



**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 Loves Travel Shop #323	Telephone Number 765-662-6462	Date of Inspection (mm/dd/yr) 2-9-22	ID # 27
Establishment Address (number and street, city, state, ZIP code) 253 Tippy Pitch Dr Marion	Owner 662-6462		
Owner Loves Travel Steps & Country Stores	Purpose: 1. Routine	Follow-up No	Release Date Today
Owner's Address Oklahoma City OK	2. Follow-up	Summary of Violations: C <u>1</u> NC <u> </u> R <u> </u>	
Person in Charge Kim	3. Complaint		
Responsible Person's E-mail <u> </u>	4. Pre-Operational	Menu Type (See back of page) 1 <u> </u> 2 <u>X</u> 3 <u> </u> 4 <u> </u> 5 <u> </u>	
Certified Food Handler Kimberly Willis Exp 1-9-2025	5. Temporary		
	6. HACCP		
	7. Other (list)		

• 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
295	C		3 Ice Scoops laying directly on top of Ice Machine touching Plastic Bags and top of Ice Machine; need to be in protective container / OR IN Ice with handles up	Today

Received by (name and title printed): Kim Willis	Inspected by (name and title printed): Scott Kikendall	
Received by (signature): <i>Kim Willis</i>	Inspected by (signature): <i>Scott Kikendall FSO</i>	
cc:	cc:	cc:

Operator Response to Inspection
State Form 80047 (2-01)

GRANT COUNTY HEALTH DEPARTMENT

Phone 765-651-2401 Ext. 3123 / 3111
Fax 765-651-2419

DATE: 2-9-22

Grant County Health Department
401 S. Adams St.
Marion, IN. 46953

PLEASE SEND YOUR RESPONSE TO THE GRANT COUNTY HEALTH DEPARTMENT BY MAIL OR FAX WITHIN 10 DAYS.

The following is a response to the inspection report prepared by the Health Department Food Safety Officer Dean Small / Scott Kikendall from the Grant Co. Health Department on 2-9-22.

DATE: 2-9-22 Action Taken: the ice scoops have been washed and placed in a clear plastic bag. After each use they will be put into a new clean bag

(PLEASE FORWARD THIS FORM TO GRANT COUNTY HEALTH DEPARTMENT BY MAIL / FAX WITHIN 10 DAYS)

Name of Respondent: Kimberly Willis Title: EFC

Establishment Name: Loves

Address: 253 Tippy Ditch dr marion In 46952