



**RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT**
State Form 48669 (R2/2-05)

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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 Family Dollar	Telephone Number 623	Date of Inspection 7-2-25	ID # 27
Establishment Address (number and street, city, state, ZIP code) 623 E Main St.	Establishment (2013) Owned		
Owner Family Dollar Stores of Indiana LLC	Purpose: 1. Routine	Follow-up NO	Release Date
Owner's Address UIA	2. Follow-up	Summary of Violations: p — pf — c —	
Person in Charge Bret Honey	3. Complaint	Menu Type (See back of page)	
Responsible Person's Email _____	4. Pre-Operational	1 b 2 3 4 5	
Certified Food Handler UIA	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"

Received by (name and title printed):

Received by (name and title printed):
Brittney Cummings
Received by (signature):
Brittney Cummings
cc:

Inspected by (name, not title, prints) _____

inspected by (name and title printed):
Don Stry
inspected by (signature):
Don Stry

221

cc.)

Inspected by (signature):

Dear Sir

CCS

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