



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.

Form with fields: Establishment Name (Jackie's Family Restaurant), Telephone Number (765 Establishment), Date of Inspection (2-2-23), ID # (27), Establishment Address (105 N Harrisburg Ave Gas City), Owner (Jackie Engle), Purpose (1. Routine), Follow-up (No), Release Date (10 days), Person in Charge (Jackie), Responsible Person's E-mail, Certified Food Handler (S Herri Galbraith Exp 5-2023)

- 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 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Contains handwritten text: NO VIOLATIONS

Received by (name and title printed): Jackie Engle, Inspected by (name and title printed): Scott Kendall
Received by (signature): Jackie Engle, Inspected by (signature): Scott Kendall
cc: fields