



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: Ruler Foods # 239, Telephone Number: 765 Establishment, Date of Inspection: 1-31-22, ID #: 227, Establishment Address: 1129 N Baldwin Ave Marion, Owner: Kroger Limited Partnership I, Purpose: 1. Routine, Follow-up: NO, Release Date: 78 days, Owner's Address: PO Box 305103 TN, Person in Charge: Randy, Responsible Person's E-mail: [blank], Certified Food Handler: N/A

- 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. Narrative contains 'No Violations'.

Received by (name and title printed): RANDY THOMASON, Inspected by (name and title printed): Scott Kibendell, Received by (signature): [Signature], Inspected by (signature): Scott Kibendell #510

cc: [blank]