



**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>Carsey's General Store #3735</i>	Telephone Number <i>(765) Establishment</i>	Date of Inspection <i>(mm/dd/yr)</i> <i>2-16-22</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>601 W Main St</i>	<i>(677) Owner</i> <i>0305</i>		
Owner <i>Carsey Marketing Co.</i>	Purpose: <u>1. Routine</u>	Follow-up <i>NO</i>	Release Date <i>10 days</i>
Owner's Address <i>P.O. Box 3001 IA</i>	2. Follow-up	Summary of Violations: <i>C 1 NC 3 R 2</i>	
Person in Charge <i>Laura</i>	3. Complaint	Menu Type (See back of page)	
Responsible Person's E-mail	4. Pre-Operational	<i>1 2 3 X 4 5</i>	
Certified Food Handler <i>Laura Miller exp 1-2025</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
295	NC		The following 'Non food' contact items is soiled w/ dried food & or grease 1) bottom of seat 2) door handles on floor cooler 3) outside back ofayer	Today
298	NC		Microwave is soiled inside top	
295	C		Hot wheels - many empty but has dried food in or on it.	
296	NC	X	Cappuccino machine soiled on inside	

Received by (name and title printed): <i>Laura Mauller</i>	Inspected by (name and title printed): <i>Debra Smith FSA</i>
Received by (signature): <i>L Mauller</i>	Inspected by (signature): <i>Debra Smith FSA</i>
cc:	cc:

Operator Response to Inspection  
State Form 80047 (2-01)

### GRANT COUNTY HEALTH DEPARTMENT

Phone 765-651-2401 Ext. 3123 / 3111

Fax 765-651-2419

DATE: 2/16/22

**Grant County Health Department**  
**401 S. Adams St.**  
**Marion, IN. 46953**

PLEASE SEND YOUR RESPONSE TO THE GRANT COUNTY HEALTH DEPARTMENT BY MAIL OR FAX WITHIN 10 DAYS.

The following is a response to the inspection report prepared by the Health Department Food Safety Officer Dean Small / Scott Kikerdall from the Grant Co. Health Department on 2-16-22.

DATE:	Action Taken:
<u>2/16/22</u>	<u>clean all handles, fryer, &amp; scales</u>
<u>2/16/22</u>	<u>microwave deep cleaned</u>
<u>2/16/22</u>	<u>Hot well broken down cleaned completely</u>
<u>2/16/22</u>	<u>Both cappacino machines broke down &amp; cleaned</u>

(PLEASE FORWARD THIS FORM TO GRANT COUNTY HEALTH DEPARTMENT BY MAIL / FAX WITHIN 10 DAYS)

Name of Respondent: Laura Mauler Title: Store manager

Establishment Name: Caseys General Store

Address: 601 W Main St. GAS City, IN 46933

Attach additional sheets as needed.