



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 Dolled UP Spuds		Telephone Number () Establishment		Date of Inspection (mm/dd/yr)	ID #
Establishment Address (number and street, city, state, ZIP code) 2514 W. 9th street Marion, IN 46953		() Owner		11/20/2021	27
Owner Lisa Bradford		Purpose:		Follow-up	Release Date
Owner's Address Same		1. Routine		Summary of Violations: C ___ NC ___ R ___	
Person in Charge		2. Follow-up			
Responsible Person's E-mail		3. Complaint		Menu Type (See back of page) 1 ___ 2 ___ 3 <input checked="" type="checkbox"/> 4 ___ 5 ___	
Certified Food Handler		4. Pre-Operational			
		5. Temporary			
		6. HACCP			
		7. Other (list) Marion			

- 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 AT TIME	

Received by (name and title printed): Lisa Bradford	Inspected by (name and title printed): Kyle Kellogg
Received by (signature): <i>Lisa Bradford</i>	Inspected by (signature): <i>Kyle Kellogg</i>

cc:	cc:	cc:
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