



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 (Lee's Deep Fried Foods #1), Telephone Number, Date of Inspection (9/10/2021), ID # (27), Establishment Address (3923 S. Wisconsin St. Marion, In 46953), Owner (Dorian Lee), Purpose (1. Routine), Follow-up/Release Date, Owner's Address (Same), Person in Charge (Dorian Lee), Responsible Person's E-mail (TRand78331@aol.com), Certified Food Handler (Dorian Lee), 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 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: No violations at this time.

Received by (name and title printed): Terry Randolph; Inspected by (name and title printed): Kyle Kellogg; Received by (signature): [Signature]; Inspected by (signature): [Signature]; cc: [Blank]