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 AFC Sushi	**Telephone Number** (765) Establishment (998-5234) Owner	**Date of Inspection** (mm/dd/yr) 1-21-22	**ID #** 27
Establishment Address (number and street, city, state, ZIP code) 236 W Reade Ave Upland			
Owner Advanced Food Concepts Corp	**Purpose:** 1. Routine	**Follow-up** NO	**Release Date** 10 days
Owner's Address 19700 Mariner Ave CA	2. Follow-up	**Summary of Violations:**	
Person in Charge RUN	3. Complaint	C ✓ NC 1 R ✓	
Responsible Person's E-mail	4. Pre-Operational		
	5. Temporary	**Menu Type** *(See back of page)*	
Certified Food Handler ~~Van Kim~~ RUN DAM 9.2024 ~~2019 2021~~	6. HACCP	1 ___ 2 ___ 3 ✓ 4 ___ 5 ___	
	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	NC		Inside Cooler to include racks - dried front debris.	Today

Received by (*name and title printed*): R D	Inspected by (*name and title printed*): Dean Small
Received by (*signature*): [signature]	Inspected by (*signature*): Dean Small

cc:	cc:	cc: