

## 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  LAKE PLACID - THE BARN  Establishment Address (number and street, city, state, ZIE code)  O 397 SOUND DEAST HARRENT City  Owner  LNDHAWA DISTRICT ASSEMBLY of GOD  Owner's Address  8750 PURDLE Rd DNDTANAPOLIS  Person in Charge  JUSTIN KLYS  Responsible Person's E-mail  NA  Certified Food Handler  JUSTIN KLYS  • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS ME				Follow-u Summar C Menu Ty 1 2	P Release Date 6 -7-25  y of Violations: P/PF NC R  vpe (See back of page)  345
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cc: cc: cc:					