



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: Bluffton Inn + Suites; Telephone Number: (260) 824-5553; Date of Inspection: 11/17/10; ID #: ; Establishment Address: 100 Charles Deam Court Bluffton IN 46714; Owner: Doug Durr; Purpose: 1. Routine; Follow-up: ; Release Date: 11/27/10; Owner's Address: 2703 E 250 N Bluffton IN 46714; Person in Charge: MELANIE DURR; Summary of Violations: C 0 NC 0 R 0; Menu Type: 1 2 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. Narrative contains 'NO VIOLATIONS'.

Received by (name and title printed): Melanie Durr; Inspected by (name and title printed): JENNIFER M COLEMAN EHS; Received by (signature): Melanie Durr; Inspected by (signature): Jennifer M Coleman; cc: ; cc: ; cc: ;