

## 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.

ine time i	time for cor	rection	of each violation is specified in the narrative portion of the	ns report.			
	nent Name		Λ	Telephone Number	Date of Inspe (mm/dd/yr)	ection ID#	
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- 10			nber and street, city, state, ZIP cpde) (BARN)	( ) Owner	5/24	122 3	
34	7 So	UT	1 200 GAST HARTFORD COLY				
Owner	04			Purpose:	Follow-up	Release Date	
IND	1715	1	ASSEMBLIES OF GOD	1. Routine		6/3/22	
Owner's A				2. Follow-up	Summary of Violations:		
	54	ME	=	3. Complaint	**		
Person in	Charge	./	1	4. Pre-Operational	C	NC R	
0)05	STIN	K	542	5. Temporary			
Responsib	le Person's	E-mai	1	6. HACCP	Menu Type (See back of page)		
			N/A		\ \v \		
	Food Handl		6 0.1	7. Other (list)	12_X_345		
	NEE	<u></u>	COPY				
• CRITICA	L ITEMS AI	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
• VIOLATI	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	UMMARY OF VIOLATIONS" AN	D IN THE NAI	RRATIVE BELOW AS "R"	
Section#	C/NC	R	Narrative		The same of the sa	To Be Corrected By	
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	CHRISTIAN CONFORDICE er and street, city, state, ZIP code)	Telephone Number 765 Subsandar	Date of Inspection ID #  5124   22 5				
397 SOUTH		Purpose:	Follow-up Release Date				
IND DIST ,	ASSEMBLIES OF GOD	1. Routine	NO 6/3/22				
Owner's Address		2. Follow-up 3. Complaint	Summary of Violations:				
Person in Charge	45	4. Pre-Operational	C NC R				
Responsible Person's E-mail	A	5. Temporary 6. HACCP	Menu Type (See back of page)				
Certified Food Handler	SUESON	7. Other (list)  6 K TO Open	123_X_45				
	TIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"					
VIOLATION(S) REPEATED FR  Section#   C/NC   R	Narrative	UMMARY OF VIOLATIONS" AN	D IN THE NARRATIVE BELOW AS "R"  To Be Corrected By				
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*	* NOTE: EmployEES DERSONAL ITEMS						
CANNOT BE PUT IN COOLERS ON FRONT LINE *							
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