Ohio Department of Health						Recreation	Camp	
Campground Inspection Report						Research I	Recreational Vehicle Park	
OAC 3701-26								
Health District  Combined Park-Camp								
Name of C	Campground	2 COUNTY	Cod de	Address of Campground		Temporary  Campground E-mai	Campground	
Barker COTHS Souther 8549 Athrough Rd.							1	
Owner/Op	erator	Tiere	Owner E-mail					
Licensed (	Capacity	103		License No.		Telephone No.	0 - 0 1 10	
						44-5	x2-2610	
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		
· <u> </u>	Campsite  Dump Stations			Water Systems  Gray Water Systems		Sewerage Systems	4	
	,	Solid Waste	3.1	Safety		Hygiene Facilities		
	<u> </u>	Solid Waste		Safety		Electrical		
Item	Item Description of violation							
Satistation at Import in spection)								
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					THE CONTRACT OF THE CONTRACT O			
		1000						
Reinspect	tion?	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								
	Den	- 5		TVINAMILL	CC(0)	RS 491 HS 8/1	13000	