



## 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 <u>American Legion Post #313</u>	Telephone Number ( ) <u>765</u> ( ) <u>948-4431</u>	Date of Inspection (mm/dd/yr) <u>24/25/27</u>	ID # <u>27</u>
Establishment Address (number and street, city, state, ZIP code) <u>528 E 8th St., Fairmount</u>			
Owner <u>American Legion Post #313, INC</u>	Purpose:  <input checked="" type="radio"/> 1. Routine <input type="radio"/> 2. Follow-up <input type="radio"/> 3. Complaint <input type="radio"/> 4. Pre-Operational <input type="radio"/> 5. Temporary <input type="radio"/> 6. HACCP <input type="radio"/> 7. Other (list)  <u>None</u>	Follow-up <u>NO</u>	Release Date <u>10 Days</u>
Owner's Address <u>None</u>	Summary of Violations:  <u>C NC 1 R</u>		
Person in Charge <u>Stephanie</u>	Menu Type (See back of page)  <u>1 2 X 3 4 5</u>		
Responsible Person's E-mail <u>None</u>			
Certified Food Handler <u>Mura Bennie</u>	6/28/23		

• 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):

Received by (name and title printed):  
Stephanie L. Hill, Frontender

Digitized by *username* and title provided by *library*

Inspected by (name and title printed):  
Franklin H. Alum

### German

Received by (signature):

~~W. H. Dugay~~

Inspected by (signature):  CC

cc:

10.1007/s00339-007-0332-2

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Operator Response to Inspection  
State Form 80047 (2-01)

## Grant County Health Department

Phone 765-651-2401 ext 3111 / 3123  
Fax 765-651-2419

Date: 2/18/2025

765-651-2401 (Phone) 765-651-2419 (Fax)  
Grant County Health Department  
401 South Adams Street  
Marion, IN 46953

PLEASE SEND YOUR RESPONSE TO THE GRANT COUNTY HEALTH DEPARTMENT, BY MAIL OR BY FAX, WITHIN TEN (10) DAYS.

The following is my response to the inspection report prepared by the Health Department Food Safety Officer Dean Small / Angela McCollum on 2-14-25

DATE      ACTION TAKEN

2/19/2025    Adjust lower kick panel

(Please forward this form to the Grant County Health Department by Mail / Fax with 10 days)

Name Andy Henderson Title Finance Officer

Establishment American Legion Post 313

Address Po Box 164 522 E. 8th St. Fairmount, IN 46928

Attach additional sheets as needed.