RETAIL FOOD ESTABLISHMENT INSPECTION REPORT State Form 48669 (R2/2-05)

SDH Form 51-0001

Delaware	County		
Health	Deportment		

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.

HOO Owner Owner's Ad Person in C Responsible N/ Certified F Set • CRITICAL	Derta ent Address Derto ddress Some) Charge Em Em Em Charge Em A 000d Haudle Land	vəll vəll vəll r z C e identi	FIED IN THE CHECK	MUNCIE, IN Exp. 01/17 LIST AND NARRATIVE COLUM	Telephone Number (76.5 28.7 8997 () Correst Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (llst) MNS MARKED "C" E "SUMMARY OF VIOLATIONS" AN	Follow-up Summary C C Menu Type 12	6/12 248 Release Date 04/06/12 of Violations: NC_2 R re (See back of page) 3_4_5_ CRIGINAL
• VIOLATIC Section#	C/NC	R	IM PREVIOUS INSPE	Narrativ			To Be Corrected By
			broken and Boiled chic	the ceiling , d peeling. Ken stored for pir current	in the Kitchen cooling is expo	sed	60 days Today
E-	y (name and n n v y (signature	e I	led): E 5 c a	m;11a	Inspected by (name and title, Jammie Inspected by (signature):	Bane	MPLETED Baro