

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 parrative portion of this report.

The time limit for correction of each violation is specified in the narrative portion of this report.						
Establishment Name				Telephone Number	Date of Inspection ID #	
Richards Restaurant				17055348-5126	(mm/dd/yr)	
Establishment Address (number and street, city, state, ZIP code)				() 3	11/30/22 5	
8265	: Wel	NIL	Hartford City IN 47348	/ / 2 3.604		
Owner	2. WOVIII	JOV)	TIME TO THE TEST	Purpose:	Follow-up Release Date	
Stone	MI	nh	alla Staffard	1. Routine	NO 12/7/22	
Owner's Address					AU ISILI	
801 N. Jefferson Hartford City IN 47348				2. Follow-up	Summary of Violations:	
Person in Charge				3. Complaint	$_{\rm C}$ $_{\rm NC}$ \otimes $_{\rm R}$ \otimes	
Stelle Stofford				4. Pre-Operational	$C \subseteq NC \subseteq R \subseteq$	
3700 3700 010				5. Temporary		
Responsible Person's E-mail				6. HACCP	Menu Type (See back of page)	
N/7				7. Other (list)	<i>J</i>	
Certified Food Handler				7. Other (usi)	123_X_45	
Steve Stafford				, Mi		
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"						
					D IN THE NARRATIVE RELOW AS "D"	
• 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	1 / 1 / 2	To Be Corrected By	
295	C		THE FOLLOWING "FOOD (ontact" Sur	FACES TODAY	
			AND EQUIPMENT ARE SOIL	50 WITH F	2 00	
			Debris		7	
					10 - 11 - 2 - 1)	
		-	1) Appear 7 tubes horn	ing clean U	tensils today	
			2) VEG SUCE WAS STOREY	Dàsckan		
			3) Hobart MUPER SMEZD		Bau))	
			3) - Joban : Migrae Sinea	ECI CHIPOUT		
101		-			1	
191	C		Nooles (cooked) put, w	to individue of	TODAY	
			ZIPIOC BAGS ARENOTI	DATEMARUCE		
			TO INCLUDE LARGE plas	_ ^		
				THE CONTROL	ω- '	
			wire Salad IN.			
					ā.	
		X	NEW GOORNA- Still Ne	eds Courna	*	
					- 3	
	-					
Received by (name and title printed): Inspected by (name and title printed):						
Stare Stafford President RIM (QIN - EUS)						
Received by (signature): Inspected by (signature):						
JIII 1/4/1						
				If N/ew/	100 011,	
cc:	1		cc:	/ //	cc:	
			II.	1	I	

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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: <u>N-30-22</u>
The following is a response to the inspection report Executed by the Blackford County Health Departments Food Safety Officer/EHS <u>R Dale Carr</u> from the Blackford Health Department on 1120122.
Date: Action Taken by Establishment:
Had employees Chean all Eggl Contact Surfaces and Presented a Cleaning schedule of Sa-d Surfaces. All Areas are to be Chemed and prospected after each use
Instructed again that all items had in their original contained must be labeled with product name and Date prepared.
COUING has been purchased and will be Installed ASAP
(Please forward this Form to the Blackford County Health Department by mail/fax within 10 days) Name of respondent: Stelle Steller Title: President Establishment Name: Richards (Kedd Zuc.) Address: 820 S. Walnut St. Hantond City, ZN 47348