



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 (OLD World Fudge), Telephone Number (260-609-1210), Date of Inspection (9-27-19), ID # (27), Establishment Address (120 N. Main Street Columbia City, 46725), Owner (Cris Lamb), Purpose (6. HACCP), Follow-up, Release Date, Summary of Violations (C NC R), Person in Charge (Cris Lamb), Responsible Person's E-mail (crislamb@yahoo.com), Certified Food Handler (NA), 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 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Contains handwritten 'OK for sale' in the Narrative column.

Received by (name and title printed): Cris Lamb
Received by (signature): Cris Lamb
Inspected by (name and title printed): Dawn Small FSD
Inspected by (signature): Dawn Small FSD
cc: (empty)