



**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 <i>Steak &amp; Shake #290</i>		Telephone Number <i>76 Establishment</i>	Date of Inspection <i>(mm/dd/yr)</i> <i>1-22-24</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>2624 S. Wackerly Ave.</i>		Owner <i>664-1101</i>		
Owner <i>Steak &amp; Shake INC</i>	Purpose: <u>1. Routine</u>	Follow-up <i>NO</i>	Release Date <i>10 days</i>	
Owner's Address <i>107 S. Penn St Suite 400 Indianapolis</i>	2. Follow-up	Summary of Violations: <i>C 2 NC 3 R</i>		
Person in Charge <i>Kellie</i>	3. Complaint	Menu Type (See back of page) <i>1 2 3 4 5</i>		
Responsible Person's E-mail	4. Pre-Operational			
Certified Food Handler <i>Kellie McCord exp 12-2024</i>	5. Temporary			
	6. HACCP			
	7. Other (list)			

• 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/C	R	Narrative	To Be Corrected By
<i>295</i>	<i>MC</i>		<i>The following "Non food" Contact items are soiled w/ dried food - other</i> 1) <i>Side of grill</i> 2) <i>Inside drawers, below grill</i> 3) <i>Top-back side of fryers - soiled w/ grease</i> <i>Also bottom of fryer</i> 4) <i>Ketchup on floor behind drinks in dining room</i> 5) <i>Food debris on floor and stuff in Top Cream Area</i>	<i>Kochers</i>
<i>295</i>	<i>C</i>		<i>Small Dixie cups w/ lids has food (french fries) inside</i>	<i>Also stored clean</i>
<i>399</i>	<i>NC</i>		<i>Dust on ceiling and around HVAC</i>	<i>soiled w/ food</i>
<i>431</i>	<i>MC</i>		<i>Food &amp; trash on floor walk to freezer</i>	
<i>191</i>	<i>C</i>		<i>Birthday Cake Syrup w/ USE by date of 1-12-2023 and others w/ 2023 use by date</i>	

Received by (name and title printed): <i>Kellie C McCord</i>	Inspected by (name and title printed): <i>Debra Smith</i>
Received by (signature): <i>Kellie C McCord</i>	Inspected by (signature): <i>Debra Smith</i>
cc:	cc:

Phone 765-651-2401 Ext. 3123/3111  
Fax 765-651-2419

DATE: 1-22-2024

Grant County Health Department  
401 S. Adams St.  
Marion, IN. 46953

PLEASE SEND YOUR RESPONSE TO THE GRANT COUNTY HEALTH DEPARTMENT BY MAIL OR FAX WITHIN 10 DAYS.

The following is a response to the inspection report prepared by the Health Department Food Safety Officer Dean Small / April Legare from the Grant Co. Health Department on 1-22-2024

Date: 1-22-2024 Action Taken:

The side of grill, outside & inside of bread drawers  
have been cleaned!!

The top, side, back, and under of fryers have been degreased  
Ketchup on floor has been cleaned & controlled!!

2oz drink cup/lids have been cleaned & covered!  
Dust on Hvac & ceiling cleaned.  
Walk in freezer floor has been swept & mopped  
Syrup bottles were labeled w/ correct times & dates!

(PLEASE FORWARD THIS FORM TO THE GRANT COUNTY HEALTH DEPARTMENT BY MAIL/FAX WITHIN 10 DAYS)

Name of Respondent: Kellia C McCord Title: General Manager

Establishment Name: Steak n' Shake