



**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 <i>Quick Mart / Subway</i>	Telephone Number () Establishment <i>674-5508</i>	Date of Inspection (mm/dd/yr) <i>9-31-20</i>	ID # <i>27</i>
Establishment Address (number and street, city, state ZIP code) <i>122 W Main St Gas City</i>	Owner <i>Michael Hicks</i>	Follow-up <i>NO</i>	Release Date <i>10 days</i>
Owner's Address <i>4019 S 700 W</i>	Purpose: <u>1. Routine</u>	Summary of Violations: <i>C 1 NC 3 R</i>	
Person in Charge <i>Robert Wallace</i>	2. Follow-up	Menu Type (See back of page) <i>1 2 3/4 5</i>	
Responsible Person's E-mail <i>N/A</i>	3. Complaint		
Certified Food Handler <i>Kassandra Withrow 8/2022</i>	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
<i>295</i>	<i>C</i>		<i>-Subway- In back manual can opener & blade soiled</i>	<i>Today</i>
<i>298</i>	<i>NC</i>		<i>Microwave in back has soiled food debris inside</i>	<i>←</i>
<i>295</i>	<i>NC</i>		<i>metal front, microwave is sitting on in back & has soiled food debris on it</i>	
<i>430</i>	<i>NC</i>		<i>Ceiling & light covers on serving line - has dust/debris.</i>	
			<i>-STORE- No violations</i>	

Received by (name and title printed): <i>Robert Wallace</i>	Inspected by (name and title printed): <i>Dean Lyall</i>
Received by (signature): <i>Robert Wallace</i>	Inspected by (signature): <i>Dean Lyall</i>
cc:	cc: