



**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**

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-29, 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>Drnkes Fast Lane</i>	Telephone Number (740) 922-7937	Date of Inspection (mm/dd/yr) 7-10-25	ID # 27
Establishment Address (number and street, city, state, ZIP code) <i>204 N Washington St.</i>	Owner <i>Robert - Jamie Francis</i>		
Owner's Address <i>Sharpsville Twp</i>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) <i>PF</i>	Follow-up <i>NO</i>	Release Date
Person in Charge <i>Jeffeller</i>	Summary of Violations: <i>P PF 2 R 2 R 1</i>		
Responsible Person's E-mail <i></i>	Menu Type (See back of page) <i>1 2 3 X 4 5</i>		
Certified Food Handler <i>Tosha Bantum</i>			
<ul style="list-style-type: none"> • 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	R	Narrative
306	PF		<i>Manual Can Opener - Soiled (Needs cleaned after each use)</i>
245	R		<i>Filter above pizza oven is Soiled X Also dust on ceiling around metal</i>
214	PF		<i>3 Prairie Farms Sour Cream in cooler Best buy 7-4 2 " " French Onion Dips " Best buy 7-5</i>
442	C		<i>Door seal on walk in cooler - crack/broken Needs replaced</i>
Received by (name and title printed): <i>John C. Jeffries</i>		Inspected by (name and title printed): <i>John Smith</i>	
Received by (signature): <i>John Jeffries</i>		Inspected by (signature): <i>John Smith</i>	
cc:	cc:	cc:	cc: