



## **RETAIL FOOD ESTABLISHMENT INSPECTION REPORT**

**State Form 48669 (R2/2-05)**  
**SDH Form 51-0001**

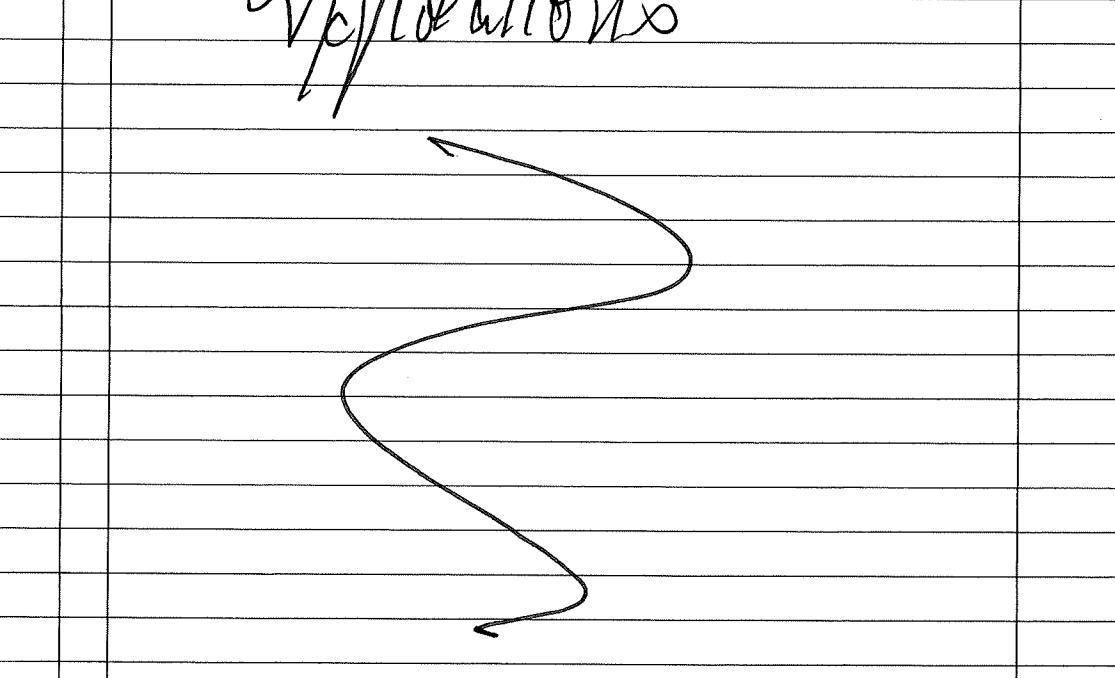
**GRANT COUNTY HEALTH DEPT.  
FOOD DIVISION  
401 SOUTH ADAMS STREET  
MARION, IN 46953**

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 <b>Boys' Girls Club Montebello</b>	Telephone Number 785-667-6441	Date of Inspection (mm/dd/yr)	ID # 27		
Establishment Address (number and street, city, state, Zip code) <b>3105 S. Michigan St., Marwood</b>	Owner Christopher Wallace				
Owner Christopher Wallace	Purpose: <ol style="list-style-type: none"> <li>1. Routine</li> <li>2. Follow-up</li> <li>3. Complaint</li> <li>4. Pre-Operational</li> <li>5. Temporary</li> <li>6. HACCP</li> <li>7. Other (list)</li> </ol>	Follow-up	Release Date 10/24/09		
Owner's Address <b>None</b>	Summary of Violations:				
Person in Charge <b>Christopher</b>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
Responsible Person's E-mail <u> </u>	Menu Type (See back of page)				
Certified Food Handler <b>Nicole Fiedler</b>	1	2	3	4	5
	11/15/24				

• 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/N/C	R	Narrative	To Be Corrected By
			 <p>McViolations</p> <p>A large, hand-drawn arrow points from the handwritten note "McViolations" down the page, spanning approximately 15 lines of the ledger.</p>	

Received by (name and title printed):

Inspected by (name and title printed)

677131-phi

144

CC:

66

cc.