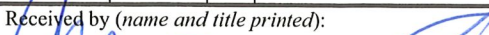




Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Kobo Kitchen	Telephone Number () Establishment	Date of Inspection (mm/dd/yr) 7/03/25	ID # 27
Establishment Address (number and street, city, state, ZIP code) 13016 W. Spencer Ave	() Owner		
Owner Rob Smith	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) _____	Follow-up	Release Date
Owner's Address 5amp		Summary of Violations: P ____ PC ____ E ____	
Person in Charge Rob Smith		Menu Type (See back of page) 1____ 2____ 3 <input checked="" type="checkbox"/> 4____ 5____	
Responsible Person's E-mail			
Certified Food Handler Rob Smith			

- 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"

[illegible]

Received by (name and title printed): 		Inspected by (name and title printed): Kyle Kellogg / Food Inspector	
Received by (signature): 		Inspected by (signature): 	
cc:	cc:	cc:	