



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 (LIVING WATER - Apostolic Church), Telephone Number (765 663 8112), Date of Inspection (7-24-19), ID # (27), Establishment Address (732 S. PENNSYLVANIA ST. MARION), Owner (ROBT. MORRELL), Purpose (1. Routine), Follow-up (NO), Release Date (8-3-19), Owner's Address (726 S LINCOLN BLVD - MARION), Person in Charge (X Bob Morrell), Responsible Person's E-mail (N/A), Certified Food Handler (NANDY MORRELL exp 5/17/22)

- 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/NC, R, Narrative, To Be Corrected By. Contains handwritten entries: LOST LICENSE NUMBER 2019-339 REQUESTED A REPLACEMENT, No Violations AT THIS inspection

Received by (name and title printed): X Bob Morrell, Inspected by (name and title printed): K. Hale (M) - FSD, Received by (signature): X Bob Morrell, Inspected by (signature): K. Hale FSD