DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES DIVISION OF ENVIRONMENTAL HEALTH TEMPORARY WORKFORCE HOUSING INSPECTION REPORT

	REA	SON		ESTABLISHMENT NAME:	
Primary	yth	Follow-up	OI. II. 3039	SM construction #147	
Secondary	-11	Complaint		OWNER / OPERATOR:	
Tertiary		Other (Specify)	12:00 pm	5m construction	
GRADE & RAT	ING:	SANITARY PERMIT	VO: TIME OUT:	LOCATION:	
O/A		350000020	12:40 PM	#147 Road I riga cubdivision Dededo Guam	7.7

Based on the inspection today, the items listed below identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in further regulatory actions. If seeking to appeal the result of this inspection, a written request for a hearing be submitted to the Director before the indicated correction date.

ITEM NO.	REMARKS	DEMERIT	CORRECT BY DATE
	A regular inspection was conducted today previous inspection dated		
	10:05:2021 resulted in a grade trating of 0/A. The following were observed'		
	ND violations were observed.		
	"A" Placard No. 03197 was removed.		
	"A" Flacard No. 03896 Was issued and posted.		
	Mext inspection thase. Secondary 1st		
	Curvent morters' dormitory expiration: 04.30.2021		
	Discussed this report with person-in-charge (PIC).		
		#1	
		1 1	

I am the responsible party of the establishment, have read and understand the above violation(s), and am aware of the corrective measures that shall be taken.

*When any of the following items are	RECEIVED BY (Name and Title)	SIGNATURE:	DEH USE ONLY					
cited above, they shall be corrected	PRINT: TONY MYNAMI	719						
within ten days of this inspection: (15);	Den Official (name and fine)							
1(16): (19): (20): (22): (30): (32): (36):1		= 15,						
and (38)	PRINT: Jodi Tumaneng,							
REV: 05/29/18 WHITE COPY - DEH OFFICE YELLOW COPY - EST BLISHMENT								