



**RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT**

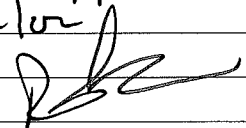
State Form 48669 (R2/2-05)
SDH Form 51-0001

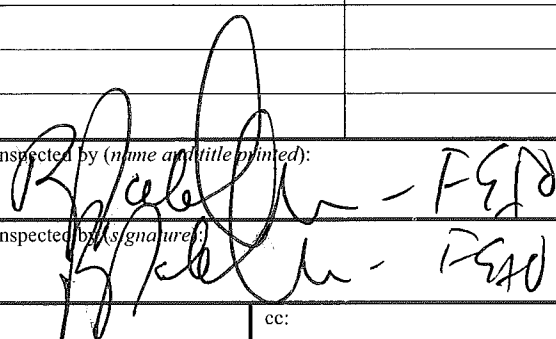
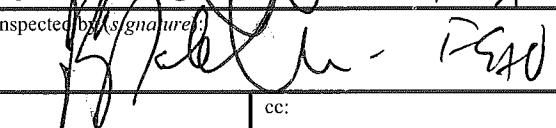
**GRANT COUNTY HEALTH DEPT.
FOOD DIVISION
401 SOUTH ADAMS STREET
MARION, IN 46953**

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 Iceburg Ice Cream	Telephone Number (765) Establishment 282-2874 () Owner	Date of Inspection (mm/dd/yr) 10/5/19	ID # 27
Establishment Address (number and street, city, state, ZIP code) 7100 N. Schindel Road Albany, IN 47320	Owner Denise Thornburg	Follow-up	Release Date
Owner's Address Same	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) Mud Dobbers	Summary of Violations: C ___ NC ___ R ___	
Person in Charge Denise Thornburg	Responsible Person's E-mail denisethornburg@comcast.net	Menu Type (See back of page) 1 <input checked="" type="checkbox"/> 2 ___ 3 ___ 4 ___ 5 ___	
Certified Food Handler			

- 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
			OK to open Trailer # TR932ZXH NO one on site, trailer open LHD looked in appears OK VERY NICE TRAILOR 	

Received by (name and title printed): X	Inspected by (name and title printed):  - FGD
Received by (signature): X	Inspected by (signature):  - FGD
cc:	cc: