



**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 FRANCIS SLOWM ELEMENTARY | Telephone Number (765) 664-0589 | Date of Inspection (mm/dd/yr) 01-23-19 | ID # 27 |
| Establishment Address (number and street, city, state, ZIP code) 2909 S. TORRENCE MARION | () Owner | Follow-up NO | Release Date 02-02-19 |
| Owner MARION COMM SCHOOL CORP | Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) | Summary of Violations: C - NC 1 R - | |
| Owner's Address SAME | | Menu Type (See back of page) 1 2 3 4 X 5 | |
| Person in Charge JESSICA CHAMBERS | | | |
| Responsible Person's E-mail N/A | | | |
| Certified Food Handler TEAL KEENAN | | | |

- 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 |
|----------|------|---|--|--------------------|
| 245 | NC | | (2) wiping cloths - soiled laying on LEDGE OF 3-BAY SINK | corrected |
| | | | | |

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|---|--|
| Received by (name and title printed): Jessica Chambers Supervisor | Inspected by (name and title printed): Rick Lamm - FSD |
| Received by (signature): <i>Jessica Chambers</i> | Inspected by (signature): <i>Rick Lamm - FSD</i> |
| cc: | cc: |