



**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 | Telephone Number | Date of Inspection | ID # |
| Dollar General Store #7369 | (765) 235-6550 | 2/28-28 | 27 |
| Establishment Address (number, and street, city, state, ZIP code) | Purpose: | Follow-up | Release Date |
| 1104 North Baldwin Ave, Marion | 1. Routine | 100 Days | |
| Owner | 2. Follow-up | | |
| Dollar Gen Corp LLC | 3. Complaint | | |
| Owner's Address | 4. Pre-Operational | | |
| Same | 5. Temporary | | |
| Person in Charge | 6. HACCP | | |
| Sarah | 7. Other (list) | | |
| Responsible Person's E-mail | | Menu Type (See back of page) | |
| Certified Food Handler | | 1 <input checked="" type="checkbox"/> 2 <input 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"

| Section# | C/NC | R | Narrative | To Be Corrected By |
|----------|------|---|---|--------------------|
| 176 | NC | | Product sitting on the freezer floor - needs to be 6 inches off the floor | Today |
| 295 | NC | | The following Non food contact items is covered with dry food 1. Insulated cooler (ice bath) at bottom 2. Bottom of ice cream freezer 3. Yards in cooler in back of store | |
| 431 | NC | | floor through out store soiled | |

* Complaint Not Found

| | |
|---|---|
| Received by (name and title printed): Sarah Sivasy Store Manager | Inspected by (name and title printed): Angela R. M. John Pearson |
| Received by (signature): <u>Sarah Sivasy</u> | Inspected by (signature): <u>Angela R. M. John Pearson</u> |
| cc: | cc: |