



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

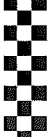
Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Form with fields: Establishment Name (Grant County YMCA), Telephone Number (765) Establishment (664-0054), Date of Inspection (5-30-19), ID # (27), Establishment Address (123 Sutter Way Marion), Owner (YMCA), Purpose (1. Routine), Follow-up (NO), Release Date (10 days), Owner's Address (Same), Person in Charge (Stephanie Tina Dublin), Responsible Person's E-mail, Certified Food Handler (N/A), Summary of Violations (C1 NC R), Menu Type (1 X 2 3 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 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: 439, C, , Chemicals in spray bottle sitting in a box next to ready to eat food being prepared, today.

Received by (name and title printed): Tina Dublin; Inspected by (name and title printed): DEAN SPALL FST-D; Received by (signature): Tina Dublin; Inspected by (signature): Dean Spall FST-D; cc: fields.



# GRANT COUNTY HEALTH DEPARTMENT

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

DATE: 6/10/19

Grant County Health Department  
401 S. Adams St.  
Marion, IN. 46953

The following is a response to the inspection report executed by the Grant Co. Health Department Food Safety Officer Dale Carr / Dean Small from the Grant Co. Health Department on 5-30-19.

DATE: 5/30/19      Action Taken: Box with Spray bottle was moved immediately and we went over the policy on chemicals near food prep area.

(PLEASE FORWARD THIS FORM TO THE GRANT COUNTY HEALTH DEPARTMENT BY MAIL OR FAX WITHIN 10 DAYS).

Name of Respondent: Stephanie Henschberger Title: Child Care Director

Establishment Name: Grant County Family YMCA

Address: 123 Sutter Way, Marion, In 46952

• Attach additional sheets as needed.