



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 (Hometown Express #1), Telephone Number (765 Establishment), Date of Inspection (10-30-20), ID # (27), Establishment Address (2210 N Huntington Rd Marion), Owner (Aaron Caudell), Purpose (1. Routine), Follow-up (NO), Release Date (10 days), Owner's Address (9651 S 100 W), Person in Charge (Stephanie), Responsible Person's E-mail, Certified Food Handler (Pat Travis Exp 1-2021)

- 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/C, R, Narrative, To Be Corrected By. Contains two entries: 297 NC Cappuccino Machine nozzle on inside now soiled with debris (To Be Corrected By: today); 295 NC Handle on donut case to include cabinet under donut case is soiled with debris.

Received by (name and title printed): Stephanie Jarrett; Inspected by (name and title printed): Scott Kikendall FSIC; Received by (signature): [Signature]; Inspected by (signature): [Signature]; cc: [Blank]