



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 The Nut Lady	Telephone Number () Establishment	Date of Inspection (mm/dd/yr) 9/24/21	ID # 27
Establishment Address (number and street, city, state, ZIP code) 19017 N. Wheeling Pike Gaston, IN 47342	() Owner		
Owner Kathy Goodman Harding	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) River Rally	Follow-up N/A	Release Date N/A
Owner's Address Same	Summary of Violations: C NC R		
Person in Charge Kathy Goodman Harding	Menu Type (See back of page) 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>		
Responsible Person's E-mail			
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
			No violations at this time.	

Received by (name and title printed): <i>Kathy Goodman Harding</i> Received by (signature): <i>KATHY GOODMAN - HARDING</i>	Inspected by (name and title printed): <i>Kyle Kellogg</i> Inspected by (signature):
cc:	cc: