



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

Release Date

10 Days

Date

4/25/25  
Time In 107PM  
Time Out

No. of Risk Factor/Intervention Violations

No. of Repeat Risk Factor/Intervention Violations

Establishment

Papa John's

Address

1308 North Cass Street

City/State

Wabash, Indiana

Zip Code

46992

Telephone

(260) 569-7777

License/Permit #

169

Permit Holder

Stephen Mattingly

Purpose of Inspection

ROUTINE

Est. Type

Restaurant

Risk Category

**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
<b>Supervision</b>			
1	IN OUT N/A N/O		
Person in charge present, demonstrates knowledge, and performs duties			
2	IN OUT N/A N/O		
Certified Food Protection Manager			
<b>Employee Health</b>			
3	IN OUT N/A N/O		
Management, food employee and conditional employee; knowledge, responsibilities and reporting			
4	IN OUT N/A N/O		
Proper use of restriction and exclusion			
5	IN OUT N/A N/O		
Procedures for responding to vomiting and diarrheal events			
<b>Good Hygienic Practices</b>			
6	IN OUT N/A N/O		
Proper eating, tasting, drinking, or tobacco products use			
7	IN OUT N/A N/O		
No discharge from eyes, nose, and mouth			
<b>Preventing Contamination by Hands</b>			
8	IN OUT N/A N/O		
Hands clean & properly washed			
9	IN OUT N/A N/O		
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			
10	IN OUT N/A N/O		
Adequate handwashing sinks properly supplied and accessible			
<b>Approved Source</b>			
11	IN OUT N/A N/O		
Food obtained from approved source			
12	IN OUT N/A N/O		
Food received at proper temperature			
13	IN OUT N/A N/O		
Food in good condition, safe, & unadulterated			
14	IN OUT N/A N/O		
Required records available: molluscan shellfish identification, parasite destruction			
<b>Protection from Contamination</b>			
15	IN OUT N/A N/O		
Food separated and protected			
16	IN OUT N/A N/O		
Food-contact surfaces; cleaned & sanitized			

Compliance Status		COS	R
17	IN OUT N/A N/O		
Proper disposition of returned, previously served, reconditioned & unsafe food			
<b>Time/Temperature Control for Safety</b>			
18	IN OUT N/A N/O		
Proper cooking time & temperatures			
19	IN OUT N/A N/O		
Proper reheating procedures for hot holding			
20	IN OUT N/A N/O		
Proper cooling time and temperature			
21	IN OUT N/A N/O		
Proper hot holding temperatures			
22	IN OUT N/A N/O		
Proper cold holding temperatures			
23	IN OUT N/A N/O		
Proper date marking and disposition			
24	IN OUT N/A N/O		
Time as a Public Health Control; procedures & records			
<b>Consumer Advisory</b>			
25	IN OUT N/A N/O		
Consumer advisory provided for raw/undercooked food			
<b>Highly Susceptible Populations</b>			
26	IN OUT N/A N/O		
Pasteurized foods used; prohibited foods not offered			
<b>Food/Color Additives and Toxic Substances</b>			
27	IN OUT N/A N/O		
Food additives: approved & properly used			
28	IN OUT N/A N/O		
Toxic substances properly identified, stored, & used			
<b>Conformance with Approved Procedures</b>			
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**

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

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R=repeat violation

Compliance Status		COS	R
<b>Safe Food and Water</b>			
30	✓		
Pasteurized eggs used where required			
31	✓		
Water & ice from approved source			
32	✓		
Variance obtained for specialized processing methods			
<b>Food Temperature Control</b>			
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			
<b>Food Identification</b>			
37	✓		
Food properly labeled; original container			
<b>Prevention of Food Contamination</b>			
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			

Compliance Status		COS	R
<b>Proper Use of Utensils</b>			
43	✓		
In-use utensils: properly stored			
44	✓		
Utensils, equipment & linens: properly stored, dried, & handled			
45	✓		
Single-use/single-service articles: properly stored & used			
46	✓		
Gloves used properly			
<b>Utensils, Equipment and Vending</b>			
47	✓		
Food & non-food contact surfaces cleanable, properly designed, constructed, & used			
48	✓		
Warewashing facilities: installed, maintained, & used; test strips			
49	✓		
Non-food contact surfaces clean			
<b>Physical Facilities</b>			
50	✓		
Hot & cold water available; adequate pressure			
51	✓		
Plumbing installed; proper backflow devices			
52	✓		
Sewage & wastewater properly disposed			
53	✓		
Toilet facilities: properly constructed, supplied, & cleaned			
54	✓		
Garbage & refuse properly disposed; facilities maintained			
55	✓		
Physical facilities installed, maintained, & clean			
56	✓		
Adequate ventilation & lighting; designated areas used			

Person In Charge (Signature)

*Trace Hatcher*

Date:

4/25/25

Inspector (Signature)

*[Signature]*

Follow-up: YES

NO

(Circle one)

Follow-up Date:

Date 4/25/2023

Establishment	Address	City/State	Zip Code	Telephone
Papa John's	1308 North Cass Street	Wabash, Indiana	46992	(260) 569-7777

## OUTDOOR FOOD OPERATION & MOBILE RETAIL FOOD ESTABLISHMENT

Circle designated compliance status (IN, OUT, N/A) for each numbered item

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**N/A**=not applicable

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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

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Cheese	41°				
Mushrooms	38°				
Sausage	38°				
WALK-IN	39°				

### OBSERVATIONS AND CORRECTIVE ACTIONS

[illegible]

Person In Charge (Signature)	<i>Trace Satchel</i>	Date:
Inspector (Signature)	<i>John Smith</i>	Date: 4/25/25