

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: CA follow-up has been completed for this location

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Ashley Noonan

Signed: _____

Title: Sr Regulatory Analyst

Date: 9/9/2024 12:53:19 PM

ATTACHMENT LIST

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Document Number **Description**

403913810	Inspection Report Resolution
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Total Attach: 1 Files