

Delaware County Health Department

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| CF | RTIFIED | FOOD | HAND | LER |
|----|---------|------|------|-----|

ANGELA CRISSMORE # KB9706356 Expire

Date of Inspection Release Date 10/26/09

Follow Up (Yes - No) NO

11/5/09

| RETAIL | FOOD | ESTABL | LISHMENT | INSPE | CTION | REPO | PRT |
|--------|-------------|--------|-----------------|-------|-------|------|-----|
| | | | | | | | |

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.

| Establish | | me ANTRY | 7 | | | 765-396-30 | coven |
|--------------------------|--------------------|------------------------|---------------------------|--|---------------------------|-------------|----------------------|
| Establish | ment Ad | dress (nu | mber and stree | et, city, state, ZIP code) | | 200 | |
| | | Γ RD. 3 | J | EATON | IN | 473. | 38 |
| E-Mail A | Address | | | | Purpose: | - 11 | Menu Type: |
| | MILLE | | ONS OIL C | | 1 - ROUT | INE 2 | - LIMITED MENU |
| Owner's | Address | (city, stat | e, ZIP code) O BOX 114 | DUNKIRK IN 47336 | SUMI | MARY OF VIC | DLATIONS: |
| Name of J.A. | Person II MILLI | n Charge ER ANI | D SONS O | L CO. | CRITICAL | / NON-CRITI | CAL / REPEAT |
| Establish | ment Ide | ntificatio 189 | n Number | County District 1 8 C D S | C1 | NC1 | _ R |
| Critical it Violation | ems are i | identified ted from | in the narrativ | re columns marked "C" ("NC" Non-Critical) rections are denoted in the "SUMMARY OF VIOLATIONS" and in t | the narrative below as "R | | |
| Annex Key | C / NC | R | Section # | Narrative | | | Corrected By Date |
| .5ABCD | С | | 187 | Section 187Potentially hazardous food; hot and cold hol CHEESE SLICES HAD INTERNAL TEMPERATURE | | | Today |
| 23A | NC | | 430 | Section 430Repairing premises, structures, and attachme OUTSIDE WALL TO WALK-IN FREEZER IS NOT M. | ents- AINTAINED IN GOO | DD REPAIR. | 3 months |
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| | | | | | | PLETE | |
| | | | | | | | |
| Received | d By (Na | ame and | Title Printed | Inspected By: | CHRISTINE DE | ÎY-STINSON | N, REHS |
| Receive | d By: (S | ignature | 720. | Inspector Signature: | K XX | 100 | Page 1 of 1 |

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