

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

State Form 48669 (R2/2-05) SDH Form 51-0001 BLACKFORD CO HEALTH DEPT 506 E. VAN CLEVE HARTFORD CITY, IN 47348 (765) 348-4317

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.						
Establishm	ent Name			Telephone Number	Date of Ins	
DOLLAR GONGRA STORE # 18696 (765 329 3385 (mm/dd/yr))73 6
Establishment Address (number and street, city, state, ZIP code) 900 Sween Hourt Hourt Lord Cty						
Owner DOGEN GRP LLC				Purpose:	Follow-u	7 4 / 1
					Summar	y of Violations:
100 MISSION KIDGE GOUD/etsville /W 3. Complaint						
Person in C	Charge		500 th ERLAND	Pre-Operational Temporary	C	_ NC R
Responsible Person's E-mail						pe (See back of page)
		10 0	N/A	7. Other (list)	1 1 2	2 4 5
Certified F	ood Handle	er	ALM	-	12	345
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"						
	.195624		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	
Section#	C/NC	R	Narrative			To Be Corrected By
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Received by (signature): Inspected by (signature):						
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