



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

Release Date	10 Days	Date 9/24/25
No. of Risk Factor/Intervention Violations	0	
No. of Repeat Risk Factor/Intervention Violations		Time In Time Out

Establishment	Address	City/State	Zip Code	Telephone
Dallas Winchester Senior Center	239 Bond Street	Wabash, Indiana	46992	(260) 563-5279
License/Permit #	Permit Holder	Purpose of Inspection	Est. Type	Risk Category
103	Area Five Agency on Aging			Non-Profit

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	
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
Person In Charge (Signature)	
Inspector (Signature)	
Follow-up: YES NO (Circle one) Follow-up Date: 9/24/25	



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Date

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OBSERVATIONS AND CORRECTIVE ACTIONS

Published Comment

Person In Charge (Signature)

Date: _____

Inspector (Signature)

Date: