

Spa Disinfection Monthly Record

Facility Name: _____ Test Location: _____ Month: _____ Year: _____

Date	Time	Tester initials	Free Cl ₂	Total Cl ₂	pH	Cyanuric Acid	Bromine
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
31							

