



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.

Form with fields: Establishment Name (Riverview Elementary), Telephone Number (765 652 1377), Date of Inspection (2-19-2020), ID # (27), Establishment Address (513 W Buckingham RD - Marion), Owner (Marion Comm Schools), Purpose (1. Routine), Follow-up (NO), Release Date (2-29-2020), Owner's Address (Same), Person in Charge (Aurelia Martinez), Responsible Person's E-mail (N/A), Certified Food Handler (N/A), Summary of Violations (C __ NC __ R __), Menu Type (1 __ 2 __ 3 __ 4 X 5 __)

- 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"

Table with columns: Section#, C/NC, R, Narrative, To Be Corrected By. Narrative contains handwritten text: 'no violations at this inspection'.

Received by (name and title printed): Aurelia Martinez; Inspected by (name and title printed): Dale Lynn - FSI; Received by (signature); Inspected by (signature); cc: