

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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	te of Inspection/dd/yr)	on ID#	meenn
THIS TASTY DOON (16) Establishment	25 (12)	22 5	
	2-28	.22 3	
14 25 N WALNUT ST. HARTFORD GUY 151 DZ 1010	n I	Dalaga Data	
1	No	Release Date	
		<u> </u>	_
V13698 9005-Z HARTERA CAU	mmary of V	iolations:	
Parson in Charge	C 1	NC R	
Transle Stephenson	1	··c n	
Responsible Person's E-mail Me	enu Type (S	ee back of page)	
N/A 6. HACCP		51	
Certified Food Handler 7. Other (list)	2	3 × 4 5	-0
TENNULLE Stephenson			
• 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 NARR	ATIVE BELOW AS "F	₹"
Section# C/NC R Narrative	То	Be Corrected By	
OK to open			-
W.C. b. b. l. d a.		1	
* Fix handsmk hot 420 SIDE		10 Days	
* CAUK 3-BAYSINK		De 17 g 2210 - THAT SHE	
* TRM finismoD			
yo vent to outside in Bathroom			
Received by (name and title printed): Inspected by (name and title printed):	d):		
	=410		
Parajued by (signature):			
Received by (signature):	5 D		
	590		
» Mulling Co: Rading For			