



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	Date of Inspection 2-14-22 (mm/dd/yr)	ID # 27	
Establishment Address (number and street, city, state, ZIP code) 916 N Baldwin Marion	Owner 664-8427	Follow-up NO		
Owner K-Mac Enterprises INC	Purpose: <input checked="" type="radio"/> 1. Routine	Release Date 16 days	Summary of Violations: C NC — R 	
Owner's Address 688 E Milsap Rd Suite 200 AR	<input type="radio"/> 2. Follow-up	Menu Type (See back of page) 1 <u> </u> 2 <u>X</u> 3 <u> </u> 4 <u> </u> 5 <u> </u>		
Person in Charge McKinzie	<input type="radio"/> 3. Complaint			
Responsible Person's E-mail _____	<input type="radio"/> 4. Pre-Operational			
Certified Food Handler Devon Washington Exp 12-17-2020	<input type="radio"/> 5. Temporary			
	<input type="radio"/> 6. HACCP			
	<input type="radio"/> 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
295	C		press in prep area is heavily soiled under press and outside to include pull out warmer beside FT	Today

Received by (name and title printed): MacKenzie Sharpless RGM	Inspected by (name and title printed): Scott K Kendall
Received by (signature): 	Inspected by (signature):
cc:	cc:

GRANT COUNTY HEALTH DEPARTMENT

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

DATE: 2/15/22

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 / Scott Kikendall from the Grant Co. Health Department on 2-14-22.

DATE: 2/15/22 Action Taken:

Press grill + steamer cleaned immediately upon realizing they were soiled. Talked to night shift about making sure all things are cleaned before leaving.

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

Name of Respondent: Kenzie Sharpless Title: REGM

Establishment Name: Taco Bell #342

Address: 916 N. Baldwin Ave. Marion, IN 46953