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: Johnson Ampco #2

Establishment Address (number and street, city, state, ZIP code): 802 S Massachusetts Ave.

Owner: Johnson Oil Company

Owner's Address: PO Box 336 Gaston

Person in Charge: Audrey

Responsible Person's E-mail:

Certified Food Handler: Audrey Fluhr exp: 12/2027

Telephone Number: 765 Establishment ( ) 998-2608

Date of Inspection (mm/dd/yr): 8/6/24

ID #: 27

Purpose:
1. Routine
2. Follow-up
3. Complaint
4. Pre-Operational
5. Temporary
6. HACCP
7. Other (list) _____

Follow-up: No

Release Date: 10 Days

Summary of Violations: C 2 NC 2 R 1

Menu Type (See back of page): 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#	C/NC	R	Narrative	To Be Corrected By
345	C		plastic ketchup condiment bottle sitting in hand sink	Removed
138	NC		Employee preping food w/ hair restraint	Today
305	NC		Hood system needs cleaned at least once a year w/ hood sticker placed on hood	
295	C	✓	Inside underneath top of ice maker, dark residue - comes in contact w/ ice	

Received by (name and title printed): Audrey Fluhr

Received by (signature): Audrey of Fluhr

Inspected by (name and title printed): Angela McCollum Deruwell FSD

Inspected by (signature):

cc: _____ cc: _____ cc: _____