



**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 <i>Sweetser Elementary</i>	Telephone Number <i>768 Establishment</i>	Date of Inspection (mm/dd/yr) <i>1-31-20</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>614 N Main St.</i>	<i>395 Owner</i> <i>3341</i>		
Owner <i>Calk Hill United Schools</i>	Purpose: <u>1. Routine</u>	Follow-up <i>NU</i>	Release Date <i>10 days</i>
Owner's Address <i>1474 N 800-27 Converse</i>	2. Follow-up	Summary of Violations: <i>C / NC / R -</i>	
Person in Charge <i>Brandon Persinger</i>	3. Complaint	Menu Type (See back of page) <i>1 2 3 4 X 5</i>	
Responsible Person's E-mail <i>N/A</i>	4. Pre-Operational		
Certified Food Handler <i>Donna South 3/2017</i>	5. Temporary		
	6. HACCP		
	7. Other (list)		

- 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	
<i>295</i>	<i>C</i>		<i>Food trays sitting on metal cart clean - 3 of them have dried food debris</i>	<i>Today</i>	
<i>295</i>	<i>NC</i>		<i>On prep table there is dried food debris at the back -</i>	<i>S</i>	

Received by (name and title printed): <i>Brandon Persinger</i>	Inspected by (name and title printed): <i>Debra Small RSD</i>
Received by (signature): <i>Brandon Persinger</i>	Inspected by (signature): <i>Debra Small RSD</i>
cc:	cc:

# GRANT COUNTY HEALTH DEPARTMENT

Phone 765-651-2401  
Fax 765-651-2419

DATE: 1-31-20

Grant County Health Department  
401 S. Adams St.  
Marion, IN. 46953

The following is a response to the inspection report executed by the Grant Co. Health Department Food Safety Officer Dale Carr / Dean Small from the Grant Co. Health Department on 1-31-20.

DATE: 1-31-20 Action Taken:

We re-washed the trays and double checked to make sure there was nothing left behind. I wiped down our back prep table and sanitized while making sure nothing was left

(PLEASE FORWARD THIS FORM TO THE GRANT COUNTY HEALTH DEPARTMENT BY MAIL OR FAX WITHIN 10 DAYS).

Name of Respondent: Brandon Persinger Title: Head Cook

Establishment Name: Sweetser Elementary

Address: 614 N. Main St., Sweetser, IN 46987

o Attach additional sheets as needed.