



**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 DUNKIN DONUTS	Telephone Number (705) Establishment	Date of Inspection (mm/dd/yr)	ID #
Establishment Address (number and street, city, state, ZIP code) 830 N Baldwin Ave MARION	Owner (573) 6459	2-14-22	27
Owner Jay Funko	Purpose: 1. Routine	Follow-up NO	Release Date 10 days
Owner's Address 550 E Devon Ave Suite 180 IL	2. Follow-up	Summary of Violations: C2 NC2 R1	
Person in Charge Molly	3. Complaint	Menu Type (See back of page)	
Responsible Person's E-mail	4. Pre-Operational	1 <u> </u> 2 <u>X</u> 3 <u> </u> 4 <u> </u> 5 <u> </u>	
Certified Food Handler Molly Riel Exp 3-28-2024	5. Temporary		
	6. HACCP		
	7. Other (list)		

- 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
345	C		Hand Sink across from donuts has no paper towel and a wet cloth laying on sink	Today
431	NC	X	Flooring throughout Prep and Storage area to include walk in cooler and freezer has debris	}
295	C		Ice Scoop laying Storage Rack beside Ice Machine; must be in Ice machine or protective covering	
245	NC		Soiled wet cloth laying in back by hand sink	

Received by (name and title printed): Molly Riel	Inspected by (name and title printed): Scott K Kendall
Received by (signature): <i>Molly Riel</i>	Inspected by (signature): <i>Scott Kendall FSD</i>
cc:	cc: