



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 AME

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 4-2.4, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Form header section containing: Establishment Name (Wendy's (south)), Telephone Number (765 662-5511), Date of Inspection (5/9/25), ID # (27), Establishment Address (7410 Colu...), Owner (Marion Restaurants South Inc), Purpose (1. Routine), Follow-up (NO), Release Date (10 Days), Person in Charge (Corey), Responsible Person's E-mail, Certified Food Handler (Corey Edwards 3/30/21), and Menu Type (1 2 X 3 4 5).

- 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"

Table with 4 columns: Section#, C, R, Narrative, To Be Corrected By. Row 1: 151 (C), (core), No hair restraints or beard covers - employees cooking without - today

Signature section: Received by (name and title printed): COREY Edwards; Inspected by (name and title printed): Angela R. McCallum; Received by (signature): Corey Edwards; Inspected by (signature): Angela R. McCallum