

## RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

State Form 48669 (R2/2-05) SDH Form 51-0001 100 W MAIN RM 20 MUNCIE IN 47305-2874 (765) 747-7721

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 narrative portion of this report.

		on of each violation is specified in the narrative portion of the		Data of Inche	ation	L ID #	
Establishment Name			Telephone Number 765) 282-2273	Date of Inspection ID # (mm/dd/yr)		1D#	
	-	Pantny	-	1/15/1	1/15/13		
Establishme	il C	imber and street, city, state, ZIP code)	( ) Owner	,,	5	_	
Owner	45.	Tilloton Muncia, IN 4730	Purpose:	Follow-up	Dolon	se Date	
Owner	0.00	ntry LLC		NO.	1011024700	25/13	
Owner's Address			1. Routine	,-5.5			
P. D. Box 3227 Wilmington NC 28406			2. Follow-up	Summary of Violations:			
Person in Charge			3. Complaint	$C \bigcirc NC \bigcirc R \bigcirc$			
Tamblun Bailey			4. Pre-Operational	C W	NCV	K <u>U</u>	
Responsible Person's E-mail			5. Temporary	Menu Type	Menu Type (See back of page)		
l .	mileut	amblyn@ yakos com	6. HACCP			71.07	
Certified Fo	ood Handler		7. Other (list)	1 X 2	3	4 5	
E	cempt					-:	
		ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"				
				(D. 18) WING \$1.1	D. D. A. (1975-1975)	DELOW 16 4DB	
		D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN				
Section#	C/NC R	Narrative			o Be Co	orrected By	
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Received by	y (name and title	printed): <sub>I</sub>	Inspected by (name and title p	orinted):			
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Received by (signature):							
Landiler bailey. & A. S. Harley							
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