



**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 Murphy's	Telephone Number 763 Establishment (651) 9977 Owner	Date of Inspection (mm/dd/yr) 9-21-20	ID # 27
Establishment Address (number and street, city, state, ZIP code) 3103 S Western Ave Marion IN	Owner Jeffery Maon	Follow-up NO	Release Date 10 days
Owner's Address 14327 Dove Dr Carmel IN	Purpose: 1. Routine	Summary of Violations: C 1 NC 1 R 2	
Person in Charge Marena Suffield	2. Follow-up	Menu Type (See back of page) 1 2 X 3 4 5	
Responsible Person's E-mail	3. Complaint		
Certified Food Handler Joseph Lawford Exp 8-6-2025	4. Pre-Operational		
	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
345	C		Hand Sink in prep area has food debris on and around sink	Corrected
295	NC		The following "Non Contact" food items are soiled with food debris: 1) Glass above toppings area in prep area 2) Bottom of oven by hand sink in prep area 3) Rubber shelf covering on metal rack where clean dishes are stored	Today

Received by (name and title printed): Marena A. Suffield	Inspected by (name and title printed): Scott Kikendall
Received by (signature): <i>Marena A. Suffield</i>	Inspected by (signature): <i>Scott Kikendall BSO</i>
cc:	cc: