



**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 <i>R.P.'s Pub Inc</i>	Telephone Number <i>765 668 7730</i>	Date of Inspection <i>11-1-18</i>	ID # <i>27</i>
Establishment Address <i>3202 S. Washington St</i>	Owner <i>Rogelio Pena</i>	Follow-up <i>-</i>	Release Date <i>10 days</i>
Owner's Address <i>SAME</i>	Purpose: <i>1. Routine</i>	Summary of Violations: <i>C 2 NC 1 R 1</i>	
Person In Charge <i>Roy Pena</i>	2. Follow-up	Menu Type (See back of page)	
Responsible Person's E-mail <i>N/A</i>	3. Complaint	<i>1 2 3 4 5</i>	
Certified Food Handler	4. Pre-Operational		
	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
<i>178</i>	<i>C</i>	<i>X</i>	<i>This facility is lacking a copy of this time. If an employee has one they are to bring a copy to office</i>	<i>Today</i>
<i>295</i>	<i>NC</i>		<i>Inside &amp; outside belts Nacho machine soiled w/ old dried cheese</i>	<i>Today</i>
<i>191</i>	<i>C</i>		<i>Date marking on items inside refrigerator. Dates and labels as to items</i>	<i>Today</i>

Received by (name and title printed): <i>Rogelio G. Pena</i>	Inspected by (name and title printed): <i>Dawn Small</i>
Received by (signature): <i>Rogelio G. Pena</i>	Inspected by (signature): <i>Dawn Small</i>
cc:	cc: