



**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<br>Rock Concession #2   |  | Telephone Number<br>(765) Establishment 765-667-2335<br>( ) Owner   |  | Date of Inspection<br>(mm/dd/yr)<br>7-3-20 | ID #<br>27 |  |
| Establishment Address (number and street, city, state, ZIP code)<br>805 S. Broadway Gas City, IN 46933 |  | Purpose:<br>1. Routine<br>2. Follow-up<br>3. Complaint<br>4. Pre-Operational<br>5. Temporary<br>6. HACCP<br>7. Other (list)<br>4th Bldg | Follow-up<br>-                             | Release Date<br>-                          |            |  |
| Owner<br>Sandy Rock  |  |   | Summary of Violations:<br><br>C 1 NC - R - |  |            |  |
| Owner's Address<br>Same  |  |   |  |  |            |  |
| Person in Charge<br>Sandy Rock   |  |   |  |  |            |  |
| Responsible Person's E-mail<br>usaoutdoor2@indy.rr.com   |  |   |  |  |            |  |
| Certified Food Handler<br>Sandy Rock   |  | Menu Type (See back of page)<br>1 2 3 X 4 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"

| Section# | C/NC | R | Narrative                               | To Be Corrected By |
|----------|------|---|---|--------------------|
| 295      | C    |   | Ice scoop handle keying directly ON ICE |                    |
|          |      |   |   |                    |
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|--|-----|--|--|
| Received by (name and title printed):<br>Ryan Thomas |     | Inspected by (name and title printed):<br>Scott K. Kendall |  |
| Received by (signature):<br>                         |     | Inspected by (signature):<br>                              |  |
| cc:  | cc: | cc:  |  |