Delaware Co Health Dept
100 W Main St
Muncie In 47305
765-747-7721
765-747-7747 Fax

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

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

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.

130 225

Establishment Name: Cheers	Telephone Number: 765 216-7013 ( ) Establishment ( ) Owner	Date of Inspection (mm/dd/yr): 2/28/13	ID #: 20
Establishment Address (*number and street, city, state, ZIP code*): 3823 N Broadway Muncie In 47303			
Owner: Anthony Brummett	Purpose: 1 Routine	Follow-up: No	Release Date: 3/6/13
Owner's Address: 712 N Eastwood Muncie IN 47303	2. Follow-up	Summary of Violations:	
Person in Charge: Varetta Brown	3. Complaint	C___ NC___ R___	
Responsible Person's E-mail:	4. Pre-Operational		
	5. Temporary	Menu Type (*See back of page*)	
	6. HACCP		
Certified Food Handler: Varetta Brown	7. Other (*list*)	1___ 2___ 3 4___ 5___	

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
- 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
			No Violations Observed	

COMPLETED

Received by (*name and title printed*): Varetta Brown (Kitchen Mang)	Inspected by (*name and title printed*): Terry Troxell
Received by (*signature*): Varetta Brown	Inspected by (*signature*): Terry Troxell
cc:	cc: / cc: