



REPORT OF INDIANA STATE SEAL USAGE

State Form 30071 (R7 / 7-02)
Office of the State Building Commissioner
Code Enforcement Division
Indiana Government Center South
402 W. Washington Street, Room W246
Indianapolis, IN 46204

Report for: (month and year)

Name of manufacturer _____
Address (city, state, ZIP code) _____
Plant address (city, state, ZIP code) _____

State Inspection _____
Inspector name

Third Party Inspection _____
Company name

Date of Inspection	Date Seal Used	MFR'S Unit Serial No.	Design Release No.	Indiana Seal of Compliance No.

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Signature of manufacturer's representative

I HEREBY CERTIFY THAT EACH INDIANA CERTIFICATION LABEL WAS ISSUED IN COMPLIANCE WITH IC 22-15-4-1 OR IC 22-15-4-2.