



RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

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

WELLS COUNTY HEALTH DEPT. 223 W. WASHINGTON ST. BLUFFTON IN 46714

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: RIMEKE GOLF, LLC (with crossed-out name); Telephone Number: 824-2728; Date of Inspection: 4/6/10; Owner: RON COVINGTON; Address: 2330 E 250N BLUFFTON IN 46714; Person in Charge: DAVE EGTS; Certified Food Handler: JANE INEL; Purpose: Routine.

- 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 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Contains handwritten notes: 'NO VIOLATIONS NOTED' and 'NOTE: HANDWASHING SINK MAY ONLY BE USED FOR HANDWASHING; NOT FOR WASHING DISHES...'

Received by (name and title printed): Karen A Reed; Inspected by (name and title printed): JENNIFER COLONAU, ETS; Received by (signature): [Signature]; Inspected by (signature): [Signature]