

Regulated Object Inspection Report

	Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m), Stats.]														
Owner and/or Billing Contact Info:			Object Location:			Investigat	Investigation ID: Regulated Object ID								
			Site: Address:				ected:	Inspectio Fee:	n Specia Fee:	i I	PTO Fee:				
Address:			City:					None	\$		None				
City: State/Zip:			State/Zip: , County:			Issue PTO PTO on hold Initial Special Re-inspection									
				On Property:					.1011						
Regulated Object Information				Attributes											
Family:Type:Last Investigation:Cycle: 3 yrPTO Expiration:Next:			Refrigerant: R- Safety Group: A1 Manufacturer: Manufacturer ID: Year Build: Capacity Tons:			Max Working Pressure Allow: Safety Valve: Set: Capacity Pressure Test Done: Yes Test PSI: Sum Code: Refrigerant – Lbs:									
Inspector Name: E-mail:				Employed By:			Onsite Contact:								
Wisconsin Credential:															
I certify this is a true and accurate report of my inspection.							Contact's Phone:								
Signature:				Phone:	FAX:	Contact E-mail Address									
REMAR	RKS:														
ļ															
Item No.	Code Section			all be corrected by COMPLIANCE DATE: * s report for important compliance information regarding this ORDER											
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			n inspection co	Department Order This DEPARTMENT ORDER is issued as a result of an inspection conducted for the Regulated Object referenced on this report. You are hereby ordered to have the listed violation(s) corrected to conform to the indicated provisions of the Wisconsin Administrative code and/or statutes. These violations must be corrected by the											

This **DEPARTMENT ORDER** is issued as a result of an inspection conducted for the Regulated Object referenced on this report. You are hereby ordered to have the listed violation(s) corrected to conform to the indicated provisions of the Wisconsin Administrative code and/or statutes. These violations must be corrected by the Compliance Date noted, and upon correction of the violations, the inspector who signed this report must be notified in writing. If you fail to comply, this order is enforceable in circuit court pursuant to s.101.02 (13), Stats., with forfeitures ranging from \$10 to \$100 per day for each violation. In addition, the Department may attach a notice of violation to the deed for the property on which the violations occur. If you have questions regarding this matter, please feel free to contact the inspector at the number provided on this report.

Department Order

This **DEPARTMENT ORDER** is issued as a result of an inspection conducted for the Regulated Object referenced on the front of this report. You are hereby ordered to have the listed violation(s) corrected to conform to the indicated provisions of the Wisconsin Administrative code and/or statutes. <u>These violations must be corrected by the</u> <u>Compliance Date noted</u>, and upon correction of the violations, the inspector who signed this report must be notified in writing. If you fail to comply, this order is enforceable in circuit court pursuant to s.101.02 (13), Stats, with forfeitures ranging from \$10 to \$100 per day for each violation. In addition, the Department may attach a notice of violation to the deed for the property on which the violations occur. If you have questions regarding this matter, please feel free to contact the inspector at the number provided on the front of this report.

*The owner or user shall be responsible for obtaining and maintaining a valid permit to operate on their Items. Operating an Item without a current permit to operate/amusement ride sticker is a violation of the administrative rules.