



RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

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

FCHD 125 E. 9th Street Rockport. 574-223-7466

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.

Form with fields: Establishment Name (Caston School), Telephone Number (857-3025), Date of Inspection (4-13-21), ID # (74), Owner (Caston School Corporation), Purpose (1. Routine), Summary of Violations (C 0 NC 0 R 0), Menu Type (1 2 3 X 4 5).

- 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 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Narrative text includes: Very Clean, organized, All temps and sanitizer was good, All units temper well all closures secured.

Signature section with fields: Received by (name and title printed), Inspected by (name and title printed), Received by (signature), Inspected by (signature), cc: