



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 (More Poppin), Telephone Number, Date of Inspection (9-10-21), ID # (27), Establishment Address (5113 N. Mexico Rd. Peru, IN 46970), Owner (Charm Pigg), Purpose (6. HACCP), Follow-up, Release Date (10 days), Summary of Violations (C, NC, R), Menu Type (1, 2, 3, 4, 5), Certified Food Handler (NA).

- 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. Contains handwritten text 'OK to Sate' in the Narrative column.

Form with fields: Received by (name and title printed): JEFF PIGG, Inspected by (name and title printed): Deborah Smith, Received by (signature): [Signature], Inspected by (signature): [Signature], cc: [Blank]