# 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** Walnut Creek Country Market (Dollar Smart) | **Telephone Number** (765) Establishment (998) Owner 411 | **Date of Inspection** (*mm/dd/yr*) 8-28-19 | **ID #** 27 |
| **Establishment Address** (*number and street, city, state, ZIP code*) 80 E Berry Upland | | | |
| **Owner** Mike ~~Plon~~ Planalp | **Purpose:** 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (*list*) | **Follow-up** No | **Release Date** 10 days |
| **Owner's Address** 7065 E 106th Fishers | | **Summary of Violations:** C — NC — R — | |
| **Person in Charge** Tabatha | | | |
| **Responsible Person's E-mail** | | **Menu Type** (*See back of page*) 1 X 2 3 4 5 | |
| **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"

| Section# | C/NC | R | Narrative | To Be Corrected By |
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| | | | - No violations at this inspections - | |
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| Received by (*name and title printed*): Tabatha May | Inspected by (*name and title printed*): Dean Small FSTO |
| Received by (*signature*): [signature] | Inspected by (*signature*): [signature] FSTO |

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|---|---|---|
| cc: | cc: | cc: |