



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 header section containing fields for Establishment Name (Meijer Store #153), Telephone Number (765 Establishment, 677-6800 Owner), Date of Inspection (2-8-22), ID # (27), Establishment Address (3820 S Western Ave Marion), Owner (Meijer Stores Limited Partnership), Purpose (1. Routine), Follow-up (NO), Release Date (today), Owner's Address (2929 Walker Ave NW MI), Person in Charge (Aaron), Responsible Person's E-mail, Certified Food Handler (Angela Townsend Exp 3-12-2024), and Menu Type (1 2 3 X 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 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: 431, NC, - Deli - Creme under fryer, Today. Other rows: - Meat - No violations, - Bakery - No violations, - Frozen foods - No violations, - Dairy - No violations, - Grocery - No violations.

Signature section with fields for Received by (name and title printed), Inspected by (name and title printed), Received by (signature), Inspected by (signature), and cc: fields.