



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 with fields: Establishment Name (Home Land Mission), Telephone Number (765 663-9591), Date of Inspection (6-19-19), ID # (27), Establishment Address (302 W 30th St, Marion), Owner (Wm Kissane - Director), Purpose (1. Routine), Follow-up (NO), Release Date (6-29-19), Owner's Address (1110 E 50th, Marion), Person in Charge (Wm Kissane), Responsible Person's E-mail (N/A), Certified Food Handler (N/A). Summary of Violations: C / NC / R.

- 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: 415, C, , Rodent droppings in GARAGE STORAGE TODAY on shelves (too many to count), TODAY. Includes a large handwritten circle with '6/20/19' and 'OK'.

Received by (name and title printed): X WILLIAM L. KISSANE; Inspected by (name and title printed): R. DeGroot - FSD; Received by (signature): X William L. Kissane; Inspected by (signature): R. DeGroot - FSD; cc: fields.