



**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 <b>KEBELS PUB</b>	Telephone Number <b>765-629-906</b>	Date of Inspection (mm/dd/yr) <b>7-17-19</b>	ID # <b>27</b>	
Establishment Address (number and street, city, state, ZIP code) <b>515 N Washington St.</b>	( ) Owner	Follow-up <b>No</b>		
Owner <b>JENNIFER MOORE</b>	Purpose: <b>1. Routine</b>	Release Date <b>10 days</b>	Summary of Violations:  <b>C - NC - R -</b>	
Owner's Address <b>901 Mac Alan</b>	2. Follow-up	Menu Type (See back of page) <b>1 2 X 3 4 5</b>		
Person in Charge	3. Complaint			
Responsible Person's E-mail <b>N/A</b>	4. Pre-Operational			
Certified Food Handler <b>JESSICA OWINGS ISSUED 7-17</b> <i>LISA BRAND FORD</i>	5. Temporary 6. HACCP 7. Other (list)			
<ul style="list-style-type: none"> <li>CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"</li> <li>VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"</li> </ul>				
Section#	C/CNC	R	Narrative	To Be Corrected By
298	NC		Inside microwave soiled inside	Today
Received by (name and title printed): <b>Jennifer Moore</b>		Inspected by (name and title printed): <b>Dan Scott FSD</b>		
Received by (signature): <i>Jennifer Moore</i>		Inspected by (signature): <i>Dan Scott FSD</i>		
cc:		cc:		cc:

# GRANT COUNTY HEALTH DEPARTMENT

Phone ~~765-651-2401~~  
Fax 765-651-2419  
e-mail foods@grantcounty.gov

DATE: 7/17/19

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 Dale Carr / Dean Small from the Grant Co. Health Department on 7-19-19.

DATE:

Action Taken:

7/17

Microwave cleaned

Name of Respondent:

Jennifer Moore Title: Mgr.

Establishment Name:

Rebels Pub

Address:

515 N. Washington St. Marion, IN

46952