



**RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT**

State Form 48669 (R2/2-05)
SDH Form 51-0001

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**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 7-28, 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 Dining Boards 'n More	Telephone Number () Establishment () Owner	Date of Inspection (mm/dd/yr) 6-3-28	ID # 27
Establishment Address (number and street, city, state, ZIP code) 4894 W Brooks Dr, Ligonier			
Owner Shari Colley	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP	Follow-up	Release Date
Owner's Address 5100	Summary of Violations: P - PC - B -		
Person in Charge Shari Colley	Menu Type (See back of page)		
Responsible Person's E-mail 			
Certified Food Handler Shari Colley	7. Other (list) Cheri's Park	1 <input checked="" type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	

- 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):
Traci Corey

Inspected by (name and title printed):

Inspected by (name and title),
Dean Smith

Received by (signature):

Received by (signature):

Inspected by (signature)

Inspected by (signature)

cc.

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