

**STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT  
PUBLIC POOL AND BATHING PLACE  
INSPECTION REPORT**



1 of 2

**Facility Information**

**RESULT: Satisfactory**

Permit Number: 13-60-08170  
Name of Facility: Surfside Palms Condo Association - Spa  
Address: 8888 Collins Avenue  
City, Zip: Surfside 33154

**Correct By: Next Inspection  
Re-Inspection Date: None**

Type: Spa-Type Pools  
Owner: Surfside Palms Condo Association  
Person In Charge: Ivete Pasini Phone: 305-342-0091  
PIC Email: ivete.pasini@gmail.com  
Pool Operator: XFP Service LLC Phone: (305) 216-3991

**Inspection Information**

Purpose: Routine  
Inspection Date: 1/13/2026

Begin Time: 10:18 AM  
End Time: 10:27 AM

**Additional Information**

22. Free Chlorine ..... 2.0	VOLUME ..... 750
23. pH ..... 7.0	POOL LOAD ..... 5
24. Chlor. Stabilizer ..... 0	FLOW RATE ..... 50
33. Flowmeter ..... 40	NIGHT SWIM ..... Yes
34. Thermometer ..... 103.1	FILTER TYPE ..... SP

*Items checked are not in compliance with Chapter 386 or 514, Florida Statutes, or Chapter 64E-9 or 64E-10, Florida Administrative Code. These violations must be corrected by the date indicated to avoid closure, administrative fines, or other legal actions. Florida Building Code (FBC) violations are reported to the local building official, and depending upon risk severity, the Department of Health may close the pool or rescind the operating permit.*

**Violation Markings**

POOL AREA 1. Water Clarity/Algae Control X 2. Deck/Walkways 3. Tile/Pool Finish 4. Depth Markers-FBC 5. Handrail/Ladder-FBC 6. Step Markings-FBC 7. Suction Outlets-514.0315(1) 8. Gutter Grates/Skimmer-FBC 9. Lighting 10. No Dive Markings-FBC 11. Diving Board-FBC 12. Pool Cover 13. Pool Side Shower-FBC POOL SAFETY 14. Life Hook(s) w/Pole 15. Life Ring(s) w/Rope 16. Safety Line	17. Rules Posted 18. Certification SANITARY FACILITIES 19. Supplies 64E-10, FAC 20. Clean 64E-10, FAC WATER QUALITY 21. Approved Test Kit 22. Free Chlor./Brom. 23. pH 24. Chlor. Stabilizer 25. Spa Requirements-ORP EQUIPMENT ROOM 26. Wading Pool-Quick Dump 27. Water Level/Control 28. Disinfection Feeder/Generator 29. pH Feeder 30. Chem. Container Label-FBC 31. Filter / Pump	32. Vacuum Cleaner-FBC 33. Flowmeter 34. Thermometer 35. Pressure/Vacuum Gauge 36. Equip. Room 37. Cross Connection 38. Gas Chlorine Eq.-FBC 39. Waste Water - FBC 40. D.E. Separator-FBC 41. Other Equipment 42. Equip. Change-FBC 43. Approved Chemicals 44. Maintenance Log 45. Inspection Posted 46. Safety-514.0315(2) 47. Fences/Gates- FBC 48. Other 49. Other
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*NOTE: It is unlawful to modify a public pool or its equipment without prior approval from the local building department and submitting an application to DOH.*

Inspector Signature:

Client Signature:

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT  
PUBLIC POOL AND BATHING PLACE  
INSPECTION REPORT



2 of 2

### General Comments

Inspection Result: Satisfactory

Violation found at the time of the inspection corrected prior to finalizing report.

ORP - 755 mV

Email Address(es): ivete.pasini@gmail.com

DOH Web Page For Pools: <http://www.floridahealth.gov/environmental-health/swimming-pools/index.html>

### Violations Comments

Violation #2. Deck/Walkways  
\*\*\*CORRECTED PRIOR TO FINALIZING REPORT\*\*\*  
Repair uneven wet deck. Observed a portion of the wet deck uneven at the north side of the spa.  
CODE REFERENCE: Deck/Walkway 64E-9.004(3); FBC 454.1.3.1.3; 454.1.7.7; 454.1.8.5. Pool deck areas shall be free from sediment, debris, dirt, standing water, and algae; and refinished as needed to maintain safety/sanitation. Wet decks shall be unobstructed.

