



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 4702202, Telephone Number: (705) Establishment, Date of Inspection: 2-18-22, ID #: 27, Establishment Address: 300 E Main St. Gas GL, Owner: Mac's Convenience Stores, Purpose: 1. Routine, Follow-up: N/A, Release Date: 10 days, Owner's Address: P.O. Box 347 Columbus IN, Person in Charge: Tim, Responsible Person's E-mail: [redacted], Certified Food Handler: N/A

- 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"

Table with 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Narrative contains 'No violations'.

Received by (name and title printed): Tim Theodore, Inspected by (name and title printed): Dawn Small FSD, Received by (signature): [signature], Inspected by (signature): [signature] FSD, cc: [redacted]