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 SUBWAY # 375006	**Telephone Number** (260) Establishment 824-0115 (260) Owner 824-0479	**Date of Inspection** (*mm/dd/yr*) 3/30/10	**ID #**
Establishment Address (*number and street, city, state, ZIP code*) 2100 N. MAIN ST. BLUFFTON IN 46714			
Owner VISION INVESTMENT GROUP, INC.	**Purpose:** 1. Routine (circled) 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (*list*)	**Follow-up**	**Release Date** 3/30/10
Owner's Address P.O. BOX 415 BLUFFTON, IN 46714		**Summary of Violations:** C 2 NC 2 R 0	
Person in Charge MARIA HUNT			
Responsible Person's E-mail		**Menu Type** (*See back of page*) 1 2 ✓ 3 4 5	
Certified Food Handler MARIA HUNT			

- 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
136	C		AN OPEN EMPLOYEE DRINK WAS STORED ON A RACK ABOVE BREAD PAN LINERS	TODAY *CORRECTED
177	NC		ONE GALLON CONTAINER OF RED HOT SAUCE WAS STORED ON THE FLOOR IN THE PREP AREA.	TODAY *CORRECTED
244	NC		A BOX OF SINGLE SERVICE CUPS WAS STORED ON THE FLOOR BY THE HANDSINK	TODAY *CORRECTED
344 JW	C NC		A BAG OF FROZEN BAGELS WAS STORED IN THE HANDWASHING SINK TO THAW.	TODAY *CORRECTED

Received by (*name and title printed*): Maria Hunt Manager	Inspected by (*name and title printed*): JENNIFER M. COLEMAN EHS
Received by (*signature*): Maria Hunt	Inspected by (*signature*): Jennifer M Coleman
cc:	cc:
cc:	