

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.

| FAN do S (mm/dd | |
|--|--|
| FAN de o S | Inspection ID # |
| $\phi(t)$ | |
| Establishment Address (number and street, city, state, ZIP code) 4950 Bernen B/U | 18.29 27 |
| Owner Midwest Rest 1. Routine Purpose: Follow | -up Release Date |
| | ary of Violations: |
| 3. Complaint | 12 |
| Person in Charge 4. Pre-Operational | L NC R |
| | Гуре <i>(See back of page)</i> |
| 6. HACCP | 4 |
| Certified Food Handler Rolley up 3.2029 7. Other (list) 1_ | 2 3 4 5 |
| • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" | en den en e |
| • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE | E NARRATIVE BELOW AS "R" |
| Section# C/NC R Narrative | To Be Corrected By |
| 138 NC Employees prepping / Cooking without | , |
| hus restraint And | Parce L. L |
| | - Con Ogc |
| | |
| (101 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| 431 NC side of med under equipment on floor- | |
| feed & grense | |
| Also liquid popo on floor in Stock (voon | |
| 11.33 1 76.57 707 01. 11.007 1. 37.00 1. CV CO 7.1 | |
| | , |
| 295 C The followin "Food Contract" items is soiled | |
| le doich fort te or grevsk | |
| | |
| Talk I Mickey Man | M |
| 2 Fryer warenest - Top of 1/ & side | |
| 2) Fryer wardnuck - Top of 1/ & Side | - |
| Sol /10 K | |
| | |
| | |
| | |
| | |
| | |
| Received by (name and title printed): | |
| Received by (name and title printed): Inspected by (name and title printed): Compared by (name | l l |
| Kristing Bevons Dem Smy | V 1 |
| Kristing Bevans Dem Smy | Ps/Z |