



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>Volcan General Store #17289</i>	Telephone Number () Establishment <i>765-251-9190</i>	Date of Inspection (mm/dd/yr) <i>2/13/23</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>1702 E 900th St Rd 25 - Fairmont IN 46910</i>	Purpose: ☒ 1. Routine ☐ 2. Follow-up ☐ 3. Complaint ☐ 4. Pre-Operational ☐ 5. Temporary ☐ 6. HACCP ☐ 7. Other (list) _____	Follow-up <i>NO</i>	Release Date <i>10/10/23</i>
Owner <i>Volcan Corp, LLC</i>		Summary of Violations: <i>C - NC - R -</i>	
Owner's Address <i>Carroll</i>		Menu Type (See back of page) <i>1 X 2 3 4 5</i>	
Person in Charge <i>Brooklyn</i>			
Responsible Person's Email <i>N/A</i>			
Certified Food Handler <i>N/A</i>			

• 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	NC		The following "Non Food Contact items" pooled with a dry food, dust & black debris - <i>Today</i> 1 Bottom shelf of frozen cooler throughout 2 Bottom shelf of cooler throughout Food license shall be displayed up front to be visible by customer (per County Ordinance 110.15)	
399	NC		Curbside near front of store falling down/sagging - physical facilities not maintained - <i>ASAP</i>	

Received by (name and title printed):

Brooklyn B

Received by (signature):

Don Burt

Inspected by (name and title printed):

Angela R. McCallum

Inspected by (signature):

Angela R. McCallum 7810

cc:

cc:

cc: