

## 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	nit for cor	rectio	on of each violation is specified in the narrative portion of thi	is report.			
Establishmo			1	Telephone Number	Date of In		ID#
rickli	<u> 5 Lo</u>	UN	GE / NORTHSIDE LANE	7653478016		1	ا سے ا
100000000000000000000000000000000000000	ent Addres	s (nu.	mber and street, city, state, ZIP code)	( )Owner	16/12	2/23	그
1776 INDEPENDENCE PKWY AC  Owner Purpose: Follo							se Date,
7	- D	00	350	1. Routing	6/23/23		
Owner's Ac	ldress			2. Follow-up	Summary of Violations:		
83	23 u	ح ر	3005 WARREN	3. Complaint			
Person in C	harge	la-	4	3. Complaint 4. Pre-Operational  C NC R			
Responsible	Person's	III E-ma	j j	5. Temporary  Menu Type (See back of page)			
responsible	. I CISON S		ĴΙΑ	6. HACCP			
Certified Fo		er	age in lateral form through a good embersel elliger t	7. Other (list)	1 2 3 4 5		
CHR	15 N	la	55 burg	the state of the s			
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				orrected By
295	C		745 Following food conta	ct surfaces	5016	s t	ODAY
			WITH DEBRIS				
	P+	-	1) CAN OPENER (MANUAL) B	LADE & BASE		Sitt	
		ō	2)	18902 MINISTER CONTROL			
295	NC		THE Following non-foo	o contact .	SUR-GA	ŒS	
			Soller with Debris.				L .
		X	1) BEVERAGE AIR 3-DOOR REPRIGERATOR [INSIDE ) OUTSIDE)				
			2) HANDLES OF ALL MICROWANDS.				
			THE SHOP SHARD SHOPPED IN THE RES	The 1977 PRESIDENT PORT OF THE	-11-7	metall	
177	NC		3 BUN'S OF FOOD, 8 Ziple	ock BASS of	Coop	P. IST	
			metal pan win food in	J dan apple	2	वाराहरिक	
			of ice cream. All SEttern	& DiRECTUO	Υ.		
			CLOOR IN WALK IN FREE			111111111111111111111111111111111111111	~
			The state of the s				
431	NC		CAO AT IN 1 THE DISTING A	0.54 15 Sa. 1	FΛ	701	142
731	170		WHY DEBRIS: THIS WAS CLEANED IN DEC. 22/JAN23?				
			NEED CLEANED AGAIN.				
			NOSD CITANED MORNO.	THE PARTY OF THE P	3		
Received by	(name and	l title	printed):	Inspected by (name and title )	printed):		
& millimatt A)ale (arr - EUS							
Received by (signature):  Inspected by (signature):  When E45							
cc: cc:							

## Blackford County Health Department

506 East Van Cleve Street, Hartford City, IN 47348

Phone # 765-348-4317

Phone # 765-348-4317 Fax # 765-348-3041
Operator Inspection Response
State Form 80047 (2-01) DATE:
e week seems on a seeg or any contraction of the
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 $6/12/23$ .
Date: Action Taken by Establishment:
5.12 Can opener Cleaned
Ce-12 - Frey hig wiped down  Ce-26 - Carpets Cleaned
Please forward this Form to the Blackford County Health Department by mail/fax within .0 days)  Name of respondent:  Stablishment Name:
Address: