RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

State Form 48669 (R2/2-05)
SDH Form 51-0001

Brown County Health Department
P.O. Box 281
Nashville, IN 47448

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.

Establishment Name Big Woods Brewing Co	**Telephone Number** 812-988-6000 ( ) Owner	**Date of Inspection** (*mm/dd/yr*) 9-28-12	**ID #**
Establishment Address (*number and street, city, state, ZIP code*) 50 Molly lane			
Owner Jeff McCabe/Ed Ryan/Tim O'Brian	**Purpose:** 1. Routine ✓	**Follow-up** yes	**Release Date** 10-8-12
Owner's Address P O Box 100 Nashville	2. Follow-up ☐	**Summary of Violations:**	
Person in Charge Carol Gore	3. Complaint ☐ 4. Pre-Operational ☐	C 2 NC 3 R 1	
Responsible Person's E-mail	5. Temporary ☐ 6. HACCP ☐	**Menu Type** *(See back of page)*	
Certified Food Handler Emily Stone, Chris Taylor	7. Other (*list*) _____	1 ☐ 2 ☐ 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"

Section#	C/NC	R	Narrative	To Be Corrected By
187	c		weet chili sauce and bar-b-que sauce being stored open on she	now 9-28-12
			without refrigeration	
415	c		Fly present (1)	now 9-28-12
174	nc		Label rice container and other bulk containers	now 9-28-12
	nc		Label squeeze bottles with contents	now 9-28-12
250	nc		Store cleaned pans and containers upside down to prevent	now 9-28-12
			contamination	
345b	nc	x	Water line on handwashing sink is not permitted by code	Oct 15 2012

Received by (*name and title printed*): Carol Gore	Inspected by (*name and title printed*): Jennifer Rekers, EHS
Received by (*signature*): signature on file on paper copy	Inspected by (*signature*):

cc:	cc:	cc: