



RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

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

Cass County Health Dept. (574) 753-7760

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 with fields: Establishment Name (Bolin's Donuts, Inc.), Telephone Number (722-1044), Date of Inspection (1-13-2010), ID # (04021), Establishment Address (1401 E. Broadway, Logansport, IN 46947), Owner (Shawn & Kim McLochlin), Purpose (1. Routine), Follow-up (No), Release Date (10 days), Owner's Address (as Above), Person in Charge (Kim McLochlin), Responsible Person's E-mail (N/A), Certified Food Handler (N/A), Summary of Violations (C X, NC X, R X), Menu Type (1, 2 X, 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"

Table with columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: No Violations Noted.

Received by (name and title printed): Kim McLochlin; Inspected by (name and title printed): Cory Wolford, BA, EHS; Received by (signature): Kim McLochlin; Inspected by (signature): Cory Wolford; cc: fields.