



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 (Telephone Number	Date of Inspection (mm/dd/yr)	ID #
Northview Elementary	(765) Establishment	2-27-19	27
Establishment Address (number and street, city, state, ZIP code)	(677) Owner		
725 E. North A' St Cross City	4400		
Owner	Purpose:	Follow-up	Release Date
Mississinewa Community Corp	1. Routine	NO	10 days
Owner's Address	2. Follow-up	Summary of Violations:	
424 E South A' St Cross City	3. Complaint	C <input type="checkbox"/> NC <input type="checkbox"/> R <input checked="" type="checkbox"/>	
Person in Charge	4. Pre-Operational	Menu Type (See back of page)	
Janet Boys	5. Temporary	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input type="checkbox"/>	
Responsible Person's E-mail	6. HACCP		
N/A	7. Other (list)		
Certified Food Handler			
Janet Smith (Boys) exp 3-7-2021			

- 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
			- No violations at this inspection -	
			2/28/19	
			W OR	

Received by (name and title printed):	Inspected by (name and title printed):
Janet L. Boys, Manager	DEAN SMITH FST
Received by (signature):	Inspected by (signature):
Janet L. Boys, Manager	Dean Smith FST
cc:	cc: