



## 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>Circle K #4702201</i>	Telephone Number (   ) Establishment <i>765 664-7479</i>	Date of Inspection (mm/dd/yr) <i>5/1/25</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>1707 Kem Road, Marion</i>	Owner <i>Mac's Convenience Stores LLC</i>	Follow-up <i>NO Days</i>	Release Date <i>NO Days</i>
Owner's Address <i>Sample</i>	Person in Charge <i>Angela</i>	Summary of Violations:  1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) <i>_____</i>	Menu Type (See back of page)  1 <input checked="" type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>

• 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	1.	<i>The following non food contact areas out side of donut display counter and has cracked top - nooks repairs not taped - smooth easy cleanable</i>	<i>today</i>
		2.	<i>Bottom inside freezers 1 &amp; 3 out with food debris</i>	
409	NC	1	<i>+/- 5 ceiling tiles missing or broken in color to include dust on a few light fixtures</i>	<i>ASAP</i>
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Received by (name and title printed):

*Angela Warren*

Inspected by (name and title printed):

*Angela Warren*

Received by (signature):

*Angela Warren*

Inspected by (signature):

*Angela Warren*

cc:

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