



**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

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 Panda Express #3346	Telephone Number () Establishment 765	Date of Inspection (mm/dd/yr) 8/5/25	ID # 27
Establishment Address (number and street, city, state, ZIP code) 4022 S Western Ave, Marion, NC	Owner Panda Express INC	Owner 740-7309	
Owner's Address Sample	Purpose: <ul style="list-style-type: none">1. Routine2. Follow-up3. Complaint4. Pre-Operational5. Temporary6. HACCP7. Other (list) _____	Follow-up No	Release Date
Person in Charge Collin	Summary of Violations: P - F - C - C - NC - R -		
Responsible Person's E-mail 13125	Menu Type (See back of page)		
Certified Food Handler Collin Campbell	1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>		

- 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):

Collin Campbell

Inspected by (name and title printed):

Inspected by (name and title printed): George B. Hallum
Inspected by (name and title printed): 1

Received by (signature):

Received by (signature):

Generated by (name/username)

Inspected by (signature):  (TSI)

cc:

CC:

cc: