

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.

		water water water			
Establishm	ent Name	سرتا		Telephone Number () Establishment	Date of Inspection (mm/dd/yr) ID #
TOUR SOURT				1	n 50 , 01. 97
Establishment Address (number and street, city, state, ZIP code)				() Owner	1.2024 21
Owner Park				Purpose:	Folloy-up Release Date
LIKATUSA TUCK				1. Routine	10000
Owner's Address				2. Follow-up	Summary of Violations:
				3. Complaint	
Person in Charge				_	C / NC / R
Scarlan				4. Pre-Operational	
Responsible Person's E-mail				5. Temporary	Menu Type (See back of page)
xtesponoisi			•	6. НАССР	L
Certified Food Handler				7. Other (list)	1 2 $3l/4$ 5
Brus den Publication Park					
• 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 Narrative	ali antidiscondina seriale con seria anno antidiscondina esta della della della della della della della della d	To Be Corrected By
191	P			4.0 1.1 0.1	
171			NO dutes on Capille I Hap bue	JCR IN Coden	-
			Also hamis Hope cooler	-	
201	nr		Tark da may		
011	100		INSI CO MICROUME SILY		
			•		
			A CONTRACTOR OF THE PROPERTY O		
			-		
					
			· · · · · · · · · · · · · · · · · · ·		
				, u <u>tara-quan</u> ,	
·					
D: 15			, i.e. D	T	
Received by (name and title printed): Inspected by (name and title printed):					
Brandon Kock Den Sour!					
Received by (signature): Inspected by (signature):					
The Will tell					
cc: cc: cc:					