



**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 PAPA JOHN'S	Telephone Number 765-668-7222	Date of Inspection (mm/dd/yr) 6-18-19	ID # 27
Establishment Address (number and street, city, state, ZIP code) 826 N BROWN AVE - MARION	() Owner	Follow-up NO	Release Date 6-28-19
Owner NADHEN BAJWA	Purpose: <input checked="" type="radio"/> Routine	Summary of Violations: C 1 NC 3 R 2	
Owner's Address 3695 BOEDMAN CENTER RD OH	2. Follow-up	Menu Type (See back of page)	
Person in Charge CATHERINE WHITE	3. Complaint	1 2 X 3 4 5	
Responsible Person's E-mail N/A	4. Pre-Operational		
Certified Food Handler Milo NELSON exp 4/16/20	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 CAN OPENER BLADE IS SOILED WITH FOOD DEBRIS & METAL SHAVINGS ON AND AROUND GEAR AREA	TODAY
218	NC		THE HANDLE OF WARE - IN COOLER "LOUISVILLE COOLER" IN BACK HANDLE IS BROKEN, FIXED / REPLACED	TODAY
		X	ALSO COVER UNDER HANDSICK needs fixed / replaced	
431	NC	X	THE FLOOR THROUGHOUT THE FACILITY IS SOILED WITH FOOD DEBRIS	TODAY
299	NC		ALL PREP TABLES ARE SOILED WITH FOOD DEBRIS AND LINT, OTHER DEBRIS	TODAY
		*	DISCUSSED INFECTION CONTROL WITH MANAGER (410 IAC 7-24 SECTION 120)	

Received by (name and title printed): X Catherine White	Inspected by (name and title printed): R Jallen - RSID
Received by (signature): X Catherine White	Inspected by (signature): R Jallen - RSID
cc:	cc: