



**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 (763) Establishment	Date of Inspection 6-24-20 (mm/dd/yr)	ID # 27
Establishment Address (number and street, city, state, ZIP code) 1036 E Main St Gas City		Owner (617) 7667		
Owner Botong ZHU	Purpose: 1. Routine	Follow-up	Release Date 10 days	
Owner's Address 1029 Creek Ct	2. Follow-up	Summary of Violations: C3 NC5 R1		
Person in Charge Botong	3. Complaint	Menu Type (See back of page)		
Responsible Person's E-mail	4. Pre-Operational	1 2 3 X 4 5		
Certified Food Handler Botong Zhu	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
295	C		The Following Food Contact Items are soiled with Food debris 1) Pan from night before sitting on hot line 2) Can opener blade 3) Tongs and silverware sitting on dump sink as clean-	
295	NC		The Following Non-Food Contact Items has Food debris and soiled X 1) Underneath the grill/hot area 2) Outside of Microwave	
305	NC		Vents above grill area heavily soiled	
191	C		No date marking on brooder, beef, chicken in walk in cooler	
431	NC		Flooring throughout kitchen is heavily soiled	
399	NC		Freezer door does not stay closed/ice buildup	
345	C		Hand sink blocked with plastic jug	
245	NC		Bag of sugar sitting directly on floor in back room - in off floor	

Received by (name and title printed): XU Mei Jiang	Inspected by (name and title printed): Scott K Kendall / Dean Small FSO
Received by (signature): <i>XU Mei</i>	Inspected by (signature): <i>Scott Kendall FSO / Dean Small FSO</i>
cc:	cc:

GRANT COUNTY HEALTH DEPARTMENT

Phone 765-651-2401 Ext. 3123 / 3111

Fax 765-651-2419

DATE: 06/26/20

Grant County Health Department

401 S. Adams St.

Marion, IN. 46953

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

The following is a response to the inspection report prepared by the Health Department Food Safety Officer Dean Small / Scott Kikendall from the Grant Co. Health Department on 6-24-20.

DATE:	Action Taken:	
6/25/20	Section # 295	1) throw away the food from last night 2) had already clean the can opener. 3) had done for the silverware on the sink
6/25/20	Section # 295	1) Done for clean the underneath the grill area and the outside of the microwave
6/26/20	Section #: 305	Done for clean the vent above of the grill area.
6/25/20	Section #: 191	Done for mark the date for all the food in the cooler.
6/25/20	Section #: 431	Done for cleaned all the flooring in +
6/25/20	Section #: 399	We already order another freezer. K
6/25/20	Section #: 345	Done for cleaned and put away all the
6/25/20	Section #: 245	Done for the bag sugar (in the hands put something in

Name of Respondent: Bo Tong Zhu Title: Owner

Establishment Name: Oriental Pearl

Address: 1036 E Main St Gas City, IN 46933

Attach additional sheets as needed.