



**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>Jack's Donuts / Pizza King</i>		Telephone Number <i>918 Establishment (678) 7494</i>	Date of Inspection (mm/dd/yr) <i>7-3-24</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>417 W MAIN ST</i>		Purpose: <input checked="" type="radio"/> 1. Routine <input type="radio"/> 2. Follow-up <input type="radio"/> 3. Complaint <input type="radio"/> 4. Pre-Operational <input type="radio"/> 5. Temporary <input type="radio"/> 6. HACCP <input type="radio"/> 7. Other (list)	Follow-up <i>NO</i>	Release Date <i>10 days</i>
Owner <i>Angi Bond</i>	Owner's Address <i>SPAIN</i>	Summary of Violations: <i>C 1 NC 4 R 1</i>		
Person in Charge <i>Danielle</i>	Responsible Person's E-mail	Menu Type (See back of page) <i>1 2 3 4 5</i>		
Certified Food Handler <i>N/A</i>				

• 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/N/C	R	Narrative	To Be Corrected By
430	NC	<input checked="" type="checkbox"/>	Flooring behind donut cases shall be sealed	ASAP
431			Seals smooth - easy - cleanable	
433	NC		Floor mats need placed on wall etc. A way to air dry - Not directly on floor	Today
439	C		Separation of chemicals from food - single storage items Bleach & chemical stored next to plastic lids in back storage	Today
308	NC		HVAC vents has dust debris on them	
409	NC		Ceiling tiles soiled brown ALSO soap tiles broken - Not fitting correctly	

Received by (name and title printed): <i>Danielle Bone</i>	Inspected by (name and title printed): <i>[Signature]</i>
Received by (signature): <i>[Signature]</i>	Inspected by (signature): <i>[Signature]</i>
cc:	cc:

Foods @ grant county, net

GRANT COUNTY HEALTH DEPARTMENT

Phone 765-651-2401 Ext. 3123/3111
Fax 765-651-2419

DATE: 06/03/24

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

PLEASE SEND YOUR RESPONSE TO THE GRANT COUNTY HEALTH DEPARTMENT BY MAIL OR FAX WITHIN 10 DAYS.

The following is a response to the inspection report prepared by the Health Department Food Safety Officer Dean Small / April Legare from the Grant Co. Health Department on 7.3.24.

Date: 6/3 Action Taken: moved chemicals to bottom shelf

6/4 got hooks to hang mop heads up

6/4 vents got cleaned

6/9 ceiling tiles fixed up front

6/9 flooring behind case sealed

(PLEASE FORWARD THIS FORM TO THE GRANT COUNTY HEALTH DEPARTMENT BY MAIL/FAX WITHIN 10 DAYS)

Name of Respondent: Danielle Bone Title: Manager

Establishment Name: JACKS DONUTS / PIZZA KING

Address: 417 W main st gas city