



Delaware County Health Department

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Muncie, Indiana 47305

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CERTIFIED FOOD HANDLER

PENG ZHENG # CT000240985 Expire 1/2011

Date of Inspection 9/15/09	Release Date 9/25/09	Follow Up (Yes - No) NO
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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.

ORIGINAL
SAK

Establishment Name KING BUFFET		Telephone Number (765) 587-0166
Establishment Address (number and street, city, state, ZIP code) 1515 W MCGALLIARD RD MUNCIE IN 47304		
E-Mail Address	Purpose: 1 - ROUTINE	Menu Type: 4 = Extensive Prep
Owner's Name KING BUFFET	SUMMARY OF VIOLATIONS: CRITICAL / NON-CRITICAL / REPEAT C _____ NC _____ R _____	
Owner's Address (city, state, ZIP code) 1515 W MCGALLIARD RD MUNCIE IN 47304		
Name of Person In Charge PENG ZHENG		
Establishment Identification Number 432		
	County 1 8	District C T B

- * 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
20B	NC		351	Section 351..Toilet room receptacle; covered- covered receptacle,-a receptacle with a lid is required in each ladies stall.	24 Hours
				Action required from previous report has been taken.	

COMPLETED

Received By (Name and Title Printed) Penz Zheng, Manager	Inspected By: Tim Botkin, DCHD
Received By: (Signature) <i>Penz Zheng</i>	Inspector Signature: <i>Tim Botkin</i>
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