

CAMP INSPECTION REPORT TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH

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properly 4
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2
2
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1

	13.	Floor space adequate, proper ventilation	2
Ī	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
Ī	19.	Guest room doors, self-closing	1
	20.	Bunk beds, equipped usage	2

**	ADMINISTRATION		
	38.	Current permit posted	0

Waste receptacle clean, covered, fire resistant

Telephone available, first aid kit available Occupant register maintained, preserved

HEALTH, DISEASE, REGISTRATION

2

EHS

01:45 PM

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.

2

36.

Signature of Person in Charge		Ву	My	Plyny
Date of Signature	04/04/24	Time in/out	<i>V</i> 01:20 PM	0 0

Identifies critical items

^{**} Identifies misdemeanor violations

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Establishment Information



stablishment Number: 650311809		
bserved Violations		
otal # 0		
See page at the end of this document for any violat	tions that could not be displayed in this	space
dditional Comments		

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

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Establishment Information