RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT
State Form 48669 (R2/2-05)
SDH Form 51-0001

1-TEMP THERMOLABEL ®
Square turns black as temperature is reached
160°F
71°C
TL1-160

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 Rod Basket Middle School	**Telephone Number** (76) Establishment (674) 8536 Owner
Establishment Address (number and street, city, state, ZIP code) 125 N Broadway	**Date of Inspection** (mm/dd/yr) 8/12/24 **ID #** 27

Owner Mississinewa Community Schools	**Purpose:**	**Follow-up** NU	**Release Date** 10 days
Owner's Address Same	1. Routine (circled)	
	2. Follow-up	**Summary of Violations:**
Person in Charge Megan	3. Complaint	
	4. Pre-Operational	C____ NC _1_ R _—_
Responsible Person's E-mail	5. Temporary	**Menu Type** (See back of page)
	6. HACCP	
Certified Food Handler Megan Farmer exp 7-2027	7. Other (list)	1 __ 2 __ 3 __ X __ 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
462	NC		+/- 19 Ceiling Tiles in dining room Are soiled w/ dried food debris	15 days

Received by (name and title printed): Megan Farmer	**Inspected by** (name and title printed): Dena Soy Angela C McCollum
Received by (signature): Megan Farmer	**Inspected by** (signature): Dena Dill RS AMcCollum
cc:	cc:	cc:

Operator Response to Inspection
State Form 80047 (2-01)

Grant County Health Department

Phone 765-651-2401 ext 3111 / 3123
Fax 765-651-2419

Date: 8/26/27

765-651-2401 (Phone) 765-651-2419 (Fax)
Grant County Health Department
401 South Adams Street
Marion, IN 46953

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

The following is my response to the inspection report prepared by the Health
Department Food Safety Officer Dean Small / Angela McCollum on 8/12/24

DATE   ACTION TAKEN
8/23/24   ceiling tiles replaced

(Please forward this form to the Grant County Health Department by
Mail / Fax with 10 days)

Name Erika Horner   Title Director of Child Nutrition

Establishment RJ Baskett Middle School

Address 125 N Broadway, Gas City IN 46933

Attach additional sheets as needed.