



**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 TACO BELL # 23146	Telephone Number 708 Establishment	Date of Inspection (mm/dd/yr) 5-14-24	ID # 27
Establishment Address (number and street, city, state, ZIP code) 6265 E 500 South	Owner 679-7574		
Owner K Mac Enterprises Inc	Purpose: 1. Routine 2. Follow-up 3. <u>Complaint</u> 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up YES	Release Date 5-14-24
Owner's Address 688 Millers Rd Ste 200 AK	Summary of Violations: C / NC 6 R -		
Person in Charge JD	Menu Type (See back of page) 1 2 3 4 5		
Responsible Person's E-mail			
Certified Food Handler Jones Deen Taylor Burk			

• 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
295	NC		The following "Non Food" Contact items are sorted 1) Outside of all equipment in kitchen 2) Inside bottom of floor cooler 3) Counter where flavor syrup is sitting 4) Brown candies at drive up window 5) Bottom - front of freezer machine 6) Condiment area by fountain machine in dining room 7) Top - sides of clam shell & steamer	
431	NC		Flooring through out kitchen to include under equipment - Dining Room - Restrooms	
295	C		Following "Food Contact" items is sorted w/ dried food / trash 1) Inside trays 2) Inside of steamer / clam machine	
308	NC		walls & ceilings has dust on them in kitchen	

Received by (name and title printed): James Dean Poe	Inspected by (name and title printed): Neen Hill
Received by (signature): <i>[Signature]</i>	Inspected by (signature): <i>[Signature]</i>
cc:	cc:

NARRATIVE REPORT

Establishment Name		Address		Inspection Date
Section#	C/NC	R	REMARKS	TO BE CORRECTED BY
299	NC		Fountain machine - underneath & metal levers #3 soiled.	
324	NC		Walk In freezer - Ice around the door & on inside needs repaired	ASAP
386	NC		Trash can in dining room full	
GCND will follow up between 2-3pm on 5-14-2024				
Received By (Name & Title)			Inspected By (Name & Title)	
<i>[Signature]</i>			<i>[Signature]</i>	



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Establishment Name: Taco Bell #23146, Telephone Number, Date of Inspection: 5-14-24, ID #: 27, Establishment Address: 6265 E SOUS, Owner: K Mac Enterprises Inc, Purpose: 2. Follow-up, Follow-up: No, Release Date: 10 days, Owner's Address: 688 Millers Rd AK, Person in Charge: JD, Responsible Person's E-mail, Certified Food Handler: Taylor Burke

- 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"

Table with columns: Section#, C/NC, R, Narrative, To Be Corrected By. Contains handwritten note: OK to open (w/ all violations completed)

Received by (name and title printed): James Dean Pal, Inspected by (name and title printed): Dean Smith, Received by (signature): [Signature], Inspected by (signature): [Signature]