

(Variable Agency Designator)

DECISION REPORT

PR-ENF XXX (Temp. 08/05)

COUNTY _____

COMPANY/PERSON		INCIDENT DATE
INCIDENT TYPE <input type="checkbox"/> Investigation <input type="checkbox"/> Inspection <input type="checkbox"/> Other _____		OTHER TRACKING INFORMATION
SECTION VIOLATED	ENFORCEMENT RESPONSE POLICY (Compliance or Enforcement Action)	INCIDENT INFORMATION First violation in two years, subsequent, etc.

- Alleged violation(s) could not be proven by a preponderance of the evidence necessary for an administrative civil penalty hearing. Describe specifics below – include section numbers and/or evidence issues.
- Investigation limited due to non-cooperation of complainant(s). Describe specifics below.
- Mitigation measures to prevent future incidents have been adopted. Describe specifics below.
- Other – Describe specifics below.

EXPLANATION:

REPORT PREPARED BY	DATE SIGNED
REPORT REVIEWED BY	DATE SIGNED

Distribution: Original – CAC

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