



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.

Form with fields for Establishment Name (Ruler Foods #239), Telephone Number (765 Establishment), Date of Inspection (3-28-24), ID # (27), Owner (Kroger Limited Partnerships), Purpose (1. Routine), Follow-up, Release Date (10 days), Owner's Address (Nashville TN), Person-in-Charge (Randy), Responsible Person's E-mail, Certified Food Handler (N/A), and Menu Type (1/2/3/4/5).

- 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"

Table with columns: Section#, C/NC, R, Narrative, To Be Corrected By. Contains two entries: 409 NC (ceiling tiles brown) corrected in 15 days; 433 NC (maps hanging) corrected today.

Signature section with fields for Received by (name and title printed), Inspected by (name and title printed), Received by (signature), Inspected by (signature), and cc: fields.