

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

State Form 48669 (R2/2-05) SDH Form 51-0001 Delaware County Health Dept 100 W Main St Muncie, IN 47305

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.

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Establishme	ent Name			Telephone Number	Date of Inspec	ction	ID#
B	20 020		In Muna	765-284-420	(mm/dd/yr)		/
Establishment Address (number and street, city, state, ZIP code)				165-289-900	2-27.	12	
3400	> D1	01	neer and street, city, state, ZIP code) 1 adam Lane, Muncic IN 47304		0.0,7	13	.6
Owner	10	0,	Take, More Live	Purpose:	Follow-up	Releas	se Date
(1) 1	-in	7:1	Ah: Opco, LLC	. Routine	No 3-7-13		
Owner's Ac				2. Follow-up	Summary of Violations:		
250	30 A))	Dallas PRwy #600 Plano 1x	3. Complaint			
Person in C			3 4 11 10 9 000 17 1 11 12 14		c 3 Nc / R/		
Ro	1.1	h.: 1.	misc	4. Pre-Operational	e_o_ne_t_ n		
Responsible		E-mai	1 mis c	5. Temporary	Menu Type (See back of page)		
<u>ا</u> ا	MIA			6. HACCP			
Certified Fo	ood Handle	er	70 20 20 20 20 20 20 20 20 20 20 20 20 20	7. Other (list)	1 2 / 3 4 5		
0,00	is ne	. .	1 3 month from today				
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" 8:45-9:41							
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		Т	o Be Co	orrected By
303	C.	/	· This establishment does not	have sanitize	1 7 6	24 h	ιουγς
			. 0	untact surfaces			+
			TO THE SWITTERING THE 1000 S	Jon Taces			
3:10	342 0 7 1 1112 1 1 1 1 1 1 1						
343	-6	I This establishment does not have a hand sink 6 months					
	in the food prep area						
294	291 NC This establishment does not have a santain 24 hours						
0.11	100						
			test Kit				
				. 1,	11		
218	C		· There is no Certified food	handler on sta	FF :	3 mi	on+hs
		-	2				
		_					
			1 5				
		-			W	MILL	- II II II II
		-					
Received by (name and title printed): Inspected by (name and title printed):							
HOW WHITMIRE Sharon I Patter							
Received by (signature):							
The Walter Shared Yalton							
cc: cc: cc:							