



**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 <i>Thop 3313</i>	Telephone Number <i>765</i> Establishment	Date of Inspection (mm/dd/yr) <i>8-19-19</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>3038 S. Western Ave</i>	( <i>667-9040</i> ) Owner	Follow-up	Release Date <i>10 days</i>
Owner <i>Romulus Indiana LLC</i>	Purpose: <input checked="" type="radio"/> 1. Routine	Summary of Violations: <i>C 1 NC 6 R 4</i>	
Owner's Address <i>1048 N 44th &amp; Phoenix AZ</i>	<input type="radio"/> 2. Follow-up		
Person in Charge <i>June Studebaker</i>	<input type="radio"/> 3. Complaint	Menu Type (See back of page)	
Responsible Person's E-mail <i>_____</i>	<input type="radio"/> 4. Pre-Operational	<i>1 2 3 4 5</i>	
Certified Food Handler <i>LARISSA Bunch exp 2023</i>	<input type="radio"/> 5. Temporary		
	<input type="radio"/> 6. HACCP		
	<input type="radio"/> 7. Other (list)		

- 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
<i>295</i>	<i>C</i>	<i>X</i>	<i>Under grill - plates stored clean is soiled w/ dried food, grease</i>	
<i>295</i>	<i>NC</i>		<i>The 'Following' 'Non food' control items is soiled w/ dried food debris and other debris</i> <i>1) Inside both coolers to include metal racks</i> <i>2) metal shelf under grills</i> <i>3) wall along ware washing black in color</i>	
<i>298</i>	<i>NC</i>	<i>X</i>	<i>Microwave in kitchen heavily soiled inside - not in use -</i>	
<i>431</i>	<i>NC</i>	<i>X</i>	<i>Flooring in kitchen to include under grills &amp; fryers has grease and other debris</i>	
<i>399</i>	<i>NC</i>		<i>The wall next to fryer soiled w/ grease and old food debris.</i>	
<i>310</i>	<i>NC</i>		<i>Hand system soiled w/ debris.</i>	
<i>138</i>	<i>NC</i>	<i>X</i>	<i>+/- 2 employees prepping/cooking w/o hand guard</i>	

Received by (name and title printed): <i>JUNE STUDEBAKER</i>	Inspected by (name and title printed): <i>Dean Hall FSTO</i>
Received by (signature): <i>[Signature]</i>	Inspected by (signature): <i>[Signature]</i>
cc:	cc: