



**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 Starbucks 11503	Telephone Number (765) 905-6279	Date of Inspection (mm/dd/yr) 2-27-23	ID # 231
Establishment Address (number and street, city, state, ZIP code) 4970 Banner Blvd Gos City	Owner Starbucks Corp	Follow-up 180	Release Date 10 days
Owner's Address P.O. Box 34492 STPO 2 WA	Purpose: 1. Routine	Summary of Violations: C - NC 1 R -	
Person in Charge MARY	2. Follow-up	Menu Type (See back of page) 1 2 3 4 5	
Responsible Person's E-mail	3. Complaint		
Certified Food Handler Mary Dewar	4. Pre-Operational		
	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
431	NC		Flowing through out to include under things & corners - soiled	Today
			2017-8 Ordinance	
			Food license to be displayed out front to be seen by guest/customers	

Received by (name and title printed): Mary Dewar	Inspected by (name and title printed): Scott K... / Dewar Supv
Received by (signature): <i>Mary Dewar</i>	Inspected by (signature): <i>Scott K... Dewar</i>
cc:	cc: