



**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.

Establishment Name Casey's #2288	Telephone Number 765 331 6228	Date of Inspection (mm/dd/yr) 4/6/23	ID # 5
Establishment Address (number and street, city, state, ZIP code) 901 S. WALNUT HARTFORD IN	() Owner	Follow-up NO	Release Date 4/16/23
Owner CASEY MARKETING CO	Purpose: 1. Routine	Summary of Violations: C - NC - R -	
Owner's Address PO Box 3001 ANKENY IA	2. Follow-up	Menu Type (See back of page) 1 - 2 X 3 - 4 - 5 -	
Person in Charge Betty Holland	3. Complaint		
Responsible Person's E-mail wla	4. Pre-Operational		
Certified Food Handler TERRELL BANKS	5. Temporary		
	6. HACCP		
	7. Other (list)		

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
- VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section#	C/N/C	R	Narrative	To Be Corrected By
			No VIOLATIONS AT THIS INSPECTION	

Received by (name and title printed): X Betty Holland, Manager	Inspected by (name and title printed): Frank Carr - FSTO/EUS
Received by (signature): X Betty Holland	Inspected by (signature): Frank Carr FSTO/EUS
cc:	cc: