



**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>Ivanhoe's</i>	Telephone Number <i>765</i> Establishment	Date of Inspection (mm/dd/yr) <i>3-10-23</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>9795 Main St Upland</i>	<i>998</i> Owner	<i>NO</i>	<i>10 days</i>
Owner <i>Carol Slaw</i>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up	Release Date
Owner's Address <i>Somerset</i>		Summary of Violations: <i>C — NC 2 R —</i>	
Person in Charge <i>Darren</i>		Menu Type (See back of page) <i>1 2 3 4 5</i>	
Responsible Person's E-mail			
Certified Food Handler <i>Mark Souves exp 11-2025</i>			

- 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>NC</i>		<i>Food debris on shelves where to go items ARE stored.</i>	
<i>431</i>	<i>NC</i>		<i>Side of E UNDER grill there is food debris from previous day.</i>	

Received by (name and title printed): <i>Jennifer Jariski</i>	Inspected by (name and title printed): <i>Scott Kibendall / Dean Smith</i>
Received by (signature): <i>Jennifer Jariski</i>	Inspected by (signature): <i>Scott Kibendall / Dean Smith</i>
cc:	cc:



Operator Response to Inspection  
State Form 80047 (2-01)

# GRANT COUNTY HEALTH DEPARTMENT

Phone 765-651-2401 Ext. 3123 / 3111  
Fax 765-651-2419

DATE: 3/10/2023

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 / Scott Kikendall from the Grant Co. Health Department on 3-10-23.

DATE:	Action Taken:
<u>3/10/2023</u>	<u>Cleaned shelves above salad bar</u>
<u>3/10/2023</u>	<u>Cleaned behind freezer and set up weekly cleaning schedule</u>

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

Name of Respondent: Jennifer Jarzki Title: Manager

Establishment Name: Ivanhoe's

Address: 979 S Main St. Upland IN 46989