



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.

Form header containing: Establishment Name (PAKA SAK #4), Telephone Number (765 348 1744), Date of Inspection (5/24/22), ID # (5), Establishment Address (201 N WALNUT ST. HARTFORD CITY), Owner (JAY PETROLEUM, INC), Owner's Address (PO Box 1285 portland, IN), Person in Charge (KAREN ROBERTS), Responsible Person's E-mail (N/A), Certified Food Handler (JUSTIN STUFFEL exp 9/17/24), Purpose (1. Routine), Follow-up (NO), Release Date (6/3/22), Summary of Violations (C 1 NC 1 R 0), Menu Type (1 2 X 3 4 5).

- 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"

Table with 4 columns: Section#, C/C, R, Narrative, To Be Corrected By. Contains two entries: 129 C Employee returned to work after leaving for supplies, did not wash hands before starting food prep; 399 NC Walk-in cooler the ceiling has lent & other debris, to include cooling unit.

Received by (name and title printed): Karen Roberts; Inspected by (name and title printed): Blake Carr - FSD - EHS; Received by (signature): Karen S. Roberts; Inspected by (signature): [Signature] FSD - EHS; cc: [blank]

Blackford County Health Department

506 East Van Cleve Street, Hartford City, IN 47348

Phone # 765-348-4317

Fax # 765-348-3041

Operator Inspection Response

State Form 80047 (2-01)

DATE: _____

The following is a response to the inspection report Executed by the Blackford County Health Departments Food Safety Officer/EHS R Dale Carr from the Blackford Health Department on 5/24/22.

Date: Action Taken by Establishment:

5-25-22 Vents & Filters Change

5-24-22 Corrective action to be given to
employee not washing hands

(Please forward this Form to the Blackford County Health Department by mail/fax within 10 days)

Name of respondent: Amanda Spittel Title: Store Manager

Establishment Name: Pak-A-Stik - Papa Johns

Address: 120 - W Walnut HC 47348