



**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 <b>JC AUTHENTIC TACOS</b>	Telephone Number <b>765 653 8781</b>	Date of Inspection (mm/dd/yr) <b>5-3-19</b>	ID # <b>27</b>
Establishment Address (number and street, city, state, ZIP code) <b>3719 S. GALLATIN - MARION</b>	( ) Owner		
Owner <b>JUAN GARCIA</b>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) <b>First Friday</b>	Follow-up	Release Date <b>5-13-19</b>
Owner's Address <b>SAME</b>	Summary of Violations: <b>C 1 NC 2 R -</b>		
Person in Charge <b>JUAN GARCIA</b>	Menu Type (See back of page) <b>1 2 3 X 4 5</b>		
Responsible Person's E-mail <b>N/A</b>			
Certified Food Handler <b>JUAN GARCIA / MICKEY JOHNSON</b>			

- 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
345	C		HANDSINK BEING USED AS DUMP SINK WITH FOOD IN SINK, ALSO 2 CONTAINERS IN SINK ALSO	TODAY
295	NC		THE CROCK POTS, WATER DISPENSER prep table has food debris	TODAY
245	NC		Soiled wiping cloth in sink AIR Drying	TODAY
			* Fixing FLOOR 30 DAYS *	

Received by (name and title printed): <b>* Mickey Johnson</b>	Inspected by (name and title printed): <b>R Dale Gyer - FSIJ</b>
Received by (signature): <b>* Mickey Johnson</b>	Inspected by (signature): <b>R Dale Gyer - FSIJ</b>
cc:	cc: