

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

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

DELAWARE COUNTY DEPARTMENT OF HEALTH 100 W MAIN RM 207

MUNCIE IN 47305-2874

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 in	nit for cor	rectio	n of each violation is specified in the narrative portion of th	is report.			
Establishme	ent Name			(mm/dd/			
Dair	v ()	1025	2 Bethel	Telephone Number () Establishment 765, 287-8244			
Establishment Address (number and street, city, state, ZIP code) [165. 287-8244 1/29/12 300							
380		1	Bethel Ave. Muncie IN	7.500000	' '	/	
Owner	0 6	<u> </u>	Letnes Hue, Moneie 110	Purnose	Follow-n	In Release Date	
Matt > Chad Anderson				-	7 ,		
Owner's Ac	idress		1	2. Follow-up	Summary of Violations:		
420	W	W	shington St. Muncie IN	3. Complaint		SP	
Person in C		^	J	4. Pre-Operational	C_2	NC R C	
Jen	nifer	C	Doper	25.0			
Responsible	Person's	E-ma	il		Menu Type (See back of page)		
	N	IA		6. HACCP		/	
Certified Food Handler						3 4 5	
^ #r							
Jennifer Cooper + 7199400 - 6/13/2015							
• 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	
Sections	Cirro		1,000			,	
200000000000000000000000000000000000000					- 1	0. /	
187	C		one can of shreded the	cse stored on	the	Already	
5135					1 1		
			Counter measure JI.J.			Corrected	
					. ,	· ,	
336	0		. A backsinhance device	is not acquid	lect	7 days	
			I I I Priorige General	1, 1,			
		-	at the splinter of the n	rop sink			
						ļ , , , , , , , , , , , , , , , , , , ,	
430	nic		· In the backroom + walk	suc autside	16-	30 days	
	700		11/ 1	7			
		trim/corners are missing allowing food					
	debris = soil to accumulate. There is a large could where an accumulation of debris						
		-	Structure.				
-							
				n ages o	20000		
		-		- A	Dill III	Parien	
				4			
Received by	(name an	l titlo	printed):	Inspected by (name and title p	orinted):		
Received by (name and title printed): Inspected by (name and title printed):							
NYSU	4116	K	COOKER	Charon It	attec		
Received by	(signature	?):	1	Inspected by (signature):	1		
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