

Establishment Name

## **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

CERTIFIED FOOD HANDLER								
	# LD000235401	Expire						
Date of Inspection	Release Date	Follow Up (Yes - No)						
4/26/10	5/6/10	NO						

## 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.

Telephone Number S. DRIVE IN

BURKIES DRIVE IN							LA	Okio.	765-282	-4355		
Establishment A	Address (1	number a	nd street, city,	state, ZIP code)		16						
1515 W JACKSON MUNCIE							IN 47303					
E-Mail Address	S							Purpose	:	Menu	Type:	
Owner's Name BURKIES DRIVE IN						1 - ROUTINE 2 - LIMI			TED MENU			
Owner's Address (city, state, ZIP code) 1515 W JACKSON ST MUNCIE IN 47303							SUMMARY OF VIOLATIONS:					
Name of Person In Charge SCOTT BOYLAN								CRITICAL / NON-CRITICAL / REPEAT				
Establishment Identification Number County 15 1 8					Distric CDS			C 1	NC2	2 R_		
Critical items ar Violation(s) rep	re identific	ed in the i	narrative colus inspections	mns marked "C" ("NC" Non- are denoted in the "SUMMA	-Critical) ARY OF VIOLA	TIONS" and	d in the i					
Annex Key	C / NC	R	Section #	Narrative						Corrected By Date		
7ABC	С		173	Section 173Packaged and unpackaged food; separation, packaging, and segregation- RAW HAMBURGER PATTIES WERE STORED OVER READY TO EAT HAM							CORRECTE D	
17D	NC		245	Section 245Wiping cloths; used for one purpose- SEVERAL WIPING CLOTHS WERE STORED ON CUTTING BOARDS AND PREP TABLES NOT STORED IN SANITIZER.							Today	
Received By (		d Title I	Printed)		Inspe	ected By:	7/	CHRISTINA D	ELY-STIN	SON. RE	HS	
Received By: (Signature) Inspe					Inspec	Inspector Signature: Page 1 of 1						
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