



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 JACK'S DONUTS / Pizza King	Telephone Number 701 Establishment (619) 749-7494	Date of Inspection (mm/dd/yr) 1-13-25	ID # 27
Establishment Address (number and street, city, state, ZIP code) 417 W Main St.			
Owner Angie Boone	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) _____	Follow-up NO	Release Date 10 days
Owner's Address Fishers IN	Summary of Violations: C 1 NC 5 R 2		
Person in Charge Angie Boone	Menu Type (See back of page) 1 2 3 4 5		
Responsible Person's E-mail _____			
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”

Section#	C/NC	R	Narrative	To Be Corrected By
438	NC	X	Both restrooms must have self closers put on -	30 days
409	NC	V	+/- 3 Ceiling tiles in dairy room are stained brown in color - point or reptile Also +/- 3 @ dairy, up AREA	10 days
257	NC		Thermometers Needed in <u>ALL</u> coolers	Today
295	NC		Containers in pizza cooler - soiled on outside w/ sauce	
173	C		Donuts on RACK IN kitchen - Not covered / protected	
310	NC		Dust on Hand above pizza oven Also fan covers in walk in cooler	

Received by (name and title printed):

Received by (name and title printed):
Madison McKee

Inspected by (name and title printed):

Inspected by (name and title):

Received by (signature):

Received by (signature):
Madison McKee

~~Imported from China~~

Inspected by (signature):  W. Lee Kelly

CCII

CC

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