



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: Lakeview Christian School; Telephone Number: (765) 677-4264; Date of Inspection: 10-24-18; ID #: 27; Purpose: 1. Routine; Follow-up: 10 days; Person in Charge: Tina Lodge; Certified Food Handler: Tina Lodge Exp 2022

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 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: Section# -, C/NC, R, Narrative: Ceiling tiles havent been replaced at this time - however the ceiling roof has been replaced and tiles will be replaced soon.



Received by (name and title printed): Tina Lodge; Inspected by (name and title printed): DEAN SMALL FSD; Received by (signature): Tina Lodge; Inspected by (signature): Dean Small FSD