RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

State Form 48669 (R2/2-05)
SDH Form 51-0001

Brown County Health Department
P.O. Box 281, Nashville, IN 47448
812-988-2255

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 DOLLAR GENERAL	**Telephone Number** (812) 730-9125	**Date of Inspection** (*mm/dd/yr*) 4/29/2025	**ID #**
Establishment Address (*number and street, city, state, ZIP code*) 5028 St Rd 135 Morgantown	( )		
Owner Dolgen Corp, llc	**Purpose:** ~~1. Routine~~	**Follow-up** NO	**Release Date** 5/10/2025
Owner's Address 100 MISSION RIDGE GOODLETTSVILLE TN	2. Follow-up	**Summary of Violations:**	
Person in Charge	3. Complaint	C Ø NC Ø R Ø	
Responsible Person's E-mail tax-beer and wine license@dollargeneral.com	4. Pre-Operational		
Certified Food Handler N/A by prepacked foods	5. Temporary	**Menu Type** (*See back of page*)	
	6. HACCP	1 X 2 3 4 5	
	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
			NO VIOLATIONS OBSERVED @ time of	
			inspection	

Received by (*name and title printed*): Jodi Boyd	Inspected by (*name and title printed*): Jennifer HELLER, EHS / Tiffany Pettit
Received by (*signature*): Jodi Boyd	Inspected by (*signature*):
cc:	cc: / cc: