



**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 <i>La Charreda Mexican Restaurant</i>	Telephone Number Establishment <i>765</i> (651) Owner <i>651-0652</i>	Date of Inspection (mm/dd/yr) <i>8/15/21</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>1102 of Baldwin Ave, Mpls</i>			
Owner <i>Juan Buerca</i>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) <i>None</i>	Follow-up <i>NO</i>	Release Date <i>—</i>
Owner's Address <i>Same</i>	Summary of Violations: <i>P ← R C R</i>		
Person in Charge <i>Juan</i>	Menu Type (See back of page)		
Responsible Person's E-mail <i>—</i>			
Certified Food Handler <i>Juan Buerca</i>	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>		
9/18/21			

- 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
2423	C		Compost shall be covered with dry soil and other debris	Today
210a	PF		Improperly throwing of bagged onions Must be thrown in Refuseator over night or under constant running water	<i>Both locations corrected and sealed</i>

Received by (name and title printed):

Inspected by (name and title printed):

Received by (signature):

Inspected by (signature):

cc:

cc:

cc