

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

CE	ERTIFIED FOOD HANDLER					
CHRIS BOWMAN	# 4879658	Expire 5/2013				
Date of Inspection	Release Date	Follow Up (Yes - No)				

3/6/10

NO

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

2/24/10

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 Telephone Numb										er			
MEIJER INC. 139 765-281-7										780	0		
Establish	Establishment Address (number and street, city, state, ZIP code)												
6260 W. MC GALLIARD RD. MUNCIE									IN	i .	47	7304	1
E-Mail Address								[Purpose:				Menu Type:
Owner's Name MEIJER STORES LIMITED PARTNERSHIP									1 - R	OUT	INE	2 -	LIMITED MENU
ME	IJER S'	TORES	LIMITED	PARTNER	SHIP								
Owner's	Owner's Address (city, state, ZIP code) 2929 WALKER AVE NW GRAND RAPIDS MI 49544-9428 SUMMARY OF VIOLA										ATIONS:		
											ATIONS.		
CRA	Name of Person In Charge CRAIG HUNTER, GENERAL MANAGER CRITICAL / NON-CRITICAL										AL / REPEAT		
Establishment Identification Number County 262 1 8 Ti							District B		C NC R				R
Critical is	tems are i		in the narrativ	e columns ma	rked "C" ("NC" No			L					
Violation	(s) repeat	ted from	previous inspe	ctions are den	oted in the "SUMM	ARY OF	VIOLATIONS" and	in the n	arrative below	as "R	*		
Annex Key	C / NC	R	Section #				Narrative						Corrected By Date
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Received By (Name and Title Printed) CRAIG HUNTER, GENERAL MANAGER Inspects						Inspected By:		TIM	1 BO	TKIN, DCH	ID		
						Inspector Signatur	re:	1/2		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	Page 1 of 1	
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