



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**

7-26 (dm^c)

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 Fishwater Mill	Telephone Number () 785	Date of Inspection (mm/dd/yr) 5/29/25	ID # 27			
Establishment Address (number and street, city, state, ZIP code) 1001 N. Washington St., Madison, WI 53701	() Owner 573-4644					
Owner Nicholas Wile	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) <hr/>	Follow-up NO	Release Date 10 Days			
Owner's Address 50mge	Summary of Violations: P - PF - E 1					
Person in Charge Debra	Menu Type (See back of page)					
Responsible Person's E-mail <hr/>						
Certified Food Handler Olivia Mechling	11/5/22	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"

Section#	Category	R	Narrative	To Be Corrected By
306(c)C			<p>The following are food control items</p> <p>Collect with dry food items/dust</p> <ol style="list-style-type: none"> 1 Standup freezer on bottom inside 2 Cooler - prepared for salads - inside bottom 3 The two prep tables across grill inside bottom 4 Anoul system above prep <p>*NOTE</p> <p>The system must have thicker in place to show proper professional cleaning</p>	Today

Received by (name and title printed):

Inspected by (name and title, printed):

3241

पुष्पक

66

995

22