Inspection Conducted By: Kaitlyn Hamilton (1760)  
Inspector Contact Number: Work: (786) 654-6587 ex.  
Print Client Name:  
Date: 1/13/2026

Inspector Signature:

Handwritten signature of Kaitlyn Hamilton.

Client Signature:

Handwritten signature of the client.

**STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT  
PUBLIC POOL AND BATHING PLACE  
INSPECTION REPORT**



1 of 2

**Facility Information**

**RESULT: Satisfactory**

Permit Number: 13-60-08171  
Name of Facility: Surfside Palms Condo Association  
Address: 8888 Collins Avenue  
City, Zip: Surfside 33154

**Correct By: None  
Re-Inspection Date: None**

Type: Public Pool <= 25000 Gallons  
Owner: Surfside Palms Condo Association  
Person In Charge: Ivete Pasini Phone: 305-342-0091  
PIC Email: ivete.pasini@gmail.com  
Pool Operator: XFP Service LLC Phone: (305) 216-3991

**Inspection Information**

Purpose: Routine  
Inspection Date: 1/13/2026

Begin Time: 10:32 AM  
End Time: 10:45 AM

**Additional Information**

22. Free Chlorine .....	5.0	VOLUME .....	15000
23. pH .....	7.2	POOL LOAD .....	10
24. Chlor. Stabilizer .....	0	FLOW RATE .....	50
33. Flowmeter .....	40	NIGHT SWIM .....	
34. Thermometer .....		FILTER TYPE .....	SP

*Items checked are not in compliance with Chapter 386 or 514, Florida Statutes, or Chapter 64E-9 or 64E-10, Florida Administrative Code. These violations must be corrected by the date indicated to avoid closure, administrative fines, or other legal actions. Florida Building Code (FBC) violations are reported to the local building official, and depending upon risk severity, the Department of Health may close the pool or rescind the operating permit.*

**Violation Markings**

<b>POOL AREA</b> 1. Water Clarity/Algae Control 2. Deck/Walkways 3. Tile/Pool Finish 4. Depth Markers-FBC 5. Handrail/Ladder-FBC 6. Step Markings-FBC 7. Suction Outlets-514.0315(1) 8. Gutter Grates/Skimmer-FBC 9. Lighting 10. No Dive Markings-FBC 11. Diving Board-FBC 12. Pool Cover 13. Pool Side Shower-FBC <b>POOL SAFETY</b> 14. Life Hook(s) w/Pole 15. Life Ring(s) w/Rope 16. Safety Line	17. Rules Posted 18. Certification <b>SANITARY FACILITIES</b> 19. Supplies 64E-10, FAC 20. Clean 64E-10, FAC <b>WATER QUALITY</b> 21. Approved Test Kit 22. Free Chlor./Brom. 23. pH 24. Chlor. Stabilizer 25. Spa Requirements-ORP <b>EQUIPMENT ROOM</b> 26. Wading Pool-Quick Dump 27. Water Level/Control 28. Disinfection Feeder/Generator 29. pH Feeder 30. Chem. Container Label-FBC 31. Filter / Pump	32. Vacuum Cleaner-FBC 33. Flowmeter 34. Thermometer 35. Pressure/Vacuum Gauge 36. Equip. Room 37. Cross Connection 38. Gas Chlorine Eq.-FBC 39. Waste Water - FBC 40. D.E. Separator-FBC 41. Other Equipment 42. Equip. Change-FBC 43. Approved Chemicals 44. Maintenance Log 45. Inspection Posted 46. Safety-514.0315(2) 47. Fences/Gates- FBC 48. Other 49. Other
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Inspector Signature:

Client Signature:

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DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT  
PUBLIC POOL AND BATHING PLACE  
INSPECTION REPORT



2 of 2

**General Comments**

Inspection Result: Satisfactory  
No violations found onsite at the time of the inspection.  
Email Address(es): ivete.pasini@gmail.com  
DOH Web Page For Pools: <http://www.floridahealth.gov/environmental-health/swimming-pools/index.html>

**Violations Comments**

No Violation Comments Available

Inspection Conducted By: Kaitlyn Hamilton (1760)  
Inspector Contact Number: Work: (786) 654-6587 ex.  
Print Client Name:  
Date: 1/13/2026

Inspector Signature:

Handwritten signature of the inspector, appearing to be "Kaitlyn Hamilton".

Client Signature:

Handwritten signature of the client, appearing to be "And: [unclear]".