Campground Inspection Report OAC 3701-26 Health District
Health District Down County Address of Campground Temporary Campground C
Temporary Campground Name of Campground
Name of Campground Address of Campground Address of Campground Address of Owner/Operator Owner E-mail Licensed Capacity License No. Telephone No. Address of Owner/Operator Owner E-mail
Owner/Operator Address of Owner/Operator Licensed Capacity License No. Telephone No. Camp Management Camp Management Camp Stations Dump Stations Gray Water Systems Gray Water Systems Hygiene Facilities Solid Waste Description of violation Owner E-mail Owner E-mail Camp Management Camp Management Sewerage Systems Hygiene Facilities Electrical
Licensed Capacity License No. Telephone No. Classical Capacity Under the authority of sections 3729.01 to 3729.11 of the Revised Code, you are directed to correct the violations indicated below. Plan Approval Licensing Camp Management Campsite Water Systems Dump Stations Gray Water Systems Hygiene Facilities Solid Waste Safety Description of violation
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Deignostica 2 Deignostica Detail
Reinspection? Reinspection Date
Yes No
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 Sanitarian Date Operator Date Opera
1/21/1/20
HEA 5332 (Rev. 4/16) Distribution: White - Operator Canary - Health Department