

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.

Inc time im	iit ior corr	cello	it of each violation is specified in the harranive portion of th	o report		
Establishment Name 5 PEED WA? # 8068				Telephone Number	Date of Inspection (mm/dd/yr)	
				- 1	6/13/25 5	
Establishme 749	nt Addres	is (nui	mber and street, city, state, ZIP code	()246	6(13/2)	
Purnose: Follow-up Release Date						
SPOEDWAY LLC				1. Routine	NO 6/23/25	
3200 HOCK BERRY Rd TX				2. Follow-up	Summary of Violations:	
3200	200	Ca	DEREY IXI IN	3. Complaint		
Person in Charge				4. Pre-Operational	C Ne R_	
× 5	tepha	mic	e Johnson	5. Temporary	CORE PIPF	
Responsible				and the second s	Menu Type (See back of page)	
			NA	6. HACCP		
Certified Food Handler 7. Other (list)					1 2 × 3 4 5	
JULY 30 NEED COPY TO HD & STORES						
• 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		To Be Corrected By	
214A	PE		Z- CHICKEN SALAD SAND	WICHES (WA	LRKET) Corrected	
	214A PE ZA CHICKEN SALAD SANDWICKES (WARKET) CONVECTED ARE OUTDATED 618/25 By MGR					
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This inspection DONE PER NEW						
CONE RUE TIU LAC 7-60						
Received by (name and title printed): In Specied by (name and title printed):						
* Stephanie Johnson Kalleys						
Received by (signature): Tephanie Johnson Manual Control of the Control of t						
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" Sliphani Cahnon De Meller						
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