



**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<br><b>Dollar General # 7369</b>                                                   | Telephone Number<br>( ) Establishment<br><b>293-7650</b>                                                                           | Date of Inspection<br>(mm/dd/yr)<br><b>5/17/24</b> | ID #<br><b>27</b>              |
| Establishment Address (number and street, city, state, ZIP code)<br><b>1104 N Baldwin Ave Marion</b> | ( ) Owner                                                                                                                          | Follow-up                                          | Release Date<br><b>10 days</b> |
| Owner<br><b>Dolgen Corp, LLC</b>                                                                     | Purpose:<br>1. Routine<br>2. Follow-up<br>3. <b>Complaint</b><br>4. Pre-Operational<br>5. Temporary<br>6. HACCP<br>7. Other (list) | Summary of Violations:<br><br>C ___ NC ___ R ___   |                                |
| Owner's Address<br><b>100 Mission Ridge TN</b>                                                       |                                                                                                                                    | Menu Type (See back of page)<br><b>1 X 2 3 4 5</b> |                                |
| Person in Charge<br><b>Shawnda</b>                                                                   |                                                                                                                                    |                                                    |                                |
| Responsible Person's E-mail                                                                          |                                                                                                                                    |                                                    |                                |
| Certified Food Handler<br><b>NA</b>                                                                  |                                                                                                                                    |                                                    |                                |

- 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 |
|----------|------|---|---------------------------------------------------------------------------------------------------------------|--------------------|
|          |      |   | <b>Phone Complaint</b>                                                                                        |                    |
|          |      |   | <b>Roof leaking in several areas<br/>Tubs of dirty water all over<br/>STORE AREA. HAS A pungent<br/>Smell</b> |                    |
|          |      |   | <b>Finding -</b>                                                                                              |                    |
|          |      |   | <b>1 tub with discolored water in<br/>it - from leak</b>                                                      |                    |
|          |      |   | <b>+1-30 ceiling tiles discolored</b>                                                                         |                    |
|          |      |   | <b>Roof is being Repaired</b>                                                                                 |                    |

|                                                   |                                                               |
|---------------------------------------------------|---------------------------------------------------------------|
| Received by (name and title printed):             | Inspected by (name and title printed):<br><b>April Legare</b> |
| Received by (signature):<br><b>Shawnda Bailey</b> | Inspected by (signature):<br><b>April Legare</b>              |
| cc: <b>Shawnda Bailey</b>                         | cc:                                                           |