



# 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 JIC'S Auth. Tacos	Telephone Number ( ) Establishment	Date of Inspection (mm/dd/yr) 9-24-21	ID # 27
Establishment Address (number and street, city, state, ZIP code) 3719 S. Gallatin Marion, IN 46953	( ) Owner		
Owner Juan Garcia	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP	Follow-up —	Release Date —
Owner's Address Same		Summary of Violations: C — NC — R —	
Person in Charge Juan Garcia		Menu Type (See back of page) 1 — 2 — 3 — 4 — 5 —	
Responsible Person's E-mail	7. Other (list) River Grill		
Certified Food Handler Juan Garcia			

- 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
			OK to	
			Safe	

Received by (name and title printed): Juan Garcia	Inspected by (name and title printed): Dean Smith
Received by (signature): Juan Garcia	Inspected by (signature): Dean Smith
cc:	cc: