



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 7-21, 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>Johnson Amoco #2</u>	Telephone Number (760) 998-2608	Date of Inspection (mm/dd/yr) 7-14-25	ID # 27
Establishment Address (number and street, city, state, ZIP code) <u>802 S Massachusetts Ave Matthew</u>			
Owner <u>Johnson Oil Company</u>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) <u></u>	Follow-up <u>No</u>	Release Date
Owner's Address <u>Garden Inn</u>	Summary of Violations: <u>R - PC - B - K</u>		
Person in Charge <u>Audrey</u>	Menu Type (See back of page)		
Responsible Person's E-mail <u></u>	1 <u> </u> 2 <u> </u> 3 <u>B</u> 4 <u> </u> 5 <u> </u>		
Certified Food Handler <u>Audrey Fluhre 12-2022</u>			

- 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"

Received by (name and title printed):

by (name and title printed):
Audrey Flaher

Inspected by (name and title printed):

Received by (signature):

ed by (signature): 

Inspected by (signature)

CC:

667

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