



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>9th Street Café - dba Cafe Folio LLC</i>	Telephone Number (785) 664-1851	Date of Inspection (mm/dd/yr) <i>4/23/25</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>1831 W. 9th Street, Manhattan, KS 66502</i>	Owner <i>John Kennedy</i>	Follow-up <i>NO</i>	Release Date <i>10 days</i>
Owner's Address <i>5001</i>	Purpose: <ol style="list-style-type: none"> 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) <i>Wanetta Lloyd</i> 	Summary of Violations: <i>C NC R</i>	
Person in Charge <i>John</i>	Menu Type (See back of page)		
Responsible Person's E-mail <i></i>	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>		
Certified Food Handler <i>Wanetta Lloyd</i>	3/9/22		

- 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"