

FOOD PROCESSING PLANT INSPECTIONAL OBSERVATIONS

**Alabama Department of Public Health
Bureau of Inspection
Food Sanitation Division**

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| Name of individual to whom report issued To: <i>Ms. Carolyn Suber</i> | Date of inspection <i>3/29/10</i> | C.F. Number |
| Title of individual <i>Quality Control Manager</i> | Type of Establishment Inspected (i.e., bakery, cannery) | |
| Firm Name <i>Blue Bell</i> | Name of Firm, Branch or Unit Inspected <i>Same</i> | |
| Street Address <i>2/23 North Norton Ave</i> | Street Address of Premises Inspected <i>Same</i> | |
| City and State <i>Sylacauga, AL 35150</i> | City and State <i>Same</i> | |

During an inspection of your firm (I) (We) observed:

- 1) equipment stored on floor (valve + end caps)
- 2) repair ceiling in container forming room.

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| Employee(s) signature <i>Michael Chinkscates</i> | Employee(s) Name and Title (print or type) <i>Michael Chinkscates Environmentalist</i> |
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