New Jersey Department of Health and Senior Services Consumer and Environmental Health Services Food and Drug Safety Program P.O. Box 369, Trenton, NJ 08625-0369

REPORT OF INSPECTION

1.0.200, 1.0.10.1, 1.0 00020 0000								ASSIGNMENT #								
License/ID#		Category			Sub-Category			Α	Activity Type				Evaluation			
2335		Interagency							Investigation				Not Applicable			
Name of Owner(s), Partnership or Corporation					Trade Name				L			E-mail Address				
Fit2Be Fitness Camp											brownmissfit@aol.com					
Establishment Location (Street Address)					City					Zip Code		County		Telepho	Telephone No.	
301 Euclid ave					Trenton							Merc		609-510-3288		
Establishment Mailing Address (if different)					Changes					l	Revised Informa			ation:		
Name of Inspecting Official						REHS Lic. #			Est. Code:		Total Hours:		Re	Reinspection on or After:		
Annie Pullockaran					B-150656						1.5					
		TIME/AC	CTIVITY REPO	ORT (C	odes.	: 1-Tra	vel, 2-li	ispe	ction, 3-A	dmii	nistration,	, 4-Pei	sona	I)		
Date	Code	Began	Ended	Date	Date		Code Beg				Date		Code	Began	Ended	
7/29/22	1	0830	0900	"		2	0900		0930		8/1/22		3	1430	1500	_
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Item	Remarks															
NJAC 8:21- R = Repeat Violation from the previous inspection																
PURPOSE OF VISIT/INVESTIGATION																
Upon arrival at the above firm/location, I found that the facility was locked, and it appeared vacant.																
I spoke with	an M	ls. M. Purvi	s. Camp dire	ctor. v	ia ph	one v	vho sta	ted	that the	cam	p had be	een cl	osed	l earlier tha	ın	

scheduled due to low registration. In addition, Ms. Purvis stated that there were 3 DFD eligible kids from 1 family and they didn't submit their DFD forms even though they were encouraged to.

REPORT OF INSPECTION / INVESTIGATION (CONTINUED)

Item		Remarks
Signature of	Inspecting Official	Name of Person Receiving Copy of Report
		M. Purvis