



RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

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

Cass County Health Department (574)753-7763

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 header section containing: Establishment Name (American Legion Post #60), Telephone Number ((574) 753-6916), Date of Inspection (11/2/09), ID # (98073), Owner (American Legion), Purpose (1. Routine), Follow-up (No), Release Date (10 days), Person in Charge (Mary Pearson), Certified Food Handler (John Randle).

- 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/NC, R, Narrative, To Be Corrected By. Contains 3 rows of violations: 129 C (hand washing), 257 NC (temperature measuring devices), 392 NC (waste/refuse receptacles).

Signature section containing: Received by (Mary Pearson), Inspected by (Cory Wolford B.A., EHS), and cc: fields.