

Establishment Name

Delaware County Health Department 100 West Main Street, Room 207

Muncie, Indiana 47305

Phone Fax

(765)747-7721 (765)747-7747

email - dchealth@co.delaware.in.us

CE	CERTIFIED FOOD HANDLER								
	#	Expire							
Date of Inspection	Release Date	Follow Up (Yes - No)							
9/23/10	10/3/10	NO							

Telephone Number

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.

AMV	ETS P	OST 1	2						(317) 287	-9054	
				t, city, state, ZIP code)							
7621 ST. RD. 3 NORTH MUNCIE						Ξ	IN 47303				
E-Mail Add	dress							Purpose		Menu Type:	
Owner's Name AMVETS POST 12, INC.								1 - ROUTINE 2 - LIMITED		2 - LIMITED MENU	
Owner's Address (city, state, ZIP code) 7621 ST. RD 3. NORTH MUNCIE IN 47303							17303	SUM	SUMMARY OF VIOLATIONS:		
Name of Person In Charge JOHN ADAMS								CRITICAL / NON-CRITICAL / REPEAT			
Establishment Identification Number 324				County District C NC					_ R		
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"									IGINAL		
Annex	C / NC	R	Section #				arrative			Corrected By Date	
	INC			No Violations							
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Received By: (Signature)					Inspec	tor Signature:		roll	Page 1 of		
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