

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 P.S. Marion INC		Telephone Number 768 Establishment (513) Owner 7030		Date of Inspection (mm/dd/yr) 4-21-25	ID # 27
Establishment Address (number and street, city, state, ZIP code) 2403 W 2nd St.					
Owner Palwinder Singh		Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)		Follow-up NO	Release Date 10 days
Owner's Address Marion				Summary of Violations: C ___ NC ___ R ___	
Person in Charge Tony				Menu Type (See back of page) 1 ___ 2 ___ 3x 4 ___ 5 ___	
Responsible Person's E-mail					
Certified Food Handler Sukhchar Singh - (Tony)					
• 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	
			No violations		
Received by (name and title printed): Tony			Inspected by (name and title printed): Dean Sapp		
Received by (signature): 			Inspected by (signature): BSO		
cc:		cc:		cc:	