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Lake Norman Marine Commission  
NO-WAKE VIOLATION REPORT

LOCATION \_\_\_\_\_

REPORTING ADDRESS \_\_\_\_\_

COUNTY \_\_\_\_\_

NAME \_\_\_\_\_

DESCRIPTION OF VIOLATION \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE \_\_\_\_\_

TIME \_\_\_\_\_

OFFICER RESPONDED:                      TIME \_\_\_\_\_

OFFICER COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE