



**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 Montpelier Speedway	Telephone Number 937 802 (9605)	Date of Inspection (mm/dd/yr) 7/11/24	ID # 5
Establishment Address (number and street, city, state, ZIP code) 700 SOUTH JEFFERSON ST. MONTPELIER	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. <u>Pre-Operational</u> 5. Temporary 6. HACCP 7. Other (list)	Follow-up YES	Release Date 7/13/24
Owner RYAN SUTTER	Owner's Address 7068 ST. RD 219 COLDWATER OH	Summary of Violations: C 2 NC 7 R 0	
Person in Charge CARRIE SCRIBA	Responsible Person's E-mail N/A	Menu Type (See back of page) 1 2 X 3 4 5	
Certified Food Handler CARRIE SCRIBA EXP 3/9/25			

• 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
430	NC		Facility - Clean walls, ALL equipment NEEDS cleaned OR DISCARDED	Before opening July 13th Event.
298	NC		1) MICROWAVE	
295	NC		2) 3 FANS	
295	NC		3) AQUAFINA WATER Refrigerator	
295	C		4) BOTH popcorn MAKER	
254	NC		5) CALIBRATE FOOD THERMOMETER - clean	
			6) TE	
291	NC		NEED TEST STRIPS for Bleach	
170	NC		NEED TO SET UP 3-BAY WASH, RINSE SANITIZE	
120	C		NEED SICK Employee policy	

Received by (name and title printed):

X **RYAN SUTTER**

Received by (signature):

X

Inspected by (name and title printed):

- EHS

Inspected by (signature):

EHS

cc:

cc:

cc: