



# 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**

7-26

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>Collins General Corp 17289</u>	Telephone Number (      ) Establishment (      ) Owner	Date of Inspection (mm/dd/yr) <u>11/15/2021</u>	ID # <u>2127</u>
Establishment Address (number and street, city, state, ZIP code) <u>1702 &amp; 903 30th (D) 26 Fairmount</u>			
Owner <u>Dolgen Corp, LLC</u>	Purpose: <ul style="list-style-type: none"><li><input checked="" type="checkbox"/> 1. Routine</li><li><input type="checkbox"/> 2. Follow-up</li><li><input type="checkbox"/> 3. Complaint</li><li><input type="checkbox"/> 4. Pre-Operational</li><li><input type="checkbox"/> 5. Temporary</li><li><input type="checkbox"/> 6. HACCP</li><li><input type="checkbox"/> 7. Other (list) _____</li></ul>	Follow-up <u>NO</u>	Release Date <u>10 Days</u>
Owner's Address <u>same</u>	Summary of Violations: <u>P1 PF-C</u>		
Person in Charge <u>Jennifer</u>	Menu Type (See back of page) <u>1 X 2 3 4 5</u>		
Responsible Person's E-mail <u></u>			
Certified Food Handler <u>N/A</u>			

- 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):

Inspected by (name and title printed):

Received by (signature):

Inspected by (signature)

CC:

CC

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