

Facility Code: **49-0488** Facility Name: **Sunset on Seneca** Address: **8449 Lower Lake Rd** Operator's Name: **William Shangraw**
 Number of Sites: [] Operation Name: **Sunset on Seneca Campsites** Time Began: **2:00** Time End: **3:00**

Office Code: **49** Operation ID: **308167** Month: **7** Day: **21** Year: **15** HCS ID: **MGB49** Time spent conducting service: [] [] [] []
 LHD/HIN NYSDOH

Service Type: INSPECTION REINSPECTION PRE-OPERATIONAL COMPLAINT FIELD VISIT INCIDENT ILLNESS
 Number of Red Violations Found: [] Total Red Violations Not Corrected: [] Number of Blue Violations Found: [] Reinspection Required: Yes No

Public Health Hazards		
<input type="radio"/>	Electrical service wiring, components free from imminent fire or shock hazard	1 1
<input type="radio"/>	Potable water supply, maximum contaminant levels not exceeded	2 1
<input type="radio"/>	Use of approved water supply	3 1
<input type="radio"/>	Adequate quantity of potable water	4 1
<input type="radio"/>	Treatment of potable water is continuous	5 1
<input type="radio"/>	Adequate disinfection - potable water	6 1
<input type="radio"/>	Absence of cross connections - potable water supply	7 1
<input type="radio"/>	No inadequately treated sewage accessible to occupants; no contamination of water supply or bathing beach	8 1
<input type="radio"/>	Food service provided by operator or food vendor-No hazards - see Hazards on DOH-192	9 3
<input type="radio"/>	Pool and/or Beach - No hazards - see Hazards on DOH-1321/1322	10 3
<input type="radio"/>	Other	11 1
General		
<input type="radio"/>	Valid permit to operate	12 1
<input type="radio"/>	Access permitted for inspection purposes	13 1
<input type="radio"/>	"Individual in charge" present/immediately available	14 1
<input type="radio"/>	Illnesses/Injuries reported within 24 hours	15 1
<input type="radio"/>	Construction/Modification plans approved prior to construction	16 1
<input type="radio"/>	Construction in accordance with requirements	17 1
<input type="radio"/>	Flammable/Combustible liquids properly stored	18 1
<input type="radio"/>	Adequate surface drainage	19 1
<input type="radio"/>	Growth of ragweed, poison ivy/oak/sumac & other noxious weeds controlled	20 1
<input type="radio"/>	Insects, rodents controlled, no infestation, extermination methods acceptable	21 1
<input type="radio"/>	Electrical service: wiring and fixtures installed, maintained	22 1
<input type="radio"/>	Refuse - adequate facilities provided, proper storage/handling	23 1
<input type="radio"/>	Campsites - adequately sized	24 1
<input type="radio"/>	Structures for overnight transient occupancy meet Subpart 7-1	25 1
Food Service		
<input type="radio"/>	Food Service complies with Part 14 (complete and attach DOH-192)	26 3

Pool/Beach NO POOL / BEACH		
<input type="radio"/>	Pool/Beach complies w/Subpart 6-1/6-2 (complete and attach DOH-1321/1322)	27 3
Non-Public Water System (Individual on-site)		
<input type="radio"/>	Sources properly developed and protected	28 1
<input type="radio"/>	Disinfection Treatment proper Cl residual 1.4ppm UV	29 3
<input type="radio"/>	Adequate pressure (20 psi) maintained in distribution system	30 1
<input type="radio"/>	Free of cross-connections	31 1
<input type="radio"/>	Modifications/additions approved. Plans submitted	32 1
<input type="radio"/>	Operation records maintained and submitted	33 1
<input type="radio"/>	Compliance with water quality standards	34 1
<input type="radio"/>	Required monitoring performed	35 1
Water Supply - General		
<input type="radio"/>	Adequate supply available (55 gpd campsites/150 gpd other structures)	36 1
<input type="radio"/>	Adequate supply within 250' of all sites (1 spigot/10 sites minimum)	37 1
<input type="radio"/>	Interruptions, changes in source/treatments, notification within 24 hrs	38 1
<input type="radio"/>	No common drinking utensils, fountains of sanitary design	39 1
<input type="radio"/>	Campground Public Water System - complies w/ Subpart 5-1 (complete and attach DOH-4234)	40 1
Sewage Facilities		
<input type="radio"/>	Absence of untreated sewage on ground surface	41 1
<input type="radio"/>	Plans submitted for new/modified sewage treatment facilities or scavenging systems	42 1
<input type="radio"/>	Plans approved prior to construction, work in accordance w/approved plans	43 1
<input type="radio"/>	Sewage disposal/treatment facilities adequate, maintained	44 1
<input type="radio"/>	Privies properly located, constructed, maintained	45 1
<input type="radio"/>	Dumping stations - number, location, construction, maintained	46 1
<input type="radio"/>	Seasonal sites constructed after 3/7/01 provided w/individual sewer inlet connection or acceptable scavenger service	47 1
<input type="radio"/>	Toilet facilities - adequate, design - maintained	48 1
<input type="radio"/>	Toilet facilities - adequate number, distance, ratios, maintained	49 1
Other		
<input type="radio"/>	Handwash facilities - adequate number, location, maintained	50 1
<input type="radio"/>	Utility sinks - adequate, location, maintained	51 1
<input type="radio"/>	Showers (when provided) adequate, hot/cold water, maintained	52 1

INSPECTION BY (SIGNATURE): **Melissa Burch** DATE: **7/22/15**
 REPORT RECEIVED BY: **TO BE MAILED** DATE: [] [] [] []
 PRINT NAME: [] [] [] [] [] []

