



**RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT**

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

ADAMS CO. HEALTH DEPT.
313 JEFFERSON ST.
DECATUR, IN 46733
(260-724-5326)

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 <i>Fairway Deli</i> | Telephone Number (<input checked="" type="checkbox"/>) Establishment <i>7728</i> () Office <i>2444</i> | Date of Inspection (mm/dd/yr) <i>1-11-2010</i> | ID # |
| Establishment Address (number and street, city, state, ZIP code) <i>348 N. 13th St. Decatur</i> | Owner <i>Kyle Gerber</i> | Follow-up | Release Date |
| Owner's Address | Purpose: <input checked="" type="checkbox"/> Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) | Summary of Violations: <i>C 2 NC 8 R</i> | |
| Person in Charge <i>Kristi Johnson</i> | Responsible Person's E-mail | Menu Type (See back of page) <i>1 2 <input checked="" type="checkbox"/> 3 4 5</i> | |
| Certified Food Handler <i>Kyle Gerber</i> | | | |

- 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 |
|----------------|---------------|---|---|--------------------|
| 298 | NC | | Micro Wave in Pizza prep area is very soiled w/ cast food spillage | 1 day |
| 432 | a-3 NC | | Mop Bucket Has very soiled water in same needs to be emptied in mop sink ASAP | 1-day |
| 433 | NC | | Mop in mop sink needs to dry in inverted position for proper drying | 1-day |
| 295 | NC | | Cutting Board (RT) | |
| 177 | NC | | Case of Smoothie Yogurt observed on floor of Walk In Freezer | 1-day |
| 410 | NC | | Light Bulbs (1) ea. is burned out in both Walk in Cooler + Walk In Freezer | 1-day |
| 295 | -NC | | Bean town Cappuccino machine is soiled w/ product spillage. | 1-day |
| 256 | NA | | No Thermometer in Milk Cooler | 1 day |
| 243 | -B NC | | Single serve plastic silverware Best + safest if they are individually wrapped Highly Recommended By State Health Dept. | 1-day |

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| Received by (name and title printed): <i>Kaleigh Westergren</i> | Inspected by (name and title printed): <i>Richard Thompson</i> |
| Received by (signature): | Inspected by (signature): |
| cc: | cc: |