



**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>Burger King #826</i>	Telephone Number <i>(765) Establishment</i>	Date of Inspection <i>(mm/dd/yr)</i> <i>2-27-25</i>	ID # <i>27</i>
Establishment Address <i>1510 Kim Rd</i>	Owner <i>664-1556</i>	Follow-up <i>NO</i>	Release Date <i>10 days</i>
Owner <i>Carrols LLC</i>	Purpose: <u>1. Routine</u>	Summary of Violations: <i>C - NC 3 R 1</i>	
Owner's Address <i>968 James St NY</i>	2. Follow-up	Menu Type (See back of page)	
Person in Charge <i>Jonathan</i>	3. Complaint	1 <u> </u> 2 <u> </u> 3 <u> </u> 4 <u> </u> 5 <u> </u>	
Responsible Person's E-mail	4. Pre-Operational		
Certified Food Handler <i>Jonathan Stodgell 4-2027</i>	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
138	NC		Employees prep'ing food without hair or beard guard	Today
431	NC	X	Flooring throughout has trench & soiled ✓	
295	NC		Following "Non Food" contact item is soiled w/ dried food or liquid.	
			1) holding areas on north side	
			2) cheese on metal plate up front	
			3) Inside holding areas in center	

Received by (name and title printed): <i>Jonathan Stodgell</i>	Inspected by (name and title printed): <i>Dawn Sims</i>
Received by (signature): <i>[Signature]</i>	Inspected by (signature): <i>[Signature]</i>
cc:	cc: