



**RETAIL FOOD ESTABLISHMENT  
INSPECTION REPORT**

**GRANT COUNTY HEALTH DEPT.  
FOOD DIVISION  
401 SOUTH ADAMS STREET  
MARION, IN 46953**

7-26 (AMC)

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 <u>Jay's Thai Food</u>	Telephone Number ( <u>703</u> ) Establishment Owner	Date of Inspection ( <u>5-9-25</u> ) ID # <u>27</u>
Establishment Address (number and street, city, state, ZIP code) <u>1420 S Western Ave, Miami, FL 33135</u>	ZIP Code <u>33135</u>	
Owner <u>Doreen E. Beckley</u>	Purpose:  1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) <u>None</u>	Follow-up Release Date <u>NO Follow-ups</u>
Owner's Address <u>Same</u>	Summary of Violations:  <u>P</u> <u>PF</u> <u>R</u>	
Person in Charge <u>Doreen Michael</u>	Menu Type (See back of page)	
Responsible Person's E-mail <u>None</u>	1 <u>2</u> <u>3</u> <u>4</u> <u>5</u>	
Certified Food Handler <u>Michael Beckley</u>	11/23/24	

- 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
			<p>Thermometers for cooler/freezers</p> <p>Put range of product on storage in frig. - Product marking</p> <p>Make sure stock is 6 inches off floor</p> <p>proper test strips</p>	

Received by (name and title printed):

Received by (name and title printed):  
**MICHAEL BECKLEY**

inspected by (name and title printed):

inspected by (name and title printed): John G. Cullum

Received by (signature)

Received by (signature)  
  
cc:

Inspector (Signature):

cc: 

562

CC

CC