

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

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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Establishm	ent Name	Tree Hagalos	Telephone Number (145) 330-(500)	Date of Inspection (mm/dd/yr) ID #
Establishm	ent Addres	(number and street, city, state, ZIP code)	757321-5742	6/24/24 5
1810	5 N	Walnut HC		Fellow and Delega Date
Owner	Tr	00	Purpose:	Follow-up Release Date 6 38/24
Owner's A	ddressy	1 Dk . 11		Summary of Violations:
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Person in C	Charge GMd 191	A HESS	4. Pre-Operational	C NC R
Responsibl	John Duri	E-mail 1 / 1	5. Temporary	Menu Type (See back of page)
	, LHC 1818	SON DIFF. MANUSCRIPT STORY LONG.	6. HACCP 7. Other (list)	1 2 3 4 5
Certified Food Handler N A 2 3 4				
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"				
• VIOLATIO	ON(S) REPE	ATED FROM PREVIOUS INSPECTIONS ARE DEN	OTED IN THE "SUMMARY OF VIOLATIONS" AN	
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