# STATION OF THE PROPERTY OF THE

## RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

State Form 57480 (R2 / 4-25)
INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

lease Date	10 Days	
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Date Time In

No. of Risk Factor/Intervention Violations

Time In Time Out

No. of Repeat Risk Factor/Intervention Violations Establishment Address City/State Zip Code Telephone Papa John's 1308 North Cass Street Wabash, Indiana 46992 (260) 569-7777 License/Permit # Permit Holder Purpose of Inspection Est. Type **Risk Category** ROUTING 169 Stephen Mattingly Restaurant

#### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item Mark "X" in appropriate box for COS and/or R IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable COS=corrected on-site during inspection R=repeat violation **Compliance Status** cos R **Compliance Status** Proper disposition of returned, previously served, Supervision Person in charge present, demonstrates knowledge, and reconditioned & unsafe food performs duties Time/Temperature Control for Safety 18 (INOUT N/A N/O Proper cooking time & temperatures 2 IN OUT N/A N/O Certified Food Protection Manager **Employee Health** IN OUT N/AN/O Proper reheating procedures for hot holding 20 IN OUT N/A N/O Proper cooling time and temperature Management, food employee and conditional employee; OUT N/A N/O 21 IN OUT MA N/O Proper hot holding temperatures knowledge, responsibilities and reporting 22 IN OUT NA V/O Proper cold holding temperatures 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 OUT N/A N/O Proper date marking and disposition N/O Time as a Public Health Control; procedures & **Good Hygienic Practices** 6 INOUT N/A N/O Proper eating, tasting, drinking, or tobacco products use Consumer Advisory 7 IN OUT N/A N/O No discharge from eyes, nose, and mouth 25 IN OUT N/AN/O Consumer advisory provided for raw/undercooked food **Highly Susceptible Populations Preventing Contamination by Hands** IN OUT N/A N/O Hands clean & properly washed 26 NOUT N/A N/O Pasteurized foods used; prohibited foods not offered Food/Color Additives and Toxic Substances No bare hand contact with RTE food or a pre-approved UT N/A N/O IN OUT N/A N/O Food additives: approved & properly used alternative procedure properly allowed OUT N/A N/O Adequate handwashing sinks properly supplied and accessible OUT N/A N/O Toxic substances properly identified, stored, & used **Approved Source Conformance with Approved Procedures** OUT N/A N/O Food obtained from approved source 29 IN OUT N/O Compliance with variance/specialized process/HACCP OUT N/A N/O Food received at proper temperature OUT N/A N/O Food in good condition, safe, & unadulterated Risk factors are important practices or procedures identified as the Required records available: molluscan shellfish identification, most prevalent contributing factors of foodborne illness or injury. parasite destruction Public health interventions are control measures to prevent **Protection from Contamination** foodborne illness or injury IN OUT N/A N/O Food separated and protected IN OUT N/A N/O Food-contact surfaces; cleaned & sanitized

#### **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

COS=corrected on-site during inspection

R=repeat violation

Compliance Status		cos R	Compliance Status		cos R	
Safe Food and Water			Proper Use of Utensils			
30	Pasteurized eggs used where required		43 In-us	e utensils: properly stored		
31	Water & ice from approved source		44 Uten	sils, equipment & linens: properly stored, dried, & handled		
32 Variance obtained for specialized processing methods		45 Single-use/single-service articles: properly stored & used				
Food Temperature Control		46 Gloves used properly				
33 Proper cooling methods used; adequate equipment for		Utensils, Equipment and Vending				
33	temperature control		47	d & non-food contact surfaces cleanable,		
34	Plant food properly cooked for hot holding		prop	erly designed, constructed, & used		
35	Approved thawing methods used		48 Ware strips	ewashing facilities: installed, maintained, & used; test		
36	Thermometers provided & accurate		49 Non-	food contact surfaces clean		
	Food Identification			Physical Facilities		
37	Food properly labeled; original container		50 Hot 8	& cold water available; adequate pressure		
Prevention of Food Contamination		51 Plum	nbing installed; proper backflow devices			
38	Insects, rodents, & animals not present		52 Sew	age & wastewater properly disposed		
39	Contamination prevented during food preparation, storage & display		53 Toile	t facilities: properly constructed, supplied, & cleaned		
40	Personal cleanliness		54 Garb	page & refuse properly disposed; facilities maintained		
41	Wiping cloths: properly used & stored		55 Phys	sical facilities installed, maintained, & clean		
42	Washing fruits & vegetables		56 Adec	quate ventilation & lighting; designated areas used		

Person In Charge (Signature)
Inspector (Signature)

Follow-up: YES

Date:

Follow-up Date:

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License/Permit #

Date

FOOD PROTECTION DIVISION 169 City/State Zip Code **Establishment** Address 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 Mark "X" in appropriate box for COS and/or R IN=in compliance OUT=not in compliance N/A=not applicable **COS**=corrected on-site during inspection R=repeat violation **Compliance Status** Compliance Status 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 Item/Location Temp Item/Location Temp Temp Cheese MUSHROOMS **OBSERVATIONS AND CORRECTIVE ACTIONS** Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-26, Indiana Retail Food **Item Number** Complete by Date: Establishment Sanitation Requirements. Violations cited in this report must be corrected within the time frames below or as stated in Section 475 and 476 of the Indiana Retail Food Establishment Food Code Person In Charge (Signature) Date: Inspector (Signature)



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License/Permit # Date FOOD PROTECTION DIVISION Establishment Address City/State Zip Code Telephone Papa John's 1308 North Cass Street Wabash, Indiana 46992 (260) 569-7777 **OBSERVATIONS AND CORRECTIVE ACTIONS** Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-26, Indiana Retail Food Establishment Sanitation Requirements. Violations cited in this report must be corrected within the time frames below or Item Number Complete by Date: as stated in Section 475 and 476 of the Indiana Retail Food Establishment Food Code **Published Comment** Person In Charge (Signature) Date: Inspector (Signature) Date: