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.

Establishment Name: Walnut Creek Country Market	Telephone Number ( ) Establishment ( ) Owner: 765 998-1111	Date of Inspection (*mm/dd/yr*): 9/12/24	ID #: 27
Establishment Address (*number and street, city, state, ZIP code*): 80 E. Berry St., Upland			
Owner: Tabatha May	Purpose: **1. Routine** (circled) 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: 7965 E 106th St. Fishers IN		Summary of Violations: C – NC – R –	
Person in Charge: Tabatha			
Responsible Person's E-mail: ____		Menu Type (*See back of page*): 1__ 2 X 3__ 4__ 5__	
Certified Food Handler: Tabatha Issued 2023			

• 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*): Tabatha A. May	Inspected by (*name and title printed*): Angela B. McCollum
Received by (*signature*): [signature]	Inspected by (*signature*): [signature] 510

cc: cc: cc: