



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 header section containing: Establishment Name (Buffalo Wild Wings), Telephone Number (673-0757), Date of Inspection (6/4/24), ID # (27), Establishment Address (1129 N Baldwin Ave), Owner (Wingmen V, LLC), Owner's Address (Vancouver, WA), Person in Charge (Bryon Drake), Responsible Person's E-mail, Certified Food Handler (Cassandra Kimmel 5/6/24), Purpose (Routine), Follow-up (NO), Release Date (10 days), Summary of Violations (C, NC, R), Menu Type (1, 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 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Contains two entries: 295 NC Stainless steel table under wing sauces has dried grease on shelf (Today); 433 NC Wet mops sitting directly in mop sink. To include wet mop in a dry mop bucket in beer cooler (MUST be hung up to dry to avoid bacteria).

Signature section: Received by (Bryon Drake), Inspected by (April Legare FS10), Received by (signature), Inspected by (signature), cc: fields.