



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 (McClure Oil #6), Telephone Number (765) Establishment (674) Overlay (171), Date of Inspection (7-12-19), ID # (27), Establishment Address (722 N Washington St Marion), Owner (McClure Oil Corp), Purpose (1. Routine), Follow-up (NO), Release Date (10 days), Owner's Address (P.O. Box 1750), Person in Charge (Amie Smith), Responsible Person's E-mail (N/A), Certified Food Handler.

- 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 columns: Section#, C/N/C, R, Narrative, To Be Corrected By. Row 1: 250, NC, [], Tee Scoop laying on demin board of 3 bay sink UNprotected. Row 2: 218, NC, [], Door on ice machine is broke - Needs fixed. To Be Corrected By: Today, 10 days.

Received by (name and title printed): Amie Smith; Inspected by (name and title printed): Dean Hall BS; Received by (signature): Amie Smith; Inspected by (signature): Dean Hall BS; cc: []