

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.

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Establishm	ent Name	_ <	5AK 45	Telephone Number	Date of Inspection (mm/dd/yr) 41/3/22 5		
Establishme	ent Addres	s (µu	imber and street, city, state, ZIP code) NY wasten St. Montpolier	() Owner			
Owner	-		ROLEOM	Purpose:	Follow-up Release Date 4/23/22		
Owner's Ac	ddress	2:	of 1285 portland, The	2. Follow-up 3. Complaint	Summary of Violations:		
Person in C	harge		HAWES	4. Pre-Operational	Pre-Operational C NC R		
Responsible			WIA	5. Temporary 6. HACCP	Menu Type (See back of page) 12 345		
Certified Fo	ood Handle	er N	HAWES ERP 7/14/25	7. Other (list)			
• 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	reconcentrative water (w. Median Control of Control			
310	NC	K	THE HVAC WALL VENT IS		To Be Corrected By TODAY		
			Lint & other Debris,	ALSO HOOD			
2			VENTS NOWO CLEANED		2		
205							
295	C		VEGETABLE SLICER STOR	UD AS CLEAN			
			HAS GOOD DEPRIS ON SL	ICUR / BLADE	7		
			AREA	N.			
			χ				
Received by (name and title printed): Inspected by (name and title printed):							
Received by (signature): Received by (signature): Received by (signature):							
> Shanner Hawes Rolleh F50 / EUS							
ce:			cc:		ce:		

Blackford County Health Department

Fax # 765-348-3041

506 East Van Cleve Street, Hartford City, IN 47348

Phone # 765-348-4317

Operator Inspection Response
State Form 80047 (2-01) DATE: 4/13/22
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 4/13/22
Date: Action Taken by Establishment:
Thoroughly washed and sanitized the
Thoroughly Cleaned the vent beside the oven
(Please forward this Form to the Blackford County Health Department by mail/fax within 10 days)
Name of respondent: Shannon HaweSTitle: Manager
Establishment Name: Pak - A - Sak #5
Address: 204 East Huntington Street