Retail Food Establishment Inspection Report

State Form 48669 (R2/2-05)
SDH From 51-0001

Hendricks County Health Department
Telephone (317) 745-9217
Fax (317) 745-9218

Based on the 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 Fannie May Confections	**Telephone Number** Est 317-209-8718	**Date of Inspection** 02/12/2025 11:47 am	**ID#** 1093
Establishment Address 10973 E US Highway 36, Avon IN 46123-7980			
Owner Fannie May Confection Brands	**Purpose** _X_ **Routine** ___ **Follow-up** ___ **Complaint** ___ **Pre-Operational** ___ **Temporary** ___ **HACCP** ___ **Other (list)**	**Follow Up** NO	**Released** 02/22/2025
Owner's Address		**Menu Type** **1** X **2** __ **3** __ **4** __ **5** __	
Person in Charge Tammy Waters			
Responsible Person's Email			
Certified Food Handler Danielle Usak ServSafe **Exp.** 07/11/2029			

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 NARRAIVE COLUMN MARKED AS "R"

Section #	C/NC	R	Narrative	To Be Corrected By
			No violations noted at time of inspection.	
		0		

Summary of Violations **C** ____ **NC** ____ **R** 0

Received by (name and title printed): Reviewed with Person in Charge	Inspected by (name and title printed): SARAH DALLAS
Received by (signature):	Inspected by (signature):

cc:	cc:	cc: