



**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 Wings Etc	Telephone Number 765	Date of Inspection (mm/dd/yr) 5-19-21	ID # 27
Establishment Address (number and street, city, state, ZIP code) 1508 S Western Ave Marion	Establishment Owner 374-6233		
Owner WFOC East INC	Purpose: <input checked="" type="radio"/> 1. Routine <input type="radio"/> 2. Follow-up <input type="radio"/> 3. Complaint <input type="radio"/> 4. Pre-Operational <input type="radio"/> 5. Temporary <input type="radio"/> 6. HACCP <input type="radio"/> 7. Other (list)	Follow-up NO	Release Date 10 days
Owner's Address 7337 W Jefferson Blvd	Summary of Violations: CL NC 4 R 2		
Person in Charge Jazzlyn Davis	Menu Type (See back of page) 1 2 X 3 4 5		
Responsible Person's E-mail			
Certified Food Handler TAUIS Walker Exp 9/2022			

- 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
245	NC		Wet cloths laying on counters; need stored in sanitizer buckets	Today
231	NC		Can opener blade is soiled with food debris	
136	C X		Personal Drink stored in saucers shelves in prep area	
295	NC		Outside of freezer doors are soiled with food debris in prep area	
298	NC X		3 microwaves are soiled with food debris inside and out	

Received by (name and title printed): Jazzlyn Davis	Inspected by (name and title printed): Scott Kendrick
Received by (signature): <i>Jazzlyn Davis</i>	Inspected by (signature): <i>Scott Kendrick FSIO</i>
cc:	cc: