



RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

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

LCHD
755.3655

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>Hobart High School</i>	Telephone Number <i>(719) 711 8521</i>	Date of Inspection (mm/dd/yr) <i>10-7-19</i>	ID # <i>NFP-19</i>
Establishment Address (number and street, city, state, ZIP code) <i>2211 E. 12th St Hobart IN 46342</i>			
Owner <i>School City of Hobart</i>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) _____	Follow-up	Release Date
Owner's Address		Summary of Violations: <i>C 0 NC 0 R 0</i>	
Person in Charge <i>Susan Guerrero</i>		Menu Type (See back of page)	
Responsible Person's E-mail		1 ___ 2 ___ 3 <u> 3 </u> 4 ___ 5 ___	
Certified Food Handler <i>Susan Guerrero 6/22</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
			<i>No violations at this time</i>	

Received by (name and title printed) <i>Susan Guerrero</i>	Inspected by (name and title printed) <i>K Fife-Santurion</i>
Received by (signature) <i>Susan Guerrero</i>	Inspected by (signature) <i>Kore Fife</i>
cc	cc