: 271-2542

\* Indicates Unsatisfactory Condition