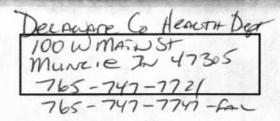


## RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

State Form 48669 (R2/2-05) SDH Form 51-0001



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

The time li	mit for cor	rection o	of each violation	is specified in	the narrative po	ortion of this	report. (0	10 -	1230	
Establishment Name Car Del							Telephone Number	Date of In	spection	ID#
Establishm 304	ent Addre		er and street, cit	y, state, ZIP co Mur		47304	( )Owner	11/2	27/12	200
Owner							Purpose:	Follow-up Release Date  ND 12712		
Owner's Address PD. Bof 695016 Orlando FL 3226							2. Follow-up 3. Complaint	Summary of Violations:		
Person in Charge  Toha Alkove							4. Pre-Operational 5. Temporary	CNCR		
Responsible Person's E-mail							7. Other (list)	Menu Type (See back of page)		
Obn Alkare							- Cutch (list)	12	3/	4_5_
					D NARRATIVE O		ARKED "C" IMARY OF VIOLATIONS" A	ND IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R			Naı	rrative			To Be Co	rrected By
					47) ONS					
							GUM	PLG		
Received by	(name and	title pri	nted):	10.			Inspected by (name and title p	orinted):	1/01/7	
X	John	n A	Ilkove	mo	mager		Tern Tr	oxel)		
Received by	Signature	2					Inspected by (signatule):	Nels	P	
/cc: /				cc:			5	Jec:		