



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: Casa Grande Mexican Grill Bar. Telephone Number: 765-998-1888. Date of Inspection: 10-20-20. ID #: 27. Owner: Noe Sanchez. Purpose: 1. Routine. Follow-up: NO. Release Date: 10 days. Person in Charge: Louis. Certified Food Handler: Noe Sanchez exp 9-23-22.

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: 402, NC, Dark Debris on ceiling tiles to include vents in kitchen area, 30 days. Row 2: 191, L, In cooler across from Ice Machine no date marking on several containers, Today.

Complaint confirmed reference of debris on ceiling tiles

Received by (name and title printed): Louis Sanchez. Inspected by (name and title printed): Scott Kenhall / Dean Smith. Received by (signature): [Signature]. Inspected by (signature): [Signature].