

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

GRANT COUNTY HEALTH DEPARTMENT

Phone 765-651-2401 Ext. 3123 / 3111
Fax 765-651-2419

DATE: 9/8/20

Grant County Health Department
401 S. Adams St.
Marion, IN. 46953

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

The following is a response to the inspection report prepared by the Health Department Food Safety Officer Dean Small / Scott Kikendall from the Grant Co. Health Department on 9-8-20.

DATE:	Action Taken:
	<u>345-C Hand sink in Kitchen by Storage Rack has food debris in and around sink - Cleaned out sink and around hand sink</u>
	<u>coached team members to only use hand sinks for washing hands. 9/8/20</u>

(PLEASE FORWARD THIS FORM TO GRANT COUNTY HEALTH DEPARTMENT BY MAIL / FAX WITHIN 10 DAYS)

Name of Respondent: Cassandra Himmel Title: General Manager

Establishment Name: Buffalo Wild Wings

Address: 1129 N. Baldwin Ave.

Attach additional sheets as needed.