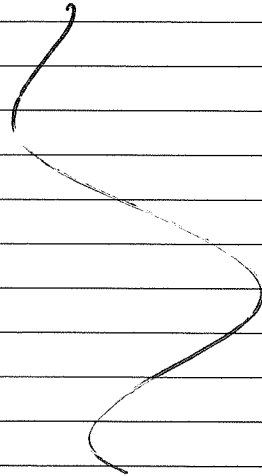




Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name <b>Dollar Tree #28786</b>	Telephone Number ( ) Establishment <b>765</b> ( ) Owner <b>573-2086</b>	Date of Inspection (mm/dd/yr) <b>5/29/23</b>	ID # <b>27</b>
Establishment Address (number and street, city, state, ZIP code) <b>321 W. 3rd St., Marion</b>	Purpose: <input checked="" type="checkbox"/> 1. Routine <input type="checkbox"/> 2. Follow-up <input type="checkbox"/> 3. Complaint <input type="checkbox"/> 4. Pre-Operational <input type="checkbox"/> 5. Temporary <input type="checkbox"/> 6. HACCP <input type="checkbox"/> 7. Other (list) _____	Follow-up <b>NO</b>	Release Date <b>10 Days</b>
Owner <b>Family Dollar Stores of IN, LLC</b>		Summary of Violations:  <b>P PF E</b>	
Owner's Address <b>3000</b>		Menu Type (See back of page) <b>1 X 2 3 4 5</b>	
Person in Charge <b>Rachelle / Dennis</b>			
Responsible Person's E-mail <b>N/A</b>			
Certified Food Handler <b>N/A</b>			

- 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#	CNC	R	Narrative	To Be Corrected By
			<p>violation</p> 	

Received by (name and title printed): DENNIS STEVENS		Inspected by (name and title printed): Jorge R. McCallum	
Received by (signature): 		Inspected by (signature): 	
cc:		cc:	