



**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 Circle K 2201	Telephone Number 765 Establishment 664 7479 Owner	Date of Inspection (mm/dd/yr) 2/28/22	ID # 27
Establishment Address (number and street, city, state, ZIP code) 1707 Kem RD Marion	Owner Mac's Convenience Stores LLC	Follow-up NO	Release Date 10 days
Owner's Address PO BOX 347	Purpose: <input checked="" type="radio"/> 1. Routine <input type="radio"/> 2. Follow-up <input type="radio"/> 3. Complaint <input type="radio"/> 4. Pre-Operational <input type="radio"/> 5. Temporary <input type="radio"/> 6. HACCP <input type="radio"/> 7. Other (list)	Summary of Violations: C - NC 3 R -	
Person in Charge Rich Bockman	Responsible Person's E-mail 	Menu Type (See back of page) 1 2X 3 4 5	
Certified Food Handler Corey Stone Exp 6-22-2020			

• 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		Employee cooking with NO Hair Restraint or beard guard	Today
295	NC		TRAY ON Nacho Machine IS Soiled at with Food debris	}
324	NC		Ice on product and build up around Top of Heagen-Paz - Nestle Freezer on sales Floor	

Received by (name and title printed): Richard Bockman	Inspected by (name and title printed): Scott Kikendall
Received by (signature): R. Bockman	Inspected by (signature): Scott Kikendall FSO
cc:	cc:

GRANT COUNTY HEALTH DEPARTMENT

Phone 765-651-2401 Ext. 3123 / 3111
Fax 765-651-2419

DATE: 3-1-2022

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 Kikendall from the Grant Co. Health Department on 2-28-22.

DATE: 3-1-2022 Action Taken: Made Employer aware Hair net Beard Guard Required

3-1-2022 Pulled tray cleaned Reinstalled

3-1-2022 Chipped Ice From sides Cleaned out Put Back together

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

Name of Respondent: Cory S fowl Title: Manager

Establishment Name: Circle K

Address: 1707 W Kem Rd