



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 (WALMART DC 7055), Telephone Number (765 677 7000), Date of Inspection (3-3-2020), ID # (27), Establishment Address (100 FISHER PKWAY GAS CITY), Owner (WALMART STORES LLC), Owner's Address (702 SW 8th BENTONVILLE, ARK), Person in Charge (MICHAEL CHIPCHOSKY), Responsible Person's E-mail (N/A), Certified Food Handler (N/A), Purpose (1. Routine), Follow-up (NO), Release Date (3-13-2020), Summary of Violations (C NC R), Menu Type (1 X 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. Narrative contains: No Violations at this inspection.

Received by (name and title printed): Michael Chipchosky QA/SICLO OPS Manager
Inspected by (name and title printed): Ryan Law - FSD
Received by (signature): [Signature]
Inspected by (signature): [Signature]
cc: []