



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: Hicks Subway/QuickMart, Telephone Number: (765) Establishment, Date of Inspection: 2-22-23, ID #: 27, Owner: Mike Hicks, Purpose: 1. Routine, Follow-up: NO, Release Date: 10 days, Certified Food Handler: Courtney Calabrese Exp 1-2027

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 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Contains handwritten entries for Subway and Stodie with 'No Violations' noted.

Received by (name and title printed): Cassie Leech, Inspected by (name and title printed): Scott K. Kendall, Received by (signature): Cassie Leech, Inspected by (signature): Scott Kendall F510