



Establishment Name <b>Subway #3139</b>		Telephone Number (765) 867-1805		Date of Inspection (mm/dd/yr) 4/1/25	ID # 27
Establishment Address Number and street, city, state, ZIP code 3411 So Western Ave., Muncie, IN 47305		Owner Estes Company		Follow-up NO	
Owner's Address Same		Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)		Release Date 10 Days	
Person in Charge Kayla				Summary of Violations: C 1 NC 2 R 1	
Responsible Person's E-mail				Menu Type (See back of page) 1 2 X 3 4 5	
Certified Food Handler Kayla Holcomb 12/29/23					
• 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	
308	NC	✓	HVAC vented dining area has dust	Today	
399	NC		Chaulking around prep sink has dark residue - needs cleaned or replaced		
299	C		Ice machine has dark Residue on inside - needs cleaned		
Received by (name and title printed): Kayla Holcomb			Inspected by (name and title printed): Lynette M Callum		
Received by (signature): Kayla Holcomb			Inspected by (signature): Lynette M Callum		
cc:			cc:		

## Grant County Health Department

Phone 765-651-2401 ext 3111 / 3123  
Fax 765-651-2419

Date: 4-7-2025

765-651-2401 (Phone) 765-651-2419 (Fax)  
Grant County Health Department  
401 South Adams Street  
Marion, IN 46953

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

The following is my response to the inspection report prepared by the Health  
Department Food Safety Officer Dean Small / Angela McCollum on 4-1-25

<u>DATE</u>	<u>ACTION TAKEN</u>
<u>4-1-25</u>	<u>had smR come out and inspect</u> <u>Ice machine and clean it.</u>
<u>4-1-25</u>	<u>SmR ticket for vents to be cleaned</u>
<u>4-6-25</u>	<u>Subways maintenance man Re caulked around</u> <u>siding</u>

(Please forward this form to the Grant County Health Department by  
Mail / Fax with 10 days)

Name Kayla Holcomb Title General Manager  
Establishment Subway #3139  
Address 3411 S Western Ave. Marion, IN 46953