



RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

State Form 48669 (R2/2-05)
SDH Form 51-0001

Delaware County Health Dept
100 W Main Street
Muncie IN 47305

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.

Establishment Name <u>Penn Station East Coast Subs</u>		Telephone Number (<u>765</u>) <u>284-7366</u>	Date of Inspection (mm/dd/yr) <u>2-26-13</u>	ID # <u>/</u>
Establishment Address (number and street, city, state, ZIP code) <u>3313 N. Everbrook Lane, Muncie IN 47304</u>				
Owner <u>Bob Williams</u> ^{SP}	Purpose: 1. <u>Routine</u> 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up <u>No</u>	Release Date <u>3-6-13</u>	
Owner's Address <u>745 E 107th Street, Muncie IN 46280</u>		Summary of Violations: <u>C 1 NC 2 R 0</u>		
Person in Charge <u>Robert Chinsky</u>		Menu Type (See back of page) <u>1 2 3 4 5</u>		
Responsible Person's E-mail <u>N/A</u>				
Certified Food Handler <u>Robert Williams 5/9/2016</u> #7800869				

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" 1:23 - 2:34
- VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section#	C/NC	R	Narrative	To Be Corrected By
295	NC		• Inside the raw refrigerated prep cooler greenish/gray dust-like substance was observed behind the food containers. I was also observed in the bottom of this unit.	24 hours
			• In the produce prep refrigeration unit shredded lettuce was observed dried hanging from the shelves	↓
204	C		• In the ice machine the gray drop plate is missing a bolt allowing the plate to hang forward. The middle bolt is half undone directly over the ice	10 minutes
218	NC		• The exterior cover of the top ice machine is missing. The middle, bottom metal plating in the lemon aid cooler has worn away exposing insulation	3 months
COMPLETED				

Received by (name and title printed): <u>Robert Williams</u>		Inspected by (name and title printed): <u>Sharon I. Patton</u>	
Received by (signature): <u>[Signature]</u>		Inspected by (signature): <u>[Signature]</u>	
cc:	cc:	cc:	