

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

## GRANT COUNTY HEALTH DEPT. HOOD DIVISION 401 SOUTH ADAMS STREET MARION, 114 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 lin	nit for cor	rection of each violation is specified in the narrative portion of thi	is report.							
Establishm	ent Name RIC =	Inc. DBa McDonalds (NORth)	Telephone Number	Telephone Number  (No.5) Work - 51.4.9  Daty of Inspec						
. 1011		ss (number and street, city, state, ZIP code)	( ) Owner		1 11					
1225		Baldwin Ave Marion 46953	( ) Owner	7.11.1	4 27					
Owner			Purpose:	Follow-up	Release Date					
KICK	Kei	chen bach.	1. Routine	NO 7.21.14						
Owner's A	11 /		2. Follow-up	Summary of Violations:						
618	N. I	Meridian St., Portland In 47371	3. Complaint	1 0 1						
Person in C	Charge	,	4. Pre-Operational	c <u>4</u>	$NC 2 R_{\perp}$					
Robe			5. Temporary	M / T	(6. 1. 1. 6)					
Responsible	e Person's	E-mail	6. НАССР	Menu Type (See back of page)						
Certified F	ood Handl	MA	7. Other (list)	1 21	3 4 5					
Robert	1									
• 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		1	Γο Be Corrected By					
295	C	If The interior of ice machine h	as rust residue	00	TODAY					
		the shield below the screw								
	2 - 1	include utensils and equip		UHh						
鋼		form debris are being stored								
081		a rack next to 3 BAY SI								
173	1			noler .	TODAY					
245	1/0		Ton Oil							
247	NC		the top of heverage air freezer/cooler. Also,							
	151	1 wiping cloth laying next to sanitizer								
		bottle in seating area (soiled wiping cloth)								
		Done in Seeming are. (Soi	acr wiping cross		-					
415	(4	Flies too numerous to c	ount in Kitche	0	TODAY					
11.5		and oustomer senting as	and customer seating area.							
		and costonal starting to			1					
129	C	Employee observed putting	a on cloan al	DVOS	T0024					
10.1			Rands		1004					
304	NC			na	TODAY					
00 /	110	were store wet on a rack	Dishes, utensils, + equipment after cleaning + sanitizing							
	1	mmediately								
Received by (name and title printed):    MMINITED     Inspected by (name and title printed):										
Robert W. Embres General Mar Kathuldlickfully / 4/ le lan -150										
Received by (signature):										
Jul Hulfeld / Hab Ju 1350										
9		cc:	101	cc:	O*					



## **Grant County Health Department**

Phone 765-651-	51-2401 ext 111 -2419					· .
			Date:	-11-14		-
Grant Cou	inty Health De Adams Street		-2419 (Fax)			
		ESPONSE TO IL OR BY FAX				
representati	ing is my respo ve on 7-11	nse to the inspe	ction report p	orepared by yo	our agency	<b>'s</b> ,
DATE	ACTION TA	KEN	•			:
7-11-14	295-6-	y lec'm	reture clea	wedt San	afred	
		coached	enployees	on corre	r dish	procedure
7-11-14	(736	noved equ	•		•	
7-11-14	245 NC			put who		found souche
7-11-14	#15 C	,	•	est Pest		·
7-11-14	1296	Employee		<b>▲</b>	Glove	braceopper
7-11-14	304 NC	<u>ukusils 4</u>	طنس طا	ارمو مع هي	+ any	
Name R	Sourt W.S	ukre	Title <u>C</u>	renewe 1	Manage	!
Establishme	nt McDo	nolds			<u> </u>	
Address (2	.25- N.	Bellow	Ave.			. ,
	•	L ************************************	. •			

Attach additional sheets as needed.