



**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>Veterans Elementary School/At Mundell</i>	Telephone Number <i>219-942-5614</i> <i>() X 8609</i>	Date of Inspection (mm/dd/yr) <i>2-8-21</i>	ID # <i>NFP-21</i>
Establishment Address (number and street, city, state, ZIP code) <i>52 N. Wisconsin St. Hobart, IN 46342</i>		Follow-up	Release Date
Owner <i>School City of Hobart</i>	Purpose: <input checked="" type="radio"/> 1. Routine <input type="radio"/> 2. Follow-up <input type="radio"/> 3. Complaint <input type="radio"/> 4. Pre-Operational <input type="radio"/> 5. Temporary <input type="radio"/> 6. HACCP <input type="radio"/> 7. Other (list)	Summary of Violations: <i>C 0 NC 0 R 0</i>	
Owner's Address <i>200 S. Hobart Rd. Hobart IN 46342</i>		Menu Type (See back of page) <i>1 2 3 4 5</i>	
Person in Charge <i>Nancy Smith</i>			
Responsible Person's E-mail			
Certified Food Handler <i>Tracy Coslet</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	N	R	Narrative	To Be Corrected By
				<i>Educational Institution has developed a Covid Response Plan to implement measures and institute safeguards to ensure a safe environment for all students, faculty, staff, vendors, contractors, volunteers, and visitors regardless of age.</i>	
				<i>Establishment following Executive Order 21-22 third continuation of County-based measures and restrictions based on the impact and spread of Covid-19 virus</i>	
				<i>NO Violations at this time</i>	

Received by (name and title printed): <i>Tracy Coslet mgr</i>	Inspected by (name and title printed): <i>K. Fife Sanitarian</i>
Received by (signature): <i>Tracy Coslet</i>	Inspected by (signature): <i>Karen Fife</i>
cc:	cc: