

## Delaware County Health Department

100 West Main Street, Room 207 Muncie, Indiana 47305

Phone (765)747-7721 Fax (765)747-7747

OLIVE GARDEN ITALIAN RESTAURANT, THE

email - dchealth@co.delaware.in.us

CERTIFIED FOOD HANDLER								
NORMAN ROSE	# 5497476	Expire						
Date of Inspection	Release Date	Follow Up (Yes - No						

Telephone Number

765-287-0405

## RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

Based on an inspection this day, the item(s) noted below identify violation(s) of 410 IAC 7 - 24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

	W. MC		IARD RD.	et, city, state, ZIP code)	MUNCI	IE	IN 47303	3
E-Mail /	Address ANTELI	EMON	@DARDE	N.COM			Purpose:	Menu Type:
Owner's Name GMRI, INC./ATTN:LICENSING						1 - ROUTINE	5 - EXTENDED LIFE/SHELF	
	-	city, stat	e, ZIP code)		) FL	22000 0001	STD O VADA OF MOI	ATTOME
Name of NO	f Person Ir RMAN	Charge		OILD/HVDC	J IL	32869-9901	SUMMARY OF VIOL	
			on Number	County	Distric		CRITICAL / NON-CRITIC	
Critical i	teme ara i	200	l in the momentic	1 8 ve columns marked "C" ("NC" No	T G	T	C_2 NC_3	R
Violation	n(s) repeat	ed from	previous inspe	ections are denoted in the "SUMM	MARY OF VIOLA	TIONS" and in	n the narrative below as "R"	URIGINA
nnex Key	C / NC	R	Section #		N	larrative		Corrected By Date
25	С		114	Section 114Variance. The issued by ISDH on 9-24-10 re Specifically, daily thermocores	Today			
				not performed on fourteen (ten) days.				
16F	NC		234	Section 234In-use utensil utensils with bare hands and	Today			
7DEF	NC		244	Section 244. Storage prohistored on the floor in the dry	Today			
19B	С		336	Section 336Backsiphona attached to the mop sink and	Today			
13B	NC		439	Section 439Separation o cleaning chemical bottle sitt	Today			
							eaval E	יהרוכות
							GUMPLE	
	10.00	Towns and	nd Title Drint	ed)	Inspe	ected By:	TERRY TROXELL / MARK M	MATTOX
Recen	ved By (I	valle	nd Title Print	Troud	$\sim$ $\perp$			1

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