RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

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

WELLS COUNTY HEALTH DEPT.
223 W. Washington, Suite 202
BLUFFTON, IN 46714-1955
(260) 824-6489

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 ARBY'S ROAST BEEF	**Telephone Number** (260) 824-5580	**Date of Inspection** *(mm/dd/yr)* 1/12/11	**ID #**
Establishment Address *(number and street, city, state, ZIP code)* 995 N. MAIN ST. BLUFFTON IN 46714	( ) Owner		
Owner AES RESTAURANTS	**Purpose:** 1. Routine (circled) 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other *(list)*	**Follow-up**	**Release Date** 1/12/11
Owner's Address 4000 W 106th ST. STE 160-311 CARMEL, IN		**Summary of Violations:** C 2 NC 0 R 0	
Person in Charge DAVE KLEINKNIGHT			
Responsible Person's E-mail		**Menu Type** *(See back of page)* 1 2 ✓ 3 4 5	
Certified Food Handler DAVE KLEINKNIGHT			

- 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"

Section#	C/NC	R	Narrative	To Be Corrected By
187	C		SLICED TURKEY IN THE PULL OUT COOLER DRAWERS MEASURED 45°F.	TODAY
439	C		A BOTTLE OF SPIC + SPAN WAS LAYING ON TOP OF SALT & PEPPER PACKETS IN THE DRIVE THRU AREA; A BOTTLE OF SPIC + SPAN WAS STORED WITH TO-GO BAGS IN THE DRIVE THRU AREA	TODAY CORRECTED

Received by (*name and title printed*): Dave KleinKnight GM	Inspected by (*name and title printed*): JENNIFER M COLEMAN EHS
Received by (*signature*): Dave Kleinknight	Inspected by (*signature*): Jennifer M Coleman
cc:	cc:
cc:	