

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-2.3, 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 <i>Suite Living Ass.</i>	Telephone Number <i>762</i>	Date of Inspection (mm/dd/yr) <i>7-17-25</i>	ID # <i>27</i>
Establishment Address (number and street, city, state, ZIP code) <i>1256 N 400W Marion</i>	Establishment <i>382-6112</i>		
Owner <i>Eric Walfr</i>	Owner <i>382-6112</i>	Follow-up <i>No</i>	Release Date
Owner's Address <i>Same</i>	Purpose: <u>1. Routine</u>	Summary of Violations: <i>P - PF - E - R</i>	
Person in Charge <i>Town</i>	2. Follow-up	Menu Type (See back of page)	
Responsible Person's E-mail	3. Complaint	1 <u> </u> 2 <u> </u> 3 <u> </u> 4 <u> </u> 5 <u> </u>	
Certified Food Handler <i>Town Christopher 10-2024</i>	4. Pre-Operational		
	5. Temporary		
	6. HACCP		
	7. Other (list)		

- 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"

[illegible]

Received by (name and title printed): Trina Christopher		Inspected by (name and title printed): Deen Hall	
Received by (signature): Trina Christopher		Inspected by (signature): Deen Hall	
cc:	cc:	cc:	