



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 Pour House	Telephone Number 765 Establishment	Date of Inspection (mm/dd/yr) 2-2-23	ID # 27
Establishment Address (number and street, city, state, ZIP code) 135 W Main ST Gas City	Owner 674-6940	Follow-up NO	Release Date 10 days
Owner BRANDON ROCK	Purpose: 1. Routine	Summary of Violations: C 2 NC 2 R 1	
Owner's Address 400 E N CST	2. Follow-up	Menu Type (See back of page)	
Person in Charge Jennifer	3. Complaint	1 <u> </u> 2 <u> </u> 3 <u> </u> 4 <u>X</u> 5 <u> </u>	
Responsible Person's E-mail _____	4. Pre-Operational		
Certified Food Handler Kelly Rock Exp 9-2023	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/NC	R	Narrative	To Be Corrected By
191	C	X	Sliced ham in Beer cooler no Date MARKING	Today
295	C		CAN OPENER Blade is soiled with Food Debris From day/night Before	
295	NC		Touch points of handles on Cooler/FREEZER	
298	NC		INSIDE of microwave is soiled with food debris to include Handles	

Received by (name and title printed): Jennifer Eib	Inspected by (name and title printed): Scott Kendall / Dean Small
Received by (signature): Jennifer Eib	Inspected by (signature): Scott Kendall / Dean Small
cc:	cc: