

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 parrative portion of this report.

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Establishment Name							Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#	
Rock Concessions #							⁽ 765–667–2335		20		
Establishment Address (number and street, city, state, ZIP code)						() Owner	5-3-	19	127		
805 S. Broadway Gas City, IN 46933						Nacional de la company de la c	n	F-II	/ - I n	- D-4	
Owner Sandy Rock							Purpose:	Follow-up Release Date			
Owner's Address						·	1. Routing	10 July 5			
Owner's Address							2. Follow-up	Summary of Violations:			
Same Person in Charge							3. Complaint		NC	D	
Sandy Rock							4. Pre-Operational	C NC R			
Responsible Person's E-mail							5. Temporary	Menu Type (See back of page)			
outdoorusa2@indy.rr.com						4	6. HACCP		. 4		
Certified Food Handler							7. Other (list)	12_/_345			
Sandy Rock						Separation of the second second second	First Friday	,			
• 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"											
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