



**RETAIL FOOD ESTABLISHMENT  
INSPECTION REPORT**

**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 <u>Obi's Barbecue</u>	Telephone Number ( <u>765</u> ) Establishment <u>573-4541</u>	Date of Inspection (mm/dd/yr) <u>8/8/25</u>	ID # <u>21</u>
Establishment Address (number and street, city, state, ZIP code) <u>402 S. Washington St., Maineville, Ohio 45039</u>	Owner <u>Jeffrey Michelle Richardson</u>	Owner <u>Jeffrey Michelle Richardson</u>	
Owner's Address <u>500 N. 5th Street, Suite 100, Indianapolis, IN 46204</u>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) <u>Heather</u>	Follow-up <u>NO</u>	Release Date
Person in Charge <u>Heather</u>		Summary of Violations: <u>P R R</u>	
Responsible Person's E-mail <u>Heather.Richardson@obi.com</u>		Menu Type (See back of page) <u>1 2 3 X 4 5</u>	
Certified Food Handler <u>Heather Richardson</u>			

- 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):

Inspected by (name and title printed):

Received by (signature):

Inspected by (signature):

cc:

cc:

cc: