



**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>The Kings Academy</i>	Telephone Number () Establishment	Date of Inspection (mm/dd/yy) <i>23</i> <i>1-18-23</i>	ID # <i>207</i>
Establishment Address (number and street, city, state, ZIP code) <i>1201 S. Wacker St. Jonesboro</i>	() Owner	Follow-up	Release Date <i>10 days</i>
Owner <i>Same</i>	Purpose: 1. <u>Routing</u> 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Summary of Violations: <i>C — NC — R —</i>	
Owner's Address <i>Same</i>		Menu Type (See back of page) <i>1 2 3 4 5</i>	
Person in Charge <i>Elizabeth</i>			
Responsible Person's E-mail <i>—</i>			
Certified Food Handler <i>Angela Allen exp 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>- No violations -</i>	

Received by (name and title printed): <i>Elizabeth A Benberger</i>	Inspected by (name and title printed): <i>Dawn Smith</i>
Received by (signature): <i>[Signature]</i>	Inspected by (signature): <i>[Signature]</i>

cc:	cc:	cc:
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