Field Inspection Report - REQUIRED				PAGE 15
Facility Name:			Facility ID#:	
<b>INSTRUCTIONS:</b> This page must be a <b>stand-alone summary page</b> . List deficiencies and what must be done to correct the deficiency. Also provide a recommendation and what should be done to correct them. List testing forms and dates. Submit copies of all testing forms with the inspection. All testing forms must be pre-approved by the UST Program (C1-C11, etc).				
(Inspector Initial)	(Date)	(	Owner/Operator Initial)	(Date)

## SUBMIT ORIGINAL TO DEQ ELECTRONICALLY WITHIN 15 DAYS OF COMPLETION OF THE INSPECTION MDEQ MAY/22