



**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 McClure Oil Corp # 7	Telephone Number 765-674-9771	Date of Inspection 1-9-2020	ID # 27
Establishment Address (number and street, city, state, ZIP code) 229 W MAIN ST. GAS CITY	() Owner	Follow-up NO	Release Date 1-19-2020
Owner McClure Oil Corp	Purpose: 1. Routine	Summary of Violations: C ___ NC <u>1</u> R ___	
Owner's Address P.O. BOX 1750 MARION IN	2. Follow-up	Menu Type (See back of page) 1 ___ 2 <u>✓</u> 3 ___ 4 ___ 5 ___	
Person in Charge DEVIN SEEKINS	3. Complaint		
Responsible Person's E-mail N/A	4. Pre-Operational		
Certified Food Handler PER MENU - N/A	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
146	NC		APPROX 50 BAGS OF ICE THAT IS PACKAGED TODAY AT THIS STORE NEED LABELING ON EACH BAG OF ICE SOLD	
			* THIS FACILITY NEEDS ORIGINAL FOOD LICENSE POSTED - NOT A COPY *	

Received by (name and title printed): ✓ Devin Seekins Store Manager	Inspected by (name and title printed): R. Hale Gen - FSD
Received by (signature): 	Inspected by (signature):
cc:	cc: