



**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 Richards Restaurant, LLC	Telephone Number 765	Date of Inspection (mm/dd/yr) 2-3-23	ID # 27
Establishment Address (number and street, city, state, ZIP code) 864 E 45th St Marion	Establishment 677-8254	Owner 2-3-23	
Owner Dan Strong	Purpose: 1. Routine	Follow-up NO	Release Date 10 days
Owner's Address 8341 N 400 E POLYNT	2. Follow-up	Summary of Violations: C 1 NC 4 R 1	
Person in Charge ERW	3. Complaint	Menu Type (See back of page) 1 2 3 X 4 5	
Responsible Person's E-mail	4. Pre-Operational		
Certified Food Handler Delora Dale Exp 10-2024	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
295	C	1	Underneath top of Heat Lamp under grill food debris	Today
		2	Ice scoop laying directly on Ice in Fountain Pop Ice bin	
431	NC		Flooring has food and debris on floor	
		X 1)	Boxes under broaster	
		2)	Floor in walk in cooler	
		3)	House shoe bar are	
295	NC		Dried food debris on 2-burner stove top	
298	NC		Microwaves are soiled on inside	
310	NC		HVAC vents w kitchen back area have PUST and RUST on them	

Received by (name and title printed): Erin Burnworth	Inspected by (name and title printed): Scott K Kendall / Dean Small
Received by (signature): Erin Burnworth	Inspected by (signature): Scott K Kendall
cc:	cc:

GRANT COUNTY HEALTH DEPARTMENT

Phone 765-651-2401 Ext. 3123 / 3111

Fax 765-651-2419

DATE: 02/11/23

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 2-3-23.

DATE: _____ Action Taken:
On item number one the heat lamp for bacon was completely cleaned. All residue and greaser were cleaned off the lamp completely. Item #2 the floors under broaster. Our head maintenance person and the manufacturer are working on a date to fix the floors in the kitchen grill line. Items three, four, + five; the cooler has been ~~completely~~ completely detailed cleaned. The walls + horseshoe bar were completely cleaned also. All the the stove top burners were also completely cleaned this week. Item six microwaves are completely cleaned out + food removed. Lastly all of the HVAC vents and ceiling trims are being cleaned and if need be sanded and and painted. This is all being supervised by Jonathan Rathbun @ Richards. Thankyou.

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

Name of Respondent: Jonathan Rathbun Title: Co manager.

Establishment Name: Richards. Restraunts, LLC.

Address: 864 E 45th St, Marion, IN. 46953