

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.

Establishm	ent Name	FRESH MARKET # 925 Telephone Number (mm/dd/yr)	ID#					
NEE	3 _							
Establishment Address (number and street, city, state, ZIP code) 3399 10/26/23 5								
1 []	INU	WALNUT 5T. HARTFORD CITY Purpose: Follow-up R	elease Date					
Owner G	INDIANA LLC T. Routine VES	115123						
Owner's A		lations:						
317	FIW GROSS St. FINDLAY OH 3. Complaint Summary of Vic	5 R /						
Person in C	CR!							
Responsible	-mail 5. Temporary Menu Type (See	back of page)						
•	N/A	~						
	ood Handler	5ND5EM 5KP Aug 24 2028 1_2_3						
• CRITICAL		IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"						
• VIOLATIO	N(S) REPEAT	TED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRA	TIVE BELOW AS "R"					
Section#	C/NC	R Narrative To B	e Corrected By					
		"Deli"						
Z95	С	THE , =0 110 wng food contact Equipment 15	TAGO					
16-1	politic pro a	SOLIED WITH Good debris:	7 6					
W		1) MECHANICAL CAN OPENER & BLADE						
	2) MEAT SUCHES (STORED AS CLEAN)							
		3) SPATULA & LA PLE (STORED AS CLEAN)						
399	USING DUCT TAPE ON 3 BAY SINK to							
		Stop H20 from DRAWING DOWN WALL	P					
191 C 3-TUPES OF COLD SULADS. NOT DATE-MARKED								
WHEN MADE: IE MAC Salad, KRISCOMAR BBQ								
	100	"PRUPUCE"						
173	C	EMPLOYER going to cut A DIRTY WATER METON	Correcte					
		AND I STOPPED him, WITHOUT WASHING GORST	Immediate					
346 NC NO SORD TO WASH HANDS THIS AREA -								
		USERS THE DROP SMUK (When not in USE TO	<u>C</u>					
		WASH Hounds - PER CODE NEODS HANDSME	/					
	10204	"Storage Areas"						
413	NC		D-DAYS					
		WIES NEED FIXED / Replaces						
1	(name and ti	itle printed): [Inspected by (name and title printed): [Dale Gave—Euse	<					
×	MRG)					
Received by	(signature):	Inspected by (standture):						
V	V JOU							
cc:		cc:						



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Owner 66	Idress WA	ss (nur J Ae	RESH MARKET #295 Ther and street, city, state, XIP code) NUT St. HARTFORD CHY ENDIANA INC CROSS St. FINOLAY OH	Telephone Number 765 348 () 3399 Purpose: 1. Routine 2. Follow-up 3. Complaint	Date of Inspection (mm/dd/yr) 10 26 23 5 Follow-up Release Date U15 (Z3) Summary of Violations:		
MAK	ex t		NDSE!/	Pre-Operational Temporary			
Responsible	Person's	E-mai	A))A	6. HACCP	Menu Type (See back of page) 123 \ \times 45		
Certified Fo			ENDSE ! Aug 24 2028	7. Other (list)			
• CRITICAL							
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	To Be Corrected By	
Section#	C/NC	R	CONTINUED FROM	page !		To be corrected by	
			"Stopping Are				
336	C	X	REDEAT FROM INSPECT		128/2	Z TODAY	
500	_ ا	/	111/11 = - //	10,			
			EMPLOYERS BREAK AREA, BLACK HOSE				
		1	LAVING IN MOD BUCKE	1 - 1 - 1 -			
	tow						
PREVENTION DEVICE (BACKSIP							
399	1 200						
0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
ALSO TO FUCLUSE WACK IN FREEZENCE BY							
			EMPLOYUS BROAK ARE				
430							
430 NC CEILING TIZE AR MISSING AND A REPAIR WAS DONE AND IS NOT CLES AND FALLING OUT.						(= (
						1000	
			THE RITCH SOLD				
			E E				
Received by	(name an	d title	printed):	Inspected by (name and title p	rinted):	- JUS	
Received by	(signatur	e):/	White	Inspected by (signature):	h	EUS	
cc:	VV		cc:		cc:		