## State of Ohio **Standard Inspection Report**

Authori	ty: Cr	napters 3/1/ an	d 3715 Ohio Rev	ised Code	е	
			Check one	License number Date		Date
Address Address RFE				Catanan /D	<i>9</i> 0	9.10.10
238 W 3rd Street, Greenville				Category/Descriptive		
License holder Inspection time (min)				Travel time (min) Other		
Rev John White 50min			0			
I IVDE OF VISIT ICHECK)			Follow-up date (if required)		Sample date/result (if required)	
Standard						
3717-1 OAC Violation Checked						
Management and Personnel				Poiso	ous or Toxic Ma	terials
2.1 Employee health	4.4 Maintenance and operation			7.0 Labeling and identification		
2.2 Personal cleanliness	4.5		7	7.1 Operational supplies and applications		
2.3 Hygienic practices	4.6			.2 Storage and dis	play separation	
2.4 Supervision	4.7 Laundering			- Specia	Special Requirements	
Food	4.8 Protection of clean items			-	8.0 Fresh juice production	
	Water,	Plumbing, and Waste		8		dispensing freezers
3.1 Sources, specification and original containers	5.0	Water		8	.2 Custom process	ing
3.2 Protection from contamination after receiving	5.1 Plumbing system			8	.3 Bulk water mac	hine criteria
3.3 Destruction of organisms	5.2 Mobile water tanks			. 8		rice preparation criteria
3.4 Limitation of growth of organisms 3.5 Identity, presentation, on premises labeling	5.3 Sewage, other liquid waste and rainwater					nd equipment specifications
3.6 Discarding or reconditioning unsafe, adulterated	5.4 Refuse, recyclables, and returnables				20 Existing facilities and equipment	
3.7 Special requirements for highly susceptible populations  Physical Facilities				Administrative		
	6.0 Materials for construction and repair			901:3-4 DAC		
Equipment, Utensils and Linens	6.1 Design, construction and installation			3701-21 OAC		
4.0 Materials for construction and repair 4.1 Design and construction	6.2 Numbers and capacities					•
4.1 Design and consideration  4.2 Numbers and capacities	6.3 Location and placement			,		Auto-
4.2 Numbers and capacities 6.4 Maintenance and operation						
Violation(s)/Comment(s)						
antisfactory all 1						
SUTISTICTORY at the time of inspection.						
Milk 55°						
Inspected by ( R.S./SIT #) Licensor						
Mulaychuretena 16-4029 Parke Co Health Dept.						
Received by Title Phone						
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