

## 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.

		ection of each violation is specified in the natrative portion of the	*		
Establishme	ent Name	418	Telephone Number  Establishment	hate of Inspection ID #	
Fetablishma	ent Address	(number and street, city, state, ZIP code)	Jole Pownes 224	12 12 10 77	
200	7 S	Western Ave Mcirior		12-12-18 27	
Owner	) Tu	limma	Purpose:	Follow-up Release Date	
Owner's Ac					
		CL = 10 01 C	2. Follow-up	Summary of Violations:	
484		Stop 18 RJ GREENWOOD IN	3. Complaint		
Person in C		Barries	4. Pre-Operational	C NC R	
Responsible		-mail	≠ 5. Temporary	Menu Type (See back of page)	
U		NI A	6. HACCP	1/	
Certified Fo	\ \ \ \		7. Other ( <i>list</i> )	1 2 3 4 5	
• 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#	Wildeling and the second and the sec	R Narrative	training the development of the second state of the second state of the second	To Be Corrected By	
	(	Class de la Charle	Paralit I	Tel 10.44	
431	MC	Plooning through out store to Netal RACKS! Also to inch	include on su	- 100 Mg	
		Netw RHERS! Also to inch	he walkin		
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141		1- 6 Friendly Francis y	oguet on she	ex MRg	
		with USB by date 12-6-18	, 1	Removed	
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namen na	<u> </u>		T 4-31 ( J		
Received by (name and title printed):  Inspected by (name and title printed):  Received by (signature):  Inspected by (signature)					
Received by (signature):  Inspected by (signature):					
Manual of State of St					
	<u>~</u>	Samuel Samuel	IN HWYNLL		
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1					

Operator Inspection Response State Form 80047 (2-01)

Phone 765-651-2401 765-651-2419

**Grant County Health Department** 401 S. Adams St. Marion, IN. 46953

The following is a response to the inspection report executed by the Grant Co. Health Department Food Safety Officer Dale Carr / Dean Small from the Grant Co. Health Department on 12/218...

PATE:	Removed ) Egypt from Sales floor
12/13/16	Darlos E Son 116 Constructor Contract C
12-113/18	LA CORMAN CE ENDOTES FOR GOD PORWED ICE GUITO UP.
12/13/18	Deaton & Sons 1/1 c Come Out, fixed most bless door, Led Operation of Freezier fors, and reduced ice fuild up. Tables under ALDI Finds Cleaned.
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-75	
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IDI EASE E	ORWARD THIS FORM TO THE GRANT COUNTY HEALTH DEPARTMENT BY MAIL OR FAX WITHIN 10 DAYS).

Name of Respondent:

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