



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 with fields: Establishment Name (TACO BELL # 23138), Telephone Number (765 348 1910), Date of Inspection (5/11/22), ID # (5), Establishment Address (1906 N WALNUT ST. HARTFORD), Owner (K-MAC ENTERPRISES INC CITY), Purpose (1. Routine, 3. Complaint), Follow-up (NO), Release Date, Owner's Address (688 E MILLSAP RD STE 200 FAUCETTILLE AR), Person in Charge (X), Responsible Person's E-mail (NIA), Certified Food Handler (STAZIA SAULNIER exp 6-11-25), Summary of Violations (C __ NC __ R __), 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. Narrative contains handwritten text: 'this facility voluntarily closed AND A 2ND INSPECTION DONE ON 5/11/22 @ 3:53 pm OK TO OPEN 4pm 5/11/22'

Received by (name and title printed): Jennifer Powers Day
Inspected by (name and title printed): [Signature] FSD/UIS
Received by (signature): [Signature]
Inspected by (signature): [Signature] FSD/UIS