

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 47365 765-141-7721

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 Pizza Hut Establishment Address (number and street, city, state, ZIP code) 2601 N. Wheeling Ave., Muncic IN 47303 Owner Cary Comer Owner's Address 2601 N. Wheeling Ave., Muncic IN 47303 Person in Charge April Foster Responsible Person's E-mail Office Certified Food Handler April Foster 10/2014 *1575535 • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N		
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NARRATIVE BELOW AS "R"
Section# C/NC R Narrative		To Be Corrected By
324 C J. The hand sink nearest the drive thru window hour is leaking from the faucet while not under pressue. The sink is non-working + this establishment has one hand sink for a building with 4000 so feet. It has been broken for at least three months.		
295 NC The following non-food contact surfaces were observed unclean; The ice machine trained to record the lack sling mold-like substance corrected on the "upper roof" sides. Containers in 24 hours the oven kitch stored "as clean" outside the walk in door were soiled with food debris. The table/shelves under counter at the boxing over were littered with paper clutter, food debris tresidue. Pans equipment stored on the paper clutter, food with large peces of food stuck to them 430 NC The roof has a leak in the side dining area. I week Received by (name and title printed): And Moster Grand Manager Sharon I Pattee CC: CC: CC: CC: CC: CC: CC:		