

CAMP INSPECTION REPORT TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH

ESTABLISHMENT Bledsoe Creek State Park							DATE 12/21/21 SCOR		
		100,000	AFF n Hewitt				EST. NO. 650029899	100 /100)
	ΓΥ, s	The 07000	PE vel Camp 2	6-75			PURPOSE Routine		
PE	RMI	TTEE					FOLLOW- UP () YES REQUIRED NO	NO. OF CAMPERS PER D.	AY
		WATER SUPPLY, ICE					SAFETY		611
*	1.	I. Source, adequate		5		22.	Fire extinguishers, smoke detecto number maintained	rs, fire alarms; installed,	5
		DRINKING FACILITIES				23.	Exits marked, lighted, unobstructed, evacuation plans		
	3.	Approved, adequate, adjusted, repair, clean		2		24.	Curtains, draperies, fire resistant		
SEWAGE DISPOSAL / PLUMBING			-		25.	Curtains, draperies, fire resistant 2 Visible electrical hazards 5			
*	4.	Approved, functioning properly		5		26.	Hazardous chemicals, including inflammable; marked and stored properly		5
	5.	5. Backflow		5		27.	Animals under control		
Approved sanitary station, provided as required / Approved sewer connections			2		28.	Storage areas maintained, flammable equipment properly stored 4			
		SOLID WASTE					NATURAL SWIMMING A	REA	
	7.	. Containers approved, adequate		2		29.	Depth, boundaries marked / lifesaving equipment provided		
	Good repair, clean		2		30.	Underwater hazards, vegetative g	rowth or pollution	5	
	Storage area and premises clean			2		- V	RESTROOMS / BATHING FACILITIES / FIXTURES		
Disposal frequency adequate			1		31.	Number, designed, installed 2			
11. Site well drained			2		32.			2	
SPACES, STRUCTURES, BEDDING					33.	Floor, walls ceilings and attachme	ents; clean, good repair	2	
	12.	Structures, beds, and individual units prope	rly spaced	1		34.	Toilet tissue provide		1
	13.	Floor space adequate, proper ventilation		2		35.	Waste receptacle clean, covered, fire resistant		2
	14.	Floors, walls, ceilings / clean, good repair	Floors, walls, ceilings / clean, good repair 2				HEALTH, DISEASE, REGISTRATION		
	15.	Personal storage provided, clean, good repa	ir	1	*	36.	Telephone available, first aid kit a	available	5
	16.	Bedding clean, good repair		2		37.	Occupant register maintained, pre	eserved	1

17.

18.

19.

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21.

Mattress cover provided

Lighting / fixtures adequate

Bunk beds, equipped usage

Guest room doors, self-closing

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.

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Signature of	
Person in Charge	
Date of Signature _	12/21/21

gon the

ADMINISTRATION

Current permit posted

EHS

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^{*} Identifies critical items

^{**} Identifies misdemeanor violations

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Establishment Information



stablishment Number: 650029899		
and the photo with the control of th		
bserved Violations		
otal # 0		
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See page at the end of this document for any violat	ions that could not be displayed in this spa	ce.
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^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Source: City			
	Source: City	Source: City	Source: City

Establishment Information