Retail Food Establishment



Inspection Report State Form 48669 (R2/2-05) SDH From 51-0001 Hendricks County Health Department Telephone (317) 745-9217 Fax (317) 745-9218

Based on the 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 The Market at Swayzee					Telephone Number	Date of Inspection 08/27/2024	ID#	
Establishment Address						01:00 pm	2457	
Owner James Cruea					Purpose X Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow Up NO	Released 09/07/2024	
Owner's Address						Menu Type 1 <u>X</u> 2 3 4 5		
Person in Charge James Cruea								
Responsible Person's Email								
Certified Food Handler Allison Cruea ServSafe			Safe	Exp. 03/25/2029				
CRITICAL ITEMS ARE IDENT	IFIED IN THE CHE	CKLIST A	ND NARRATIVE COLUMN	IS MARKED "C"				
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"								
Section #	C/NC	R	Narrative To Be Corrected By					
No violations noted at time of inspection					n. Permit issued.			
0								
Summary of Violations C NC R _0								
Received by (name and title printed):					Inspected by (name and title printed):			
Person in charge					MATT WILLIAMS			
Received by (signature):					Inspected by (signature):			
cc: cc:						cc:		