

## **Delaware County Health Department** 100 West Main Street, Room 207

Muncie, Indiana 47305

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email - dchealth@co.delaware.in.us

CE	CERTIFIED FOOD HANDLER						
LYNN MARSHALL	# 5109570	_ Expire					
Date of Inspection 4/26/11	Release Date	Follow Up (Yes - 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 Telephone Number									
PANERA BREAD #1074						(765) 286-5452			
				t, city, state, ZIP code)					
812	E MCC	GALLIA	ARD RD		MUNCIE	IN	4730	3	
E-Mail Address						Purpose:	Menu Type:		
Owner's Name PANERA, LLC LICENSE MANAGER						1 - ROUTINE 2 - LIMITED MENU			
Owner's Address (city, sts@IZIH @Ba)ER RD, 3630 #100 ST LOUIS MO 63127						SUMMARY OF VIOLATIONS:			
Name of Person In Charge PANERA, LLC						CRITICAL / NON-CRITICAL / REPEAT			
Establishment Identification Number 397				County 1 8	District NANCY LARSON	C	C NC R		
Critical its	ems are i	dentified ted from	in the narrativ	e columns marked "C" ("NC" N ctions are denoted in the "SUM	Von-Critical) MARY OF VIOLATIONS" and in t	he narrative below as "R"		URIGINAL	
Annex Key	C / NC	R	Section #		Narrative			Corrected By Date	
	NO	No violations observed during this inspection.							
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Recei	yed By	(Name a	and Title Prin	nted) Manage	200	$A \cup A$	NCY LARSON	Page 1 of1	
Trace	ived By	(Signal		(	Inspector Signaty	Jany A	arsa	1 450 1 51	
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