ORDER OF CONDEMNATION

DISTRICT NAME AND NUMBER	COUNTY
FACILITY NAME	FACILITY LOCATION
There has been submitted:	
A Report by(Name and Title of Person, i.e., Dept. of Public H	filed on Health, State Fire Marshal, State Supt. Of Education)
with this office describin	g conditions of noncompliance with applicable
codes, thus resulting in this facility to be deem	ned (or declared) unsafe, unsanitary and unfit for
occupancy.	
As it is my duty to enforce the Health Life/Safety	Code for Public Schools (23 Illinois Administrative
Code Part 180) pursuant to the provisions of Sec	ctions 2-3.12 and 3-14.20 and 3-14.21 and 3-14.22
of the School Code of Illinois;	
Therefore, the Board of Education, District #	of County, is hereby
ordered to make such repairs or alterations as ne	cessary to effect full compliance with the applicable
provisions of the Health/Life Safety Code for Publ	ic Schools.
Until all conditions of noncompliance are abated	and/or corrected and approved by this office, the
said facility is hereby condemned.	
Signed thisday of,	
Name of Regional Superintendent	Signature of Regional Superintendent

Form 36-32 (09/10) (Prescribed by the Regional Superintendent for the use of the Regional Superintendent)

180.420