

### SKI-AMUSEMENT INSPECTION WORKSHEET

NAME OF COMPANY <i>INDIANHEAD OPERATIONS LLC</i>		COMPANY ID <i>022</i>		Page # of <i>1</i>	
INSPECTION LOCATION <i>WAKEFIELD MI</i>			BEGINNING DATE		ENDING DATE <i>11/13/21</i>
PERMANENT ID#	DEVICE NAME	SERIAL NUMBER	SATISFACTORY (y/n)	VIOLATION SAFETY NOTICE #	
<i>3006</i>	<i>#2 TRIPLE</i>			<i>---</i>	
<p><i>- AT MANAGEMENT'S DIRECTION A REINSPECTION TO ENSURE NO MECHANICAL OR STRUCTURAL ISSUES WITH LIFT. POST INCIDENT REINSPECTION OF #2 TRIPLE LIFT FOUND NO MECHANICAL OR STRUCTURAL DEFICIENCIES.</i></p>					
<p><i>A NEW GRIP PLACED IN THE NORMAL MIGRATION PATH AND CHAIR HUNG, CHAIRLIFT CLEARED FOR FURTHER OPERATION</i></p>					

INSPECTOR NAME: *CHRIS WILLIAMS*  
 SIGNATURE OF INSPECTOR: *Chris Will*