



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 (Wendy's #1086), Telephone Number, Date of Inspection (2-9-24), ID # (27), Establishment Address (6255 State Rd 18E), Owner (Pilot Travel Centers, LLC), Purpose (1. Routine), Follow-up (NO), Release Date (10 days), Owner's Address (same), Person in Charge (Kristen), Certified Food Handler (Kristen Brown 10/12/22), 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 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Contains handwritten text: NO VIOLATIONS

Received by (name and title printed): Kirsten Brown; Inspected by (name and title printed): Kym Legare FSD; Received by (signature): Kirsten Brown; Inspected by (signature): Kym Legare; cc: fields.