



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.

Form header section containing: Establishment Name (AFC-Sushi Taylor University), Telephone Number (978 Establishment, 998-5234 Owner), Date of Inspection (2-9-21), ID # (27), Establishment Address (236 Rende Ave Upland), Owner (AFC Franchise Corp), Owner's Address (1920 S Laurel Park Rd CA), Person in Charge (Ron), Responsible Person's E-mail, Certified Food Handler (Van Kim exp 12-2021), Purpose (1. Routine), Follow-up (No), Release Date (10 days), Summary of Violations (C 2 NC R), Menu Type (1 2 3 X 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"

Table with 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: 128, C, Observed employee touching iPad then touching food & labels. No hand washing or changing of gloves. Row 2: 295, C, metal rack that has plastic top containers is soiled w/ debris touching the containers.

Form footer section containing: Received by (name and title printed): RD, Inspected by (name and title printed): Dean Small PSPD, Received by (signature): [Signature], Inspected by (signature): [Signature], cc: [Signature]

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

GRANT COUNTY HEALTH DEPARTMENT

Phone 765-651-2401
Fax 765-651-2419

DATE: 2-9-21

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 and/or Scott Kikendall at the Grant Co. Health Department on 2-9-21.

DATE:	Action Taken:
2-9-21	#345 @ HAND SINK CLEANED. REVIEWED PROPER PROCEDURES DURING PRE-SHIFT
2-9-21	#295 @ OPERATOR CLEANED. COACHED PREPARATION @ PRE-SHIFT
2-9-21	#191 @ COACHED @ PRE-SHIFT PROPER ROTATION & LABELING
2-9-21	#136 @ COACHED @ PRE-SHIFT DRINK ALLOWED ONLY @ DRINK STATION
2-9-21	#295 @ COACHED @ PRE-SHIFT & FOLLOW UP ON CLEAN CHECKS NIGHTLY

Name of Respondent: Michael S. Which Title: Executive Chef
Establishment Name: Taylor DC.
Address: 236 WEST ROAD E AV UPLAND IN 46989

Attach additional sheets as needed.