



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 <u>Good Main Moon 168 INC</u>	Telephone Number <u>768</u> Establishment	Date of Inspection (mm/dd/yr) <u>5-27-21</u>	ID # <u>27</u>
Establishment Address (number and street, city, state, ZIP code) <u>3316 S Western Ave Marion</u>	() Owner <u>662-0503</u>	Follow-up <u>NO</u>	Release Date <u>18 days</u>
Owner <u>Kwan Kui Cheung</u>	Purpose: <u>1. Routine</u>	Summary of Violations: <u>31 NC 4 R 3</u>	
Owner's Address <u>1728 Timberview Dr Marion</u>	2. Follow-up	Menu Type (See back of page)	
Person in Charge <u>Grace</u>	3. Complaint	1 <u> </u> 2 <u> </u> 3 <u>X</u> 4 <u> </u> 5 <u> </u>	
Responsible Person's E-mail <u> </u>	4. Pre-Operational		
Certified Food Handler <u>Fuyung Cheung Exp 9-2025</u>	5. Temporary		
	6. HACCP		
	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
245	NC		wet wiping cloths laying throughout kitchen and prep area. must be stored in sanitizer bucket when wet	Today
138	NC	X	Employees cooking with no hair Restraint	}
191	C	X	No Date Marking on Food in walk in cooler	
310	NC	X	on Back of Fryer, Top of warmer and to include Hood system is heavily soiled with grease and food debris	
345	C		Hand Sink has a steel ped in it.	
44	C		Beef and Chicken in back freezer unwrapped; unsafe, adulterated must have approved labeling source	
295	NC		Handles on Floor coolers are soiled with Food debris	
295	C		2 Knives laying between floor cooler and metal table must be stored on holder	

Received by (name and title printed): <u>Fuyung Cheung</u>	Inspected by (name and title printed): <u>Scott Kendall / Dean Smyth</u>
Received by (signature): 	Inspected by (signature):

cc:	cc:	cc:
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