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: Taco Bell 342	Telephone Number: (765) Establishment ( ) Owner	Date of Inspection (mm/dd/yr): 2-16-24	ID #: 27
Establishment Address (number and street, city, state, ZIP code): 914 N Baldwin Av			
Owner: KMAC Enterprises Inc	Purpose: 1. Routine	Follow-up: NO	Release Date: 10 days
Owner's Address: 6886 Millsaw Rd NC	2. Follow-up	Summary of Violations:	
Person in Charge: Jeff	3. Complaint	C— NC___ R___	
Responsible Person's E-mail:	4. Pre-Operational		
Certified Food Handler: Shelby Arnold exp 4-2024	5. Temporary	Menu Type (See back of page): 1___ 2 10 3___ 4___ 5___	
	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/NC	R	Narrative	To Be Corrected By
298	NC		The following Non Food "contact items is soiled w/ dried food grease	7 days
			1) Step ladder by hand sink	
			2) outside of press / machine	
			3) Inside freezer by grill	
			4) Front of fountain / in dining - soiled	
399	NC		Tiles missing / broken along wall in walk in cooler	30 days

Received by (name and title printed): Jeff Johnson	Inspected by (name and title printed): Deman Engel
Received by (signature): [signature]	Inspected by (signature): [signature] FSID
cc:	cc:
	cc: