



**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  
(200) 624-6489

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 <b>CO CO CHINA BUFFET</b>	Telephone Number (260) Establishment <b>824-0838</b> (260) Owner <b>827-0858</b>	Date of Inspection (mm/dd/yr) <b>5/19/10</b>	ID #
Establishment Address (number and street, city, state, ZIP code) <b>2020 N. MAIN BLUFFTON IN 46714</b>	Owner <b>XIU WEN DONG</b>	Follow-up	Release Date <b>5/19/10</b>
Owner's Address <b>511 KNIGHTS DR. BLUFFTON IN 46714</b>	Purpose: 1. Routine <b>2. Follow-up</b> 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Summary of Violations: <b>C 1 NC R 1</b>	
Person in Charge <b>XIU WEN DONG</b>	Responsible Person's E-mail	Menu Type (See back of page) <b>1 2 3 <input checked="" type="checkbox"/> 4 5</b>	
Certified Food Handler <b>XIU WEN DONG</b>	<ul style="list-style-type: none"> <li>• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"</li> <li>• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"</li> </ul>		

Section#	C/NC	R	Narrative	To Be Corrected By
187	C	<input checked="" type="checkbox"/>	ON THE BUFFET TABLE, FRIED FISH MEASURED 102°F, BACON CRAB WRAPS MEASURED 93°F, AND ON THE COLD BAR, IMMITATION CRAB MEASURED 60°F	TODAY CORRECTED
			MARKED IMPROVEMENT ALL OTHER PREVIOUS VIOLATIONS HAVE BEEN CORRECTED	

Received by (name and title printed): <b>Xiu Wen Dong</b>	Inspected by (name and title printed): <b>JENNIFER M COLEMAN EHS</b>
Received by (signature): <i>Xiu Wen Dong</i>	Inspected by (signature): <i>Jennifer M Coleman</i>
cc: <b>X</b>	cc: