



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.

Form with fields: Establishment Name (Cracklin Shack), Telephone Number, Date of Inspection (9-11-19), ID # (27), Establishment Address (5058 S 800W Swayzee), Owner (Donna Toy), Purpose (1. Routine), Follow-up (No), Release Date (10 days), Owner's Address (207 E Taylor), Person in Charge (Donna Toy), Responsible Person's E-mail, Certified Food Handler (N/A), Summary of Violations (C NC R), Menu Type (1 2 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 columns: Section#, C/N/C, R, Narrative, To Be Corrected By. Narrative contains handwritten text: - No violations at this inspection -

Form with fields: Received by (name and title printed): Donna Toy, Inspected by (name and title printed): [Signature] PST, Received by (signature): [Signature], Inspected by (signature): [Signature] PST, cc: