

CAMP INSPECTION REPORT TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH

	LISHMENT Ward Center Travel Camp					DATE 07/14/21	SCORE	
LOCAT 945 E E	TION Baddour Parkway	STAFF Jennifer Udulu	ıtch			EST. NO. 650070410	_94_/100)
CITY, S	TATE, ZIP n TN 37087	TYPE Travel Camp 2	251+			PURPOSE Routine		
PERMI WILSO	TTEE N COUNTY GOVERNMENT					FOLLOW-UP () YES REQUIRED NO	NO. OF CAMPERS PER D	AY
117 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	WATER SUPPLY, ICE			00		SAFETY		
* 1. 2.	Source, adequate Storage; clean, properly handled		5		22.	Fire extinguishers, smoke detection number maintained	ors, fire alarms; installed,	5
	DRINKING FACILITIES				23.	Exits marked, lighted, unobstruc	ted, evacuation plans	5
3,	Approved, adequate, adjusted, repair	, clean	2		24.	Curtains, draperies, fire resistant		2
	SEWAGE DISPOSAL / PLUM	BING			25.	Visible electrical hazards		5
* 4.	Approved, functioning properly		5		26.	Hazardous chemicals, including and stored properly	inflammable; marked	5
* 5.	Backflow		5		27.	Animals under control		2
6.	Approved sanitary station, provided Approved sewer connections	as required /	2		28.	Storage areas maintained, flamm stored	able equipment properly	4.
	SOLID WASTE					NATURAL SWIMMING A	REA	
7.	Containers approved, adequate		2		29.	Depth, boundaries marked / lifes provided	VIII VEGGEGE DESCO	5
8.	Good repair, clean		2		30.	Underwater hazards, vegetative a		5
9.	Storage area and premises clean		2	_		RESTROOMS / BATHING FA	ACILITIES / FIXTURES	
10	Disposal frequency adequate		1		31.	Number, designed, installed		2
[11.]	Site well drained		2	-	32.	Lighting adequate		
	SPACES, STRUCTURES, BEI	CONTRACTOR OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.			33.	Floor, walls ceilings and attachm	ents; clean, good repair	2
12.	Structures, beds, and individual units	- Annual Control of the Control of t	1		34	Toilet tissue provide	************	2
13.	Floor space adequate, proper ventilat		2		35.	Waste receptacle clean, covered,		12
14.	Floors, walls, ceilings / clean, good r				2.0	HEALTH, DISEASE, REG		1.0
15.	Personal storage provided, clean, goo	od repair	1	*	36.	Telephone available, first aid kit		5
16.	Bedding clean, good repair		2		37.	Occupant register maintained, pr	eserved	1
17.	Mattress cover provided		2		12280	ADMINISTRATION		1 00
18.	Lighting / fixtures adequate		2	**	38.	Current permit posted		0
19.	Guest room doors, self-closing		1					
20.	Bunk beds, equipped usage		2					

Travel camp spaces identified

Failure to correct any violations of critical items within ten (10) days may result in suspension of your camp permit. Repeated violation of identical critical item category may result in revocation of your camp permit. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the camp permit in a conspicuous manner. You have the right to appeal any citation by filing a written request to the Director within ten (10) days of this report. You also have the right to request a hearing regarding this report by filing a written request with the Commissioner within ten (10) days of the date of this report. T.C.A. Sections 62-110-103, 68-110-106 and 4-5-320.

Signature of Person in Charge	Du Ban	Ву	By July Will		
Date of Signature	07/14/21	Time in/out	11:05 AM	11:48 AM	

^{*} Identifies critical items

^{**} Identifies misdemeanor violations

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Establishment Information Establishment Name: James Ward Center Travel Camp				
Establishment Number: 650070410				
Observed Violations				
Total # 3				
11: Water standing in camp sites21: Birthing barn site spaces not identified35: Trash cans are not fire resistant				

Additional Comments		

^{***}See page at the end of this document for any violations that could not be displayed in this space.

^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: James Ward Center Travel Camp					
Establishment Number: 650070410					
Observed Violations (cont'd					
dditional Comments (cont	'd)				
ource Type: Water	Source: City				
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Establishment Information