

Board of Certification of Public Health Inspectors

Form E
To be attached as
the title page of
each field report

Documentation of Written Inspection Reports

Report Title:

Number of pages including this page: _____

This is to certify that:

Name of Candidate (Please Print)

prepared this report as the result of actual inspections made under the supervision of

Name of Approved Agency

Print Name and Title of Supervising PHI/EHO

Date

Signature