



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: LT CONCESSIONS - BEEF STATION 4-H
Telephone Number: () Establishment
Date of Inspection: 6-17-19
ID #: 27
Establishment Address: 2854 S 300 W MARION
Owner: JOAN / ROBERT MONROE
Owner's Address: 2854 S 300 W MARION
Person in Charge:
Responsible Person's E-mail: N/A
Certified Food Handler: ROBT. MONROE
Purpose: 7. Other (list) 4-H

- 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/NC, R, Narrative, To Be Corrected By. Narrative contains handwritten text: 'OK TO OPEN' and 'CHECK # 4366 WAS VOIDED ISSUED CR # 4374'.

Received by (name and title printed): Andrea POEK
Inspected by (name and title printed): [Signature] FSTO
Received by (signature): [Signature]
Inspected by (signature): [Signature] FSTO
cc: []