

Delaware County Health Department

100 West Main Street, Room 207

Muncie, Indiana 47305

Phone (765)747-7721

Fax (765)747-7747

email - dchealth@co.delaware.in.us

CERTIFIED FOOD HANDLER

RICK FREY

KB9712203

Expire

Date of Inspection

9/19/12

Release Date

9/29/12

Follow Up (Yes - No)

NO

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.

Establishment Name SUBWAY #34873		Telephone Number (765) 254-1801	
Establishment Address (number and street, city, state, ZIP code) 4801 W CLARA LANE MUNCIE IN 47304			
E-Mail Address		Purpose: 1 - ROUTINE	
Owner's Name ESTEP & COMPANY, INC.		Menu Type: 2- LIMITED MENU	
Owner's Address (city, state, ZIP code) 3685 N NATIONAL RD COLUMBUS IN 47201		SUMMARY OF VIOLATIONS: CRITICAL / NON-CRITICAL / REPEAT C _____ NC <u>1</u> R <u>1</u>	
Name of Person In Charge RICK FREY			
Establishment Identification Number 449	County 1 8		

* Critical items are identified in the narrative columns marked "C" ("NC" Non-Critical)

* Violation(s) repeated from previous inspections are denoted in the "SUMMARY OF VIOLATIONS" and in the narrative below as "R"

[illegible]

Received By (Name and Title Printed) <i>X Angela Jones</i>	Inspected By: NANCY LARSON
Received By: (Signature) <i>Angela Jones</i>	Inspector Signature: <i>X Nancy Larson</i>
	Page 1 of <u>1</u>

OFFICE COPY