

CAMP INSPECTION REPORT TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH

	BLISHMENT Rivers Campground					DATE 04/01/24	SCORE	
1,000,000,000	ATION Music Valley Dr.	STAFF Ngan Nguyen				EST. NO. 650069356	100/100)
CITY	, STATE, ZIP ville TN 37214	TYPE Travel Camp 7	76-150			PURPOSE Routine		
PERM	INC.					FOLLOW- UP () YES REQUIRED NO	NO. OF CAMPERS PER D	AY
	WATER SUPPLY, ICE					SAFETY		
* 1.	. Source, adequate		5		22.	Fire extinguishers, smoke detect number maintained	ors, fire alarms; installed,	5
	DRINKING FACILITIES				23.	Exits marked, lighted, unobstruc	ted, evacuation plans	5
3.	. Approved, adequate, adjusted, repair, of	lean	2		24.	Curtains, draperies, fire resistant		2
_	SEWAGE DISPOSAL / PLUMB	ING			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 as Approved sewer connections	required /	2	+	28.	Storage areas maintained, flamm stored	nable equipment properly	4
	SOLID WASTE			0		NATURAL SWIMMING A	REA	
7.	. Containers approved, adequate		2	. •	29.	Depth, boundaries marked / lifes provided	aving equipment	5
8.	. Good repair, clean		2		30.	Underwater hazards, vegetative	growth or pollution	5
9.			2		- 1	RESTROOMS / BATHING FA		,
10.			1		31.	Number, designed, installed		2
11.			2		32.	Lighting adequate		2
	SPACES, STRUCTURES, BEDE	CONTRACTOR OF STREET,	V		33.	Floor, walls ceilings and attachn	nents; clean, good repair	2
12.	 Structures, beds, and individual units p 	roperly spaced	1		34.	Toilet tissue provide		1

12.	Structures, beds, and individual units properly spaced	1
13.	Floor space adequate, proper ventilation	2
14.	Floors, walls, ceilings / clean, good repair	2
15.	Personal storage provided, clean, good repair	1
16.	Bedding clean, good repair	2
17.	Mattress cover provided	2
18.	Lighting / fixtures adequate	2
19.	Guest room doors, self-closing	1
20.	Bunk beds, equipped usage	2

Waste receptacle clean, covered, fire resistant

HEALTH, DISEASE, REGISTRATION

* 36.	Telephone available, first aid kit available	5
37.	Occupant register maintained, preserved	1
	A DAMINICAD ATTION	

ADMINISTRATION

 38.	Current permit posted	0

 Identifies critical iter 	The C

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	Le Da Frence	Ву	Thy	Thym	EHS
Date of Signature	04/01/24	Time in/out	02:00 PM	03:20 PM	

^{**} Identifies misdemeanor violations

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Establishment Information



Establishment Name: Two Rivers Camp	ground	
Establishment Number: 650069356		
Observed Violations		
Total # 0		
"See page at the end of this document for a	ny violations that could not be displayed in the	his space.
Additional Comments		

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

Establishment Information	
Establishment Name: Two Rivers Campground	
Establishment Number: 650069356	
Observed Violations (cont'd)	
Additional Comments (cont'd)	