



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.

Form header section containing: Establishment Name (Jays Thai), Telephone Number (573-6630), Date of Inspection (3/30/24), ID # (27), Owner (Jacqueline May), Owner's Address (1284 E 400 S Kokomo), Person in Charge (Jacqueline May), Responsible Person's E-mail (N/A), and Certified Food Handler (Jacqueline May Exp 10/2028). Includes Purpose (1. Routine) and Summary of Violations (C2 NC1 R1).

- 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, and To Be Corrected By. Contains three rows of violations: 191 C (Several Food Items not Date Marked), 430 NC X (Floors to include baseboards and under eqpt. soiled with food debris/buildup), and 295 C (Cup opener stored clean soiled with food debris).

Signature section containing: Received by (name and title printed): Jacqueline M. May; Inspected by (name and title printed): Kyle Kellogg Food Inspector; Received by (signature); Inspected by (signature); and cc: fields.