



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 (MARION HIGH School), Telephone Number (75683378), Date of Inspection (1-27-2020), ID # (27), Establishment Address (750 W 26th St, Marion), Owner (MARION Community Schools), Purpose (1. Routine), Follow-up (NO), Release Date (2-6-2020), Owner's Address (SAME), Person in Charge (J. McCLUNG), Responsible Person's E-mail (N/A), Certified Food Handler (TEAL KEEMAN). Summary of Violations: C NC R. Menu Type: 1 2 3 X 4 5.

- 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. Narrative contains handwritten text: 'NO VIOLATIONS AT THIS INSPECTION'.



Received by (name and title printed): Josephine McClung; Inspected by (name and title printed): R. [Signature] - FSD; Received by (signature): Josephine McClung; Inspected by (signature): R. [Signature] - FSD; cc: [Blank]