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| **AED (Automated External Defibrillator)**   * annual inspection | **Site Address**  Head Office 50 Lalor St  Ameeyk 107 Hurd *St*  SDA 106 Palmer St & SDA 108 Palmer St | Portland Neighbourhood House 40 Waratah St  Seawinds Nursery 191 Wellington Rd  Support Coordination Shop 12/13 Pioneer Plaza |

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| **Name of item tested/inspected** | **Date of inspection**  **…./…./…..** | **Company conducting inspection/repair/testing** | **Problems identified in inspection** | **Action to be taken to rectify problem** | **Action reported to whom?** | **Person conducting inspection** |
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