



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.

Form with fields: Establishment Name (Arbys #127), Telephone Number (765-264-2645), Date of Inspection (6-4-20), ID # (27), Establishment Address (1001 N. Baldwin Ave Marion), Owner (Heretland Beef Inc), Purpose (1. Routine), Follow-up (NO), Release Date (70 days), Owner's Address (1703 N College Ave Bloomington IN), Person in Charge (Shelly), Responsible Person's E-mail, Certified Food Handler (Shelly Williams exp 9/2021), Menu Type (1 2 X 3 4 5)

- 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"

Table with columns: Section#, CNC, R, Narrative, To Be Corrected By. Row 1: 295, NC, X, The following "Non food" contact items is soiled w/ food & oil just 1) Inside floor cooler 2) Top of the warmer/fryer, Corrected

Received by (name and title printed): Shelly Williams
Inspected by (name and title printed): Dean Small (PSP) / Scott Kiper (chef)
Received by (signature): [Signature]
Inspected by (signature): [Signature]
cc: [ ] cc: [ ] cc: [ ]