



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 Town Fryer	Telephone Number () Establishment (810-444-4184	Date of Inspection (mm/dd/yr) 7-3-21	ID # 27
Establishment Address (number and street, city, state, ZIP code) 1278 E. Farrand Road Clio, MI 48420	() Owner	Follow-up —	Release Date —
Owner Kyle Thick	Purpose: <u>1. Routine</u> 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) 4th Gas City	Summary of Violations: C — NC — R —	
Owner's Address Same		Menu Type (See back of page) 1 — 2 — 3 X 4 — 5 —	
Person in Charge Kyle Thick Kellie Thick			
Responsible Person's E-mail Kadenmamal@gmail.com			
Certified Food Handler Kyle & Kellie Thick exp 1-2022			

- 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 -	

Received by (name and title printed): Kellie Thick	Inspected by (name and title printed): Dean Scott BSO
Received by (signature): <i>K Thick</i>	Inspected by (signature): <i>Dean Scott BSO</i>

cc: _____