Ohio Department of Health						Recreation Camp		
Campground Inspection Report						Recreational Vehicle Park		
OAC 3701-26						Combined Park-Camp		
Health District	A							
Name of Campground  Address of Campground  Address of Campground  Address of Campground  Address of Campground						Temporary Campground  Campground E-mail		
Arrow	head Camp	29/00	und 1361 That	ngs Ko	d. Pans			
Owner/Operator	Ann Mane	Mc.l	Address of Owner/Operato	ne.		Owner E-mail		
Licensed Capacity			License No.			Teleghone No. 1944-4203		
101	rity of eactions 3720 M1 to 3	720 11 of	the Revised Code, you are direc	tad to correct	the violetions indicat		200	
Onder the autho	Plan Approval	7/29.11 01		led to correct			7	
	Campsite		Licensing Water Systems		Camp Mar		1	
	Dump Stations		Gray Water Systems		Sewerage Systems  Hygiene Facilities			
	Solid Waste		Safety		Electr			
Item		Description of violation						
(4112	Each site must have a number readable							
	from the campanound road-sites 80,82,4							
	811 00	61	· · · · · · · · · · · · · · · · · · ·		rs	,		
84 do not have numbers.						1,,,,,,		
(4Ld) The hose used for flu				15hing	114 C	CIND		
	Station	Pu	d that S	nale	not	exceed	'The	
length necessary to reach the entire						tive pad		
			$\mathcal{J}$		•		/	
				·				
				1000				
	ę.							
Reinspection?	Reinspection Date							
Yes N	o							
Based on an insp Failure to comp	ection this day, the above may be with any specified time li	arked viola mit(s) may	ations must be corrected by the tim y result in revocation or suspension	e(s) specified of your Camp	in this report. pground license.			

Operator

Date 08-16