



RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

Howard County Health Department
120 E. Mulberry St., Room 210 Kokomo, IN 46901
(765) 456-2403 Fax: (765) 456-2417

Based on an inspection this day, the item(s) noted below identify violations(s) 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: HAINLEN ORCHARD Establishment Phone: Inspection Date: 10/04/2023
Establishment Address: 1250 E 5588 N CONVERSE, IN 46919
Owner(s) Name: CLAYTON SLAUGHTER Purpose: Routine
Owner's Email: clay@slaughterorchard.com
Certified Food Manager: Summary of Violations: C: 0 NC: 0 R: 0
Certificate Expiration Date:

- * CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
* NON-CRITICAL ITEMS ARE IDENTIFIED IN THE NARRATIVE COLUMNS MARKED "NC"
* REPEAT ITEMS ARE IDENTIFIED IN THE NARRATIVE COLUMNS MARKED "R"

Table with 5 columns: Section #, Inspector Comments/Legal Description, C, NC, R, Correct By. Content includes: General Comments: Permit is POSTED, No violations observed, Establishment has the option to make a written response to the inspection within ten days.

Follow-up Required: No

Received by Clayton Slaughter, Owner (print name and title)

Inspected by Janelle Hunley (print name and title)

Received by (signature)

Inspected By (signature)