



**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>R P's Pop</i>	Telephone Number <i>765-773-7730</i>	Date of Inspection (mm/dd/yr) <i>6-26-19</i>	ID # <i>29</i>
Establishment Address (number and street, city, state, ZIP code) <i>3202 S. Washington St</i>	Owner <i>Rogelio Peña</i>	Follow-up <i>10 days</i>	Release Date <i>10 days</i>
Owner <i>Rogelio Peña</i>	Purpose: <input checked="" type="checkbox"/> 1. Routine <input 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: <i>C 1 NC 2 R 1</i>	
Owner's Address <i>same</i>	Person in Charge <i>Gloria Ortega</i>	Menu Type (See back of page)	
Responsible Person's E-mail <i>N/A</i>	Certified Food Handler <i>expired see bottom</i>	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	

- 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/C	R	Narrative	To Be Corrected By
173	C		Hamburger laying out in kitchen to unthaw Must be in cooler	Corrected
298	NC	X	Inside microwave sealed	
295	NC		Following "Non food" contact items is sealed 1) top of stove 2) grill 3) foil on fryer	
* 60 days or less to provide person enrolled in CFH class or certificate if not food license suspended				

Received by (name and title printed): <i>Gloria Ortega</i>	Inspected by (name and title printed): <i>Dean Smith - FSD</i>
Received by (signature): <i>Gloria Ortega</i>	Inspected by (signature): <i>Dean Smith FSD</i>
cc:	cc: