



**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.

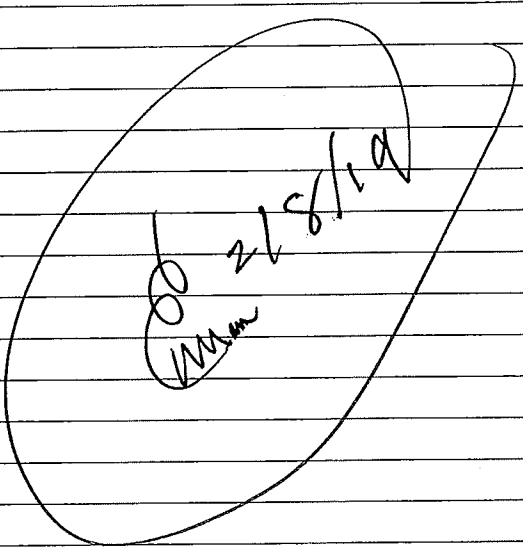
Establishment Name WALMART #1294	Telephone Number 765 682-0801	Date of Inspection (mm/dd/yy) 2-1-19	ID # 27
Establishment Address (number and street, city, state, ZIP code) 3240 So. WESTERN AVE - MARION	() Owner	Follow-up	Release Date 2-11-19
Owner WALMART STORES LP	Purpose: 1. Routine	Summary of Violations: 2 NC 6 R 1	
Owner's Address 508 SW St. Bentonville Ark	2. Follow-up	Menu Type (See back of page) 1 2 3 X 4 5	
Person in Charge JUSTIN SHOFFNER	3. Complaint		
Responsible Person's E-mail NIP	4. Pre-Operational		
Certified Food Handler JUSTIN SHOFFNER exp 5/24/22	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/N/C	R	Narrative	To Be Corrected By
			"DELI"	
129	C		2 EMPLOYEES LEAVING DELI, RETURNING PUTTING ON GLOVES WITHOUT FIRST WASHING HANDS	TODAY
138	NC		2 EMPLOYEES PREPARING FOOD WITHOUT HAIR RESTRAINTS, 1- NO BEARD GUARD	TODAY
345	C		HANDSINK NEXT TO MEAT SLICERS IS SOILED WITH FOOD DEBRIS NOT MAINTAINED CLEAN AT ALL TIMES	TODAY
431	NC	X	THE FLOOR THROUGHOUT THE DELI, INCLUDING WALK-IN COOLERS, UNDER EQUIPMENT IS HEAVILY SOILED WITH A DARK RESIDUE, FOOD AND OTHER DEBRIS	TODAY
234	NC		SINGLE SERVICE / SINGLE USE (TO GO CONTAINERS) ON TABLES / RACKS NOT INVERTED	TODAY
295	NC		THE FOLLOWING "NON-FOOD" CONTACT SURFACES SOILED WITH OLD FOOD DEBRIS 1) ALL PREP TABLES / SHELVES 2) DOORS OF DISPLAY CASES	TODAY

Received by (name and title printed): Justin Shoffner	Inspected by (name and title printed): R. Dale Carr - FSTO
Received by (signature): <i>[Signature]</i>	Inspected by (signature): <i>[Signature]</i>
cc:	cc:

NARRATIVE REPORT

Establishment Name WALMART # 1294			Address 3240 S. WESTERN AVE MARION		Inspection Date 2-1-18
Section#	C/NC	R	"BAKERY"	REMARKS	TO BE CORRECTED BY
146	NC			PLASTIC CONTAINER NOT LABELED AS TO CONTENT APPEARS TO BE SUGAR NOT IN ITS ORIGINAL PACKAGE(S) TO INCLUDE PLASTIC SPRAY BOTTLE - CLOSURE USE	TODAY
295	NC			ALL METAL CARTS SOILED WITH OLD DRIED FOOD DEBRIS	TODAY
<p>* MANAGEMENT NEED TO TRAVEL ABOUT SICK EMPLOYEE POLICY *</p>					
					
Received By (Name & Title) JMM AST. MANAGER			Inspected By (Name & Title) Devin Small FSO		Page <u>2</u> of <u>2</u>

FSO

GRANT COUNTY HEALTH DEPARTMENT

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

DATE: 2/1/19

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 R. Dale Carr-FSIO / ~~Fred Little~~ FSIO from the Grant Co. Health Department on 2-1-19.
DEAN SMALL

DATE:	Action Taken:
<u>2/1/19</u>	<u>129C - Both Associates were held accountable and spoke to on the importance of this.</u>
<u>2/1/19</u>	<u>138 NC - Spoke to the Deli team on wearing Beard Guards and hairnets through the Deli</u>
<u>2/1/19</u>	<u>345C - Sink was cleaned, and made sure no debris was left in the sink.</u>
<u>2/1/19</u>	<u>431 NC - Got the floor clean, and met with team about cleaning before after every task.</u>
<u>2/1/19</u>	<u>234 NC - All containers have been flipped over correctly</u>
<u>2/1/19</u>	<u>295 NC - All food contact surfaces cleaned and sanitized</u>
<u>2/1/19</u>	<u>146 NC - Powder sugar container was labeled</u>
<u>2/1/19</u>	<u>295 NC - Got with policy, was cleaned</u>

Name of Respondent: Justin Shaffer Title: Assistant Manager

Establishment Name: WALMART

Address: 3240 Southwestern, Marion IN 46952

Attach additional sheets as needed.