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: Speedway #1035	Telephone Number ( ) Establishment 765 ( ) Owner 205-3269	Date of Inspection (mm/dd/yr): 10/4/24	ID #: 27
Establishment Address (number and street, city, state, ZIP code): 1505 S Western Ave, Marion			
Owner: Speedway LLC	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up: yes	Release Date: 10 Days
Owner's Address: Same		Summary of Violations: C 2 NC 5 R 3	
Person in Charge: Krista			
Responsible Person's E-mail:		Menu Type (See back of page): 1 2✓ 3 4 5	
Certified Food Handler: Krista Cunningham 12/22 Issued			

- 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
205	NC		The following "Hand Contact" items are soiled with syrup, dark debris ect. 1) Slurpee machines - all 2) Coffee, cappuccino, ice coffee (machines) 3) International Delight Machines 4) Touch points on all equipment in kitchen	Today
431	NC		Walk in cooler floor to include floor in walk in cooler	
297	NC ✓		Microwave soiled with food debris in kitchen and self serve area	
243	NC		Paper products directly on floor - need to be 6 in off floor	
303	C		No sanitizer made up in kitchen	

Received by (name and title printed): Krista Cunningham Store Leader

Received by (signature):

Inspected by (name and title printed): Angela McCallum

Inspected by (signature): 1510

cc: | cc: | cc:

NARRATIVE REPORT

Establishment Name	Address	Inspection Date
Speedway #1038	1550 S. Western Ave	10/4/24

Section#	C/NC	R	REMARKS	TO BE CORRECTED BY
295	C		The following "Food Contact" items are soiling with dry food, dust etc:	today
			1) tongs directly on counter	
		✓	2) food warmer & pizza warmer	
24C	NC		Used gloves on prep table.	
			- glove usage one time only	

Received By (Name & Title)	Inspected By (Name & Title)	Page
Christa Cunningham Store Leader	[illegible signature] 7810	Page 2 of 2

State Form 48621 (R2 / 8-05)