RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

State Form 57480 (R2 / 4-25)
INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

Release Date	10 Days
No. of Risk Factor/Intervention Violations	0
No. of Repeat Risk Factor/Intervention Violations	0
Date	Oct. 2026
Time In	
Time Out	# 27

Establishment	Address	City/State	Zip Code	Telephone
ALDI #18	2007 S. Western	Marion	46953	—

License/Permit #	Permit Holder	Purpose of Inspection	Est. Type	Risk Category
FER-2026-0014	ALDI Indiana LP	Routine	2	2

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
IN=in compliance **OUT**=not in compliance **N/O**=not observed **N/A**=not applicable

Mark "X" in appropriate box for COS and/or R
COS=corrected on-site during inspection **R**=repeat violation

	Compliance Status					cos	R
	Supervision						
1	IN OUT N/A N/O	Person in charge present, demonstrates knowledge, and performs duties					
2	IN OUT N/A N/O	Certified Food Protection Manager					
	Employee Health						
3	IN OUT N/A N/O	Management, food employee and conditional employee; knowledge, responsibilities and reporting					
4	IN OUT N/A N/O	Proper use of restriction and exclusion					
5	IN OUT N/A N/O	Procedures for responding to vomiting and diarrheal events					
	Good Hygienic Practices						
6	IN OUT N/A N/O	Proper eating, tasting, drinking, or tobacco products use					
7	IN OUT N/A N/O	No discharge from eyes, nose, and mouth					
	Preventing Contamination by Hands						
8	IN OUT N/A N/O	Hands clean & properly washed					
9	IN OUT N/A N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed					
10	IN OUT N/A N/O	Adequate handwashing sinks properly supplied and accessible					
	Approved Source						
11	IN OUT N/A N/O	Food obtained from approved source					
12	IN OUT N/A N/O	Food received at proper temperature					
13	IN OUT N/A N/O	Food in good condition, safe, & unadulterated					
14	IN OUT N/A N/O	Required records available: molluscan shellfish identification, parasite destruction					
	Protection from Contamination						
15	IN OUT N/A N/O	Food separated and protected					
16	IN OUT N/A N/O	Food-contact surfaces; cleaned & sanitized					
17	IN OUT N/A N/O	Proper disposition of returned, previously served, reconditioned & unsafe food					
	Time/Temperature Control for Safety						
18	IN OUT N/A N/O	Proper cooking time & temperatures					
19	IN OUT N/A N/O	Proper reheating procedures for hot holding					
20	IN OUT N/A N/O	Proper cooling time and temperature					
21	IN OUT N/A N/O	Proper hot holding temperatures					
22	IN OUT N/A N/O	Proper cold holding temperatures					
23	IN OUT N/A N/O	Proper date marking and disposition					
24	IN OUT N/A N/O	Time as a Public Health Control; procedures & records					
	Consumer Advisory						
25	IN OUT N/A N/O	Consumer advisory provided for raw/undercooked food					
	Highly Susceptible Populations						
26	IN OUT N/A N/O	Pasteurized foods used; prohibited foods not offered					
	Food/Color Additives and Toxic Substances						
27	IN OUT N/A N/O	Food additives: approved & properly used					
28	IN OUT N/A N/O	Toxic substances properly identified, stored, & used					
	Conformance with Approved Procedures						
29	IN OUT N/A N/O	Compliance with variance/specialized process/HACCP					

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is **not** in compliance Mark "X" in appropriate box for COS and/or R **COS**=corrected on-site during inspection **R**=repeat violation

	Compliance Status			cos	R
	Safe Food and Water				
30		Pasteurized eggs used where required			
31		Water & ice from approved source			
32		Variance obtained for specialized processing methods			
	Food Temperature Control				
33		Proper cooling methods used; adequate equipment for temperature control			
34		Plant food properly cooked for hot holding			
35		Approved thawing methods used			
36		Thermometers provided & accurate			
	Food Identification				
37		Food properly labeled; original container			
	Prevention of Food Contamination				
38		Insects, rodents, & animals not present			
39		Contamination prevented during food preparation, storage & display			
40		Personal cleanliness			
41		Wiping cloths: properly used & stored			
42		Washing fruits & vegetables			
	Proper Use of Utensils				
43		In-use utensils: properly stored			
44		Utensils, equipment & linens: properly stored, dried, & handled			
45		Single-use/single-service articles: properly stored & used			
46		Gloves used properly			
	Utensils, Equipment and Vending				
47		Food & non-food contact surfaces cleanable, properly designed, constructed, & used			
48		Warewashing facilities: installed, maintained, & used; test strips			
49		Non-food contact surfaces clean			
	Physical Facilities				
50		Hot & cold water available; adequate pressure			
51		Plumbing installed; proper backflow devices			
52		Sewage & wastewater properly disposed			
53		Toilet facilities: properly constructed, supplied, & cleaned			
54		Garbage & refuse properly disposed; facilities maintained			
55		Physical facilities installed, maintained, & clean			
56		Adequate ventilation & lighting; designated areas used			

Person In Charge (Signature) [signature] Date: 10-6-26

Inspector (Signature) [signature] #510 Follow-up: YES NO (Circle one) Follow-up Date:

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT
State Form 57480 (R2 / 4-25)
INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

License/Permit # 2026004 | Date Oct. 6 2026

Establishment	Address	City/State	Zip Code	Telephone
Aldi	2007 So Western	Marion	46953	

OUTDOOR FOOD OPERATION & MOBILE RETAIL FOOD ESTABLISHMENT

Circle designated compliance status (IN, OUT, N/A) for each numbered item
IN=in compliance **OUT**=not in compliance **N/A**=not applicable

Mark "X" in appropriate box for COS and/or R
COS=corrected on-site during inspection **R**=repeat violation

	Compliance Status			cos	R
57	IN OUT N/A N/O	Outdoor Food Operation			

	Compliance Status		cos	R
58	IN OUT N/A N/O	Mobile Retail Food Establishment		

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-26, Indiana Retail Food Establishment Sanitation Requirements. Violations cited in this report must be corrected within the time frames below or as stated in Section 475 and 476 of the Indiana Retail Food Establishment Food Code.	Complete by Date:
	Non potable ice/water on product in freezer - work order in progress @	

Person In Charge (Signature) [signature] | Date: 10-6-26

Inspector (Signature) [signature] SIC | Date: 10-6-2026