

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.

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Establishm	()	·M	A RESTAURAWIT	Telephone Number	Date of Inspection (mm/dd/yr)		
Establishm	1.1.0	10.00	mber and street, city, state, ZIP code)	()mAD	6/2	4/25 5	
1226 N WALNUT ST. HARTFORDGAY							
Owner Purpose: Follow-up Release Date							
LUC	10 \$	(A)	Lbav (1. Routine	NO 7-4-25		
Owner's Address AD SO N CRESTONE DR- MARION				Follow-up Complaint	Summary of Violations:		
Parson in Charge					c X	NC4RQ	
Xlre	ne	(N Z	4. Pre-Operational	CODE	PE	
Responsible		E-ma		5. Temporary	Menu Ty	pe (See back of page)	
			N/A	6. HACCP 7. Other (list)	The Part of	V	
Certified Food Handler						3 ^ 4 _ 5 _	
LUGO KENDON							
• 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/NC	R	Narrative			To Be Corrected By	
201	PF		NOTEST KIT FOR QUE	T SAUL FOR	-R	TEMPONES PO	
201				Color	1141	TROAD	
10			USED FOR WAREWA	Sying MARE	MIN	5 PUAT	
			X . See the file of the control o	ar i and include	12.15	SKEMI	
	BAR						
359	PF	OF HANDINK IS SOILED WITH LEDRIS TODAY					
			AND ADDRAPS TO BE USE AS A				
	T ₁		Dump STATION ALSO				
		L 799	HAND WASHING SINK IS TO REMAIN				
			CLEAN AT All TIMES, ONLY FOR HAWDUAShing				
430	430 PF NO PAPER TOWEL AT HAWDSINK						
439	439 PF NO SOAD AT HANDSINK						
THE THE PARTY OF T							
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	Figg	ger t	ment a felium fito flafiume. His pense is not set in flamin so	d Bush of the Section			
H HAIS INSPECTION DINE PER NEW							
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Pensived by (name and title printed): Inspected by (name and title printed): Inspected by (name and title printed):							
Received by (name and time primed).							
Alrene Cruz							
Received by (signature): Inspected by (signature):							
retrene (rus)							
cc:							