



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 (Walgreens 05663), Telephone Number (765 Establishment), Date of Inspection (3-21-19), ID # (27), Establishment Address (1323 N Baldwin Ave Marion), Owner (Walgreen Co), Purpose (Routine), Follow-up (NU), Release Date (10 days), Owner's Address (P.O. Box 901 IL), Person in Charge (Cary LaFerney), Responsible Person's E-mail, Certified Food Handler (N/A).

- 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 text: 'No violations at this inspection'.

Form with fields: Received by (name and title printed): Cary LaFerney; Inspected by (name and title printed): Dean Small FSD; Received by (signature); Inspected by (signature); cc: fields.