



**RETAIL FOOD ESTABLISHMENT  
INSPECTION REPORT**  
State Form 48669 (R2/2-05)  
SDH Form 51-0001

**GRANT COUNTY HEALTH DEPT.  
FOOD DIVISION  
401 SOUTH ADAMS STREET  
MARION, IN 46953**

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 <b>YEAKLE SPORTS BAR</b>		Telephone Number <b>(765) 662-3277</b>	Date of Inspection (mm/dd/yr) <b>8-7-17</b>	ID # <b>27</b>
Establishment Address (number and street, city, state, ZIP code) <b>3022 So Washington St - MARION</b>		( ) Owner		
Owner <b>Wesley Yeakle</b>	Purpose: <b>1. Routine</b>	Follow-up <b>NO</b>	Release Date <b>8-17-17</b>	
Owner's Address <b>3240 So. Overman St. - MARION</b>	2. Follow-up	Summary of Violations: <b>C 3 NC 1 R 1</b>		
Person in Charge <b>MICAH YEAKLE</b>	3. Complaint	Menu Type (See back of page)		
Responsible Person's E-mail <b>N/A</b>	4. Pre-Operational	1 <u>  </u> 2 <u>  </u> 3 <input checked="" type="checkbox"/> 4 <u>  </u> 5 <u>  </u>		
Certified Food Handler <b>MARY KOBINS</b>	5. Temporary			
	6. HACCP			
	7. Other (list)			

- 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/NC	R	Narrative	To Be Corrected By
245	NC		soiled wiping cloths (4-1-A) hanging on BAR	TODAY
204	C		No sanitizer made for soiled wiping cloths	TODAY
345	C		HANDSINK HAS A Frozen Turkey, thawing in HANDSINK.	TODAY
191	C	X	IN REFRIGERATOR & WALK-IN COOLER SEVERAL FOOD ITEMS NOT DATE MARKED	TODAY

Received by (name and title printed): <b>Micah Yeakle</b>	Inspected by (name and title printed): <b>R. K. ... - KCS</b>
Received by (signature): <i>[Signature]</i>	Inspected by (signature): <i>[Signature]</i> KSIU
cc:	cc: