



**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 ORIENTAL PEARL	Telephone Number 765-648-7668	Date of Inspection (mm/dd/yr) 7-23-09	ID # 27
Establishment Address (number and street, city, state, ZIP code) 1036 E MAIN ST. GAS CITY	() Owner	Follow-up NO	Release Date 8-2-09
Owner BO TONG ZHU	Purpose: <input checked="" type="checkbox"/> 1. Routine <input checked="" type="checkbox"/> 2. Follow-up <input type="checkbox"/> 3. Complaint <input type="checkbox"/> 4. Pre-Operational <input type="checkbox"/> 5. Temporary <input type="checkbox"/> 6. HACCP <input type="checkbox"/> 7. Other (list)	Summary of Violations: C <u> </u> NC <u> 3 </u> R <u> </u>	
Owner's Address 1029 CANDY CREEK CT- GAS CITY		Menu Type (See back of page) 1 <u> </u> 2 <u> </u> 3 <u>X</u> 4 <u> </u> 5 <u> </u>	
Person in Charge BO TONG ZHU			
Responsible Person's E-mail N/A			
Certified Food Handler BO TONG ZHU 11-22-18			

- 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
295	NC		THE FOLLOWING "NON-FOOD" CONTACT SURFACES SOILED WITH FOOD/OTHER DEBRIS 1) SIDE OF DEEP FRYERS 2) SIDE OF STOVE	TODAY
399	NC		USING CARDBOARD AS A LINER FOR RICE BOWL, ON FLAT plate GRILL (NOT IN USE), AND SHELVING REPLACE DAILY	TODAY
235	NC		USING METAL BOWLS AS SCOOPS, SCOOPS HAS TO HAVE HANDLE(S)	TODAY

Received by (name and title printed): X Bo Tong Zhu	Inspected by (name and title printed): R Dale Carr - FSD
Received by (signature): X [Signature]	Inspected by (signature): [Signature] FSD
cc:	cc:

Grant County Health Department

Phone 765-651-2401 ext 110
Fax 765-651-2419

Date: 07/23/19

765-651-2401 (Phone) 765-651-2419 (Fax)
Grant County Health Department
401 South Adams Street
Marion, IN 46953

PLEASE SEND YOUR RESPONSE TO THE GRANT COUNTY HEALTH DEPARTMENT, BY MAIL OR BY FAX, WITHIN TEN (10) DAYS.

The following is my response to the inspection report prepared by your agency's representative R DALE CARR on 7-23-19.

DATE ACTION TAKEN

7/23/19 Section # 295 : had been clean
the 1) side of deep fryers
2) side of stove.

7/23/19 Section #: 399 } had change a clean
Card Board for a rice bowl
and move the not in use

7/23/19 Section #: 235 : One fire grill away and shaving
using a handle had been replaced daily

Name Bo Long Zhu Title owner

Establishment oriental pearl

Address 1036 E Main ST Gas City, IN 46933