



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 header with fields: Establishment Name (Swayzee Pantry), Telephone Number (913 Establishment, 922 Owner), Date of Inspection (5-24-19), ID # (27), Establishment Address (5058 S. 800th W Swayzee), Owner (Kaishish Inc), Owner's Address (SAME), Person in Charge (William Martin), Responsible Person's E-mail, Certified Food Handler (CPH class July 11th 2019), Purpose (2. Follow-up), Follow-up/Release Date (10 days), Summary of Violations (C 1 NC 4 R 1), Menu Type (1 2 3 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"

Table with columns: Section#, C/NC, R, Narrative, To Be Corrected By. Rows include violations 138 (Employee cooking w/o hair restraint), 189 (Baked potatoes in walk in cooler), 198 (Inside of microwave is soiled), 295 (The following "New Food" contact items is soiled), and 307 (Hood system is missing a piece).

Form footer with fields: Received by (name and title printed), Inspected by (name and title printed), Received by (signature), Inspected by (signature), cc: (for both).