



**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 Village Pantry # 5579	Telephone Number 765 Establishment 948-5378	Date of Inspection (mm/dd/yr) 7-14-21	ID # 27
Establishment Address (number and street, city, state, ZIP code) 150 W 8th St Fairmount	Owner Village Pantry LLC	Follow-up NO	Release Date 10 days
Owner's Address 8565 Megollen Rd # 100	Purpose: 1. Routine	Summary of Violations: C 2 NC 5 R -	
Person in Charge JENNIFER	2. Follow-up	Menu Type (See back of page) 1 2 3 X 4 5	
Responsible Person's E-mail _____	3. Complaint		
Certified Food Handler JENNIFER RHODES Exp 7/2024	4. Pre-Operational		
	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
298	NC		Microwave in kitchen soiled with dried food debris	Today
431	NC		Floor in walk-in freezer has debris	
191	C		In Deli cooler Broccoli Au Gratin dated must used by 7-13-2021	Pulled
324	NC		Good Humon Freezer on sales floor has ice build up	Today
310	NC		Hood vent above fryer is soiled with debris	
295	NC		Can opener on outside are soiled with debris	
295	C		Basket in fryer is heavily soiled with dried food debris; not in use	

Received by (name and title printed): Jennifer Rhodes	Inspected by (name and title printed): Scott K. Kendall Dean Small
Received by (signature): <i>Jennifer Rhodes</i>	Inspected by (signature): <i>Scott Kendall / Dean Small</i>
cc:	cc:

GRANT COUNTY HEALTH DEPARTMENT

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

DATE: 7/19/2021

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

PLEASE SEND YOUR RESPONSE TO THE GRANT COUNTY HEALTH DEPARTMENT BY MAIL OR FAX WITHIN 10 DAYS.

The following is a response to the inspection report prepared by the Health Department Food Safety Officer Dean Small and/or Scott Kikendall at the Grant Co. Health Department on 7-14-21.

DATE:

Action Taken:

7/19/2021 All were taken care of.

Name of Respondent: Jennifer Rhoads Title: Store MGR.

Establishment Name: Village Pantry

Address: 150 W 8th St Fairmount In. 46928