



**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 <i>Family Dollar 1 Stop #23691</i>	Telephone Number (513) 768-23691 (513) 209-3203	Date of Inspection (mm/dd/yr) 1-21-25	ID # 27
Establishment Address (number and street, city, state, ZIP code) <i>1023 E Main St. Marion, IN 46953</i>	Owner <i>Family Dollar Stores of America</i>		
Owner's Address <i>Same</i>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) <i>None</i>		
Person in Charge <i>Brittany</i>	Follow-up NO 10 Days		
Responsible Person's E-mail <i>None</i>	Release Date		
Certified Food Handler <i>None</i>	Summary of Violations: <i>C NC 3 R</i>		
Menu Type (See back of page) <i>1 X 2 3 4 5</i>			

• 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
308	NC		<i>Cubing area needs to be cleaned and disinfected. Countertop has open clips and dust.</i>	<i>ASAP</i>
409	NC		<i>5+ ceiling tiles brown in color need to be replaced.</i>	
295	NC		<i>The following NON food contact area are soiled:</i> 1. Milk / dairy cooler shelves inside 2. Open outside bottom vent 3. Floor in front of coolers and freezers	

Received by (name and title printed): <i>Brittany Cummings</i>	Inspected by (name and title printed): <i>Sarah B. McFallum</i>
Received by (signature): <i>Brittany Cummings</i>	Inspected by (signature): <i>Sarah B. McFallum 1510</i>
cc:	cc: