

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 lin	mit for corr	ection	ı of each violation is specified in the narrative portion of thi	s report.				
Establishm			- 11 -1 -	Telephone Number	Date of In		ID#	
NORTH EAST INDIANA MEAD STAR (169 Establishment)							5	
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Responsible Person's E-mail Me							Menu Type (See back of page)	
6. HACCP							\.	
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