



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>Aldi #18</i>	Telephone Number (165) Establishment Owner <i>5175814</i>	Date of Inspection (mm/dd/yr) <i>4/21/25</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>2007 S. 1st Street, Indianapolis, Indiana</i>			
Owner <i>Aldi (Indiana) LP</i>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) <i>_____</i>	Follow-up <i>NC</i>	Release Date <i>10 days</i>
Owner's Address <i>500 N. Zionsville Rd., Indianapolis, Indiana 46268</i>	Summary of Violations: <i>C NC R</i>		
Person in Charge <i>Brett Frazier</i>	Menu Type (See back of page) <i>Y 2 3 4 5</i>		
Responsible Person's E-mail <i>_____</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"

Received by (name and title printed):

Brett Frazier

Inspected by (name and title printed):

Received by (signature):

d by (signature):

Investigations

CC7

cc.

cc: