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

KIM SLONE # 5049132 Expire

Date of Inspection	Release Date	Follow Up (Yes - No)
5/25/10	6/4/10	NO

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

ORIGINAL

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: CAMMACK STATION

Telephone Number: (765) 759-3871

Establishment Address (number and street, city, state, ZIP code): 9200 W JACKSON MUNCIE IN 47304

E-Mail Address:

Owner's Name: RICHARD HOWE

Owner's Address (city, state, ZIP code): 13150 W CO RD 300 N YORKTOWN IN 47396

Name of Person In Charge: KIM SLONE

Establishment Identification Number: 626

County: 1 8

District: cmd

Purpose: 1 - ROUTINE

Menu Type: 3 - ADVANCED PREP

SUMMARY OF VIOLATIONS:

CRITICAL / NON-CRITICAL / REPEAT

C 1 NC ____ R ____

* 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"

Annex Key	C / NC	R	Section #	Narrative	Corrected By Date
5.5ABCD	C		187	Section 187..Potentially hazardous food; hot and cold holding-RAW HAMBURGER WAS BEING HELD AT 49 DEGREES F. SOUPS IN STAND UP FRIDGE WAS HELD AT 47 DEGREES	Today
				COMPLETED	

Received By (Name and Title Printed):

Received By: (Signature) Kim Sloan

Inspected By: CHRISTINE DELY-STINSON, REHS

Inspector Signature:

OFFICE COPY