

Delaware County Health Department

100 West Main Street, Room 207

Muncie, Indiana 47305

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CERTIFIED FOOD HANDLER

ROBERT JONES

5429977

Expire 6/19/2012

Date of Inspection
11/22/11

Release Date
12/2/11

Follow Up (Yes - No)
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.

Establishment Name PIZZA KING #67	Telephone Number 765-396-9568
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Establishment Address (number and street, city, state, ZIP code) 110 WEST HARRIS EATON IN 47338

E-Mail Address COMCOUNT@AOL.COM

Owner's Name MORSTOR, INC

Owner's Address (city, state, ZIP code) 4111 N WHEELING AVE MUNCIE IN 47304

Name of Person In Charge JERRY RILEY
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Establishment Identification Number 92	County	District
	1 8	L S H

Purpose: 1 - ROUTINE	Menu Type: 2 - LIMITED MENU
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SUMMARY OF VIOLATIONS: CRITICAL / NON-CRITICAL / REPEAT C 0 NC 0 R 0

- * 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"

ORIGINAL

Annex Key	C / NC	R	Section #	Narrative	Corrected By Date
				No Violations.	

COMPLETED

Received By (Name and Title Printed) Robert D. Jones
Received By: (Signature) <i>[Signature]</i>

Inspected By: LYNNETTA HARLEY
Inspector Signature: <i>[Signature]</i>

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