



**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 Lee's S & T Concessions #2		Telephone Number (765) Establishment 603-7855 ( ) Owner	Date of Inspection (mm/dd/yr) 6-17-19	ID # 27
Establishment Address (number and street, city, state, ZIP code) 3923 S. Wisconsin St. Marion, IN 46952		Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) 4-H	Follow-up	Release Date
Owner Dorrian Lee & Terry Randolph	Summary of Violations: C ___ NC ___ R ___			
Owner's Address Same	Menu Type (See back of page) 1 ___ 2 X 3 ___ 4 ___ 5 ___			
Person in Charge Dorian Lee & Terry Randolph				
Responsible Person's E-mail TRard 78331@aol.com				
Certified Food Handler Dorian Lee & Terry Randolph				

- 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
129	C		Handling money then cut lemons then put on new pair of gloves without first washing hands.	
295	C		3-Spatulas, 1-Spatula with Flat edge for holding foods, soiled with food debris stored as clean.	

Received by (name and title printed): Terry Randolph	Inspected by (name and title printed): Katie Ann Felt
Received by (signature): Terry Randolph	Inspected by (signature): Katie Ann Felt
cc:	cc: