



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 (McHyser BBQ, LLC), Telephone Number (260-229-0104), Date of Inspection (7-4-20), ID # (27), Establishment Address (1070 West 200 North Columbia City, IN 46725), Owner (Jeff McCormick and Gene Hyser), Purpose (1. Routine), Follow-up (none), Release Date (none), Owner's Address (1070 West 200 North Columbia City, IN 46725), Person in Charge (Jeff McCormick), Responsible Person's E-mail (carolynmccormick92@yahoo.com), Certified Food Handler (Jeff McCormick), Menu Type (3, 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 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Narrative contains handwritten text: 'No violations on this inspection'.

Received by (name and title printed): Jeff McCormick; Inspected by (name and title printed): Scott Kikendall; Received by (signature): [Signature]; Inspected by (signature): [Signature]; cc: [Blank]