



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

Release Date	10 Days	Date 5/21/25
No. of Risk Factor/Intervention Violations		Time In 10:15am
No. of Repeat Risk Factor/Intervention Violations		Time Out

Establishment	Address	City/State	Zip Code	Telephone
13/24 Drive In	890 North State Road 13	Wabash, Indiana	46992	(260) 563-5745
License/Permit #	Permit Holder	Purpose of Inspection	Est. Type	Risk Category
50	Lily Dipper Production	<i>Routine</i>		Concession

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	Compliance Status	cos	R				
Supervision										
1 IN	OUT N/A N/O	Person in charge present, demonstrates knowledge, and performs duties		17 IN	OUT N/A N/O	Proper disposition of returned, previously served, reconditioned & unsafe food				
2 IN	OUT N/A N/O	Certified Food Protection Manager		18 IN	OUT N/A N/O	Proper cooking time & temperatures				
Employee Health										
3 IN	OUT N/A N/O	Management, food employee and conditional employee; knowledge, responsibilities and reporting		19 IN	OUT N/A N/O	Proper reheating procedures for hot holding				
4 IN	OUT N/A N/O	Proper use of restriction and exclusion		20 IN	OUT N/A N/O	Proper cooling time and temperature				
5 IN	OUT N/A N/O	Procedures for responding to vomiting and diarrheal events		21 IN	OUT N/A N/O	Proper hot holding temperatures				
Good Hygienic Practices										
6 IN	OUT N/A N/O	Proper eating, tasting, drinking, or tobacco products use		22 IN	OUT N/A N/O	Proper cold holding temperatures				
7 IN	OUT N/A N/O	No discharge from eyes, nose, and mouth		23 IN	OUT N/A N/O	Proper date marking and disposition				
Preventing Contamination by Hands										
8 IN	OUT N/A N/O	Hands clean & properly washed		24 IN	OUT N/A N/O	Time as a Public Health Control; procedures & records				
9 IN	OUT N/A N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		Consumer Advisory						
10 IN	OUT N/A N/O	Adequate handwashing sinks properly supplied and accessible		25 IN	OUT N/A N/O	Consumer advisory provided for raw/undercooked food				
Approved Source										
11 IN	OUT N/A N/O	Food obtained from approved source		Highly Susceptible Populations						
12 IN	OUT N/A N/O	Food received at proper temperature		26 IN	OUT N/A N/O	Pasteurized foods used; prohibited foods not offered				
13 IN	OUT N/A N/O	Food in good condition, safe, & unadulterated		27 IN	OUT N/A N/O	Food additives: approved & properly used				
14 IN	OUT N/A N/O	Required records available: molluscan shellfish identification, parasite destruction		28 IN	OUT N/A N/O	Toxic substances properly identified, stored, & used				
Protection from Contamination										
15 IN	OUT N/A N/O	Food separated and protected		Conformance with Approved Procedures						
16 IN	OUT N/A N/O	Food-contact surfaces; cleaned & sanitized		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 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	Compliance Status	cos	R	
Safe Food and Water						
30		Pasteurized eggs used where required		43		Proper Use of Utensils
31		Water & ice from approved source		44		In-use utensils: properly stored
32		Variance obtained for specialized processing methods		45		Utensils, equipment & linens: properly stored, dried, & handled
Food Temperature Control						
33		Proper cooling methods used; adequate equipment for temperature control		46		Single-use/single-service articles: properly stored & used
34		Plant food properly cooked for hot holding		47		Gloves used properly
35		Approved thawing methods used		48		Utensils, Equipment and Vending
36		Thermometers provided & accurate		49		Food & non-food contact surfaces cleanable, properly designed, constructed, & used
Food Identification						
37		Food properly labeled; original container		50		Warewashing facilities: installed, maintained, & used; test strips
Prevention of Food Contamination						
38		Insects, rodents, & animals not present		51		Non-food contact surfaces clean
39		Contamination prevented during food preparation, storage & display		52		Physical Facilities
40		Personal cleanliness		53		Hot & cold water available; adequate pressure
41		Wiping cloths: properly used & stored		54		Plumbing installed; proper backflow devices
42		Washing fruits & vegetables		55		Sewage & wastewater properly disposed
Person In Charge (Signature)		<i>DR Chast</i>		56		Toilet facilities: properly constructed, supplied, & cleaned
Inspector (Signature)		<i>DR Chast</i>		57		Garbage & refuse properly disposed; facilities maintained
				58		Physical facilities installed, maintained, & clean
				59		Adequate ventilation & lighting; designated areas used
				60		
				Follow-up: YES NO (Circle one) Follow-up Date:		



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OUTDOOR FOOD OPERATION & MOBILE RETAIL FOOD ESTABLISHMENT

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

TEMPERATURE OBSERVATIONS

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No Food Being Made

OBSERVATIONS AND CORRECTIVE ACTIONS

Person In Charge (Signature)

Date:

Inspector (Signature)

Date:



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Wabash, Indiana

46992

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OBSERVATIONS AND CORRECTIVE ACTIONS

Published Comment

Person In Charge (Signature)

Date:

Inspector (Signature)

Date: