1. District Office: _____

STATE OF CALIFORNIA DEPARTMENT OF INDUSTRIAL RELATIONS DIVISION OF OCCUPATIONAL SAFETY AND HEALTH

NOTICE OF NO VIOLATION AFTER INSPECTION

2. 「					7
L					
3. AN IN	ISPECTION WAS	S CONDUCTED BY		_ AT A PLACE OF EMPLOY	MENT
LOCA	TED AT	ON		<u>.</u>	
		AS INITIATED BY ANY OR RAL, PLANNED.	ALL OF THE FOLLOWING	G REASONS: COMPLAINT,	
4. Description	on of area(s) insp	ected:			
5 Signaturo			6. Signature		
5. SignatureSafety Engineer/Industrial Hygienist			District Manager/Senior Industrial Hygienist		
7. Date of is	suance:		8. Date inspection comp	leted:	
set forth in T	itle 8, California			of any standard. rule, order o abor Code has been found as	
this inspection					
inspection of	f the worksite. D	ue to the transitory nature o	of worksite conditions, viola	n was not necessarily a comp tions can occur occasionally issuance of citations on any	or routinely
9 Region	District	SE/IH Identification No.	Optional Report No.	CAL/OSHA 1 Report No) <u>.</u>