



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

Release Date	10 Days	Date 11/26/25 Time In Time Out
No. of Risk Factor/Intervention Violations		
No. of Repeat Risk Factor/Intervention Violations		

Establishment	Address	City/State	Zip Code	Telephone
Culver's of Wabash	1321 North Cass Street	Wabash, Indiana	46992	(260) 225-0446
License/Permit #	Permit Holder	Purpose of Inspection	Est. Type	Risk Category
89	Neil Miller	Root: NCE	Restaurant	

**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				
<b>Supervision</b>										
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				
<b>Employee Health</b>										
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				
<b>Good Hygienic Practices</b>										
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				
<b>Preventing Contamination by Hands</b>										
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		<b>Consumer Advisory</b>						
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				
<b>Approved Source</b>										
11 IN	OUT N/A N/O	Food obtained from approved source		<b>Highly Susceptible Populations</b>						
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				
<b>Protection from Contamination</b>										
15 IN	OUT N/A N/O	Food separated and protected		29 IN	OUT N/A N/O	Compliance with variance/specialized process/HACCP				
16 IN	OUT N/A N/O	Food-contact surfaces; cleaned & sanitized		<b>Risk factors</b> 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.

Compliance Status		cos	R	Compliance Status	cos	R				
<b>Safe Food and Water</b>										
30	Pasteurized eggs used where required			43	In-use utensils: properly stored					
31	Water & ice from approved source			44	Utensils, equipment & linens: properly stored, dried, & handled					
32	Variance obtained for specialized processing methods			45	Single-use/single-service articles: properly stored & used					
<b>Food Temperature Control</b>										
33	Proper cooling methods used; adequate equipment for temperature control			46	Gloves used properly					
34	Plant food properly cooked for hot holding			<b>Utensils, Equipment and Vending</b>						
35	Approved thawing methods used			47	Food & non-food contact surfaces cleanable, properly designed, constructed, & used					
36	Thermometers provided & accurate			48	Warewashing facilities: installed, maintained, & used; test strips					
<b>Food Identification</b>				49	Non-food contact surfaces clean					
37	Food properly labeled; original container			<b>Physical Facilities</b>						
<b>Prevention of Food Contamination</b>										
38	Insects, rodents, & animals not present			50	Hot & cold water available; adequate pressure					
39	Contamination prevented during food preparation, storage & display			51	Plumbing installed; proper backflow devices					
40	Personal cleanliness			52	Sewage & wastewater properly disposed					
41	Wiping cloths: properly used & stored			53	Toilet facilities: properly constructed, supplied, & cleaned					
42	Washing fruits & vegetables			54	Garbage & refuse properly disposed; facilities maintained					
Person In Charge (Signature)	<i>Johnnae Vileman</i>			55	Physical facilities installed, maintained, & clean					
Inspector (Signature)	<i>Johnnae Vileman</i>			56	Adequate ventilation & lighting; designated areas used					
				Follow-up: YES NO (Circle one) Follow-up Date:						



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Date

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IN=In compliance	OUT=Not in compliance	N/A=Not applicable	CCS=Corrected on-site during inspection	R=repeat violation			
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

## OBSERVATIONS AND CORRECTIVE ACTIONS

michaeljvillarreal  
@ hotmail. com

Monal Vulcana

11/24/25

**Person In Charge (Signature)**

Date:

**Inspector (Signature)**

**Date:**



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## OBSERVATIONS AND CORRECTIVE ACTIONS

## Published Comment

Person In Charge (Signature)

Date: \_\_\_\_\_

Inspector (Signature)

Date: