Campgro OAC 3701-26  Health District  Name of Campground  ACOUND Owner/Operator Patt Hand Licensed Capacity	n Marke Mc	pround Claman	Address of Campground  1301 TW  Address of Owner/Operator  License No.	DMQS ed to correct	Rd. New Paris Own	Recreation Camp  Recreational Vehicle Park  Combined Park-Camp  Temporary Campground  paground E-mail  phone No.  QU- QQO  low.
Plan Approval		Licensing Camp		Camp Managem	ent	
	Campsite		Water Systems		Sewerage System	
	Dump Stations		Gray Water Systems		Hygiene Faciliti Electrical	ies
Solid Waste Safety Electrical						
Item	Description of violation					
4II2 Each site must have a number readable from the						
Campground road - sites 80, 82, 84 do not						
have numbers.						
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						A AND APPEAR OF THE STATE OF TH
			Market State of the Control of the C	u_n_u	Marie Vincentino	
Reinspection?	Reinspection Date					
Based on an inspection this day, the above marked violations must be corrected by the time(s) specified in this report.  Failure to comply with any specified time limit(s) may result in revocation or suspension of your Campground license.						
Operator Santarian Date 5/20/16						

HEA 5332 (Rev. 4/16) Distribution: White - Operator