FACILITY PHOTOGRAPHY REPORT

This form is intended to identify and clearly explain each photograph.

Time	:	Use 24-hr clock (i.e. 1800 hrs for 6 p.m.)
Photo Description	:	Briefly explain each picture.
Subject Distance	:	Important or close up pictures.
Location in Facility	:	Briefly explain where the picture was taken.
Violation	:	Reference each deficiency by regulation section number.

DATE

FACILITY NAME:

PHOTOGRAPHER NAME:

Sequence No.	Time (24-Hr Clock)	Photograph Description	Subject Distance	Location in Facility	Violation(s) (List Section No.)