

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

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.

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| Establishment Name Murphys Pizza | | | | Telephone Number () Establishment | Date of Inspection (mm/dd/yr) ID # | |
| Establishment Address (number and street, city, state, ZIP code) | | | | (451-9999 | 3/20/24 21 | |
| Owner Deep Moon | | | | Purpose: 1. Routine | Follow-up Release Date | |
| Owner's Address | | | | 1 Fallani um | S | |
| Carnel in | | | | 2. Follow-up | Summary of Violations: | |
| Person in Charge | | | | 3. Complaint 4. Pre-Operational | C NC R | |
| A Millip | | | | | | |
| Responsible Person's E-mail | | | | 5. Temporary | Menu Type (See back of page) | |
| | | | | 6. HACCP | " | |
| Coult To al Hamilton | | | | 7. Other (list) | $\begin{bmatrix} 1 & 2 & 3 & 4 & 5 \end{bmatrix}$ | |
| Certified Food Handler | | | | | 12_/\345 | |
| 1/1/2020 | | | | | | |
| • 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# | | R | Narrative | 1 | To Be Corrected By | |
| 295 | 295 NC The following NON Food Contact are Today | | | | | |
| | Soiled with direct Food debris | | | | | |
| | 1) Shelf Near Pizza prep area | | | | | |
| | The state of the s | | | | | |
| | 2) dish carts | | | | | |
| | 3) glasstop above pizza toppings) | | | | | |
| | | | | | | |
| 795 | 295 C Sheif in Kitchen next to 3 bgy sink | | | | | |
| 210 | | | | | | |
| | | | | | | |
| Food debris | | | | | | |
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| Received by (name and title printed): Inspected by (name and title printed): | | | | | | |
| Garel Logue FS10 | | | | | | |
| Received by (signature): Inspected by (signature): | | | | | | |
| Più (1. Puo | | | | | | |
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| cc: cc: | | | | | | |
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