



Delaware County Health Department

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CERTIFIED FOOD HANDLER

CRAIG HUNTER # TE20472457 Expire _____

Date of Inspection 10/24/11	Release Date 11/3/11	Follow Up (Yes - No) NO
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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 MEIJER INC. 139		Telephone Number 765-281-7800	
Establishment Address (number and street, city, state, ZIP code) 6260 W. MC GALLIARD RD. MUNCIE IN 47304			
E-Mail Address		Purpose: 1 - ROUTINE	Menu Type: 3 - ADVANCED PREP
Owner's Name MEIJER STORES LIMITED PARTNERSHIP			
Owner's Address (city, state, ZIP code) 2929 WALKER AVE NW GRAND RAPIDS MI 49544-9428			
Name of Person In Charge CRAIG HUNTER			
Establishment Identification Number 262	County 1 8	District T G T	
SUMMARY OF VIOLATIONS: CRITICAL / NON-CRITICAL / REPEAT C <u>1</u> NC <u>3</u> 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"

ORIGINAL

Annex Key	C / NC	R	Section #	Narrative	Corrected By Date
9	NC		128	Section 128..Hand cleaning and drying procedure, There was not any hot water provided at the hand wash sink in the meat service area.	Today
5.5ABCD	C		187	Section 187..Potentially hazardous food; hot and cold holding. The deli turkey had a measured temperature of 46F in the reach in cooler in the deli area.	Today
8, 17D	NC		295	Section 295..Equipment, food-contact surfaces, nonfood-contact surfaces, and utensils. The p fryers in hot foods area were not clean to sight or touch and had a build up of grease and food debris on the interior compartments, also the floor under the deep fryers had a build up of grease.	Today
19B	NC	R	336	Section 336..Backsiphonage prevention device; when required. There was a "Y" hose bibb attached to the mop sink and did not have a downstream back flow prevention valve attached. This was observed on the last inspection.	Today
				The refrigeration equipment and the rebuilt vegetable prep area that was submitted for plan review was placed according to the plans submitted and was observed in good working condition.	

COMPLETED

Received By (Name and Title, Printed) Darrin Wilson	Inspected By: TERRY TROXELL
Received By: (Signature)	Inspector Signature: <i>Terry Troxell</i>
	Page 1 of _____

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