



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.

Form with fields: Establishment Name (Dominos PIZZA), Telephone Number (765 Establishment, 664-6060 Owner), Date of Inspection (9-8-20), ID # (27), Establishment Address (1701 S Western Ave Marion), Owner (Jeff Stegen), Purpose (1. Routine), Follow-up (NO), Release Date (10 days), Owner's Address (1914 Abnaki Dr West Lafayette), Person in Charge (Jeff), Responsible Person's E-mail, Certified Food Handler (NOT Provided/New District Manager), Summary of Violations (C L NC L R), Menu Type (1 2 3 4 5).

- 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"

Table with 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: 345, C, 3 Hand sinks with food debris in and around them, Today. Row 2: 291, NC, Sanitizing strips not provided, Today. Row 3: Face masks must be worn while food prepping and waiting on customers.

Received by (name and title printed): Jeff Rittenhouse Jr, Inspected by (name and title printed): Scott Kibbenell #510, Received by (signature): [Signature], Inspected by (signature): [Signature], cc: [Blank]