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 Hally's #7247	**Telephone Number** ( ) Establishment 765 ( ) Owner 664-4672	**Date of Inspection** (mm/dd/yr) 3/7/25	**ID #** 27
Establishment Address (number and street, city, state, ZIP code) 602 No. Baldwin Ave., Marion			
Owner Checkers Drive-In Restaurant, INC	**Purpose:** 1. Routine; 2. Follow-up; 3. Complaint; 4. Pre-Operational; 5. Temporary; 6. HACCP; 7. Other (list)	**Follow-up** ND	**Release Date** 10 Days
Owner's Address Same		**Summary of Violations:** C___ NC___ R___	
Person in Charge Alisha			
Responsible Person's E-mail —		**Menu Type** (See back of page) 1___ 2___ 3 X 4___ 5___	
Certified Food Handler Alisha Moore 4/29/23			

- 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
			Cooked Chicken holding temp 159° Chicken out of fryer temp 204° Complaint unfounded	

Received by (name and title printed): Alisha Pierce

Received by (signature): Alisha Pierce

Inspected by (name and title printed): Angela M. McCallum

Inspected by (signature): Angela M. McCallum #510

cc: | cc: | cc: