

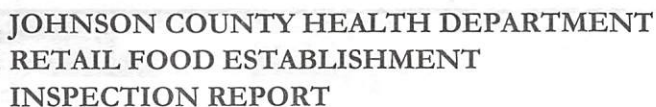
Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment name Circle K #4700003	Telephone Number () Establishment () Owner	Date of Inspection 3/26/25	ID# 153
Establishment address 10 N. Morton G Franklin	Purpose: <u>1. Routine</u> 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up	Release Date
Owner		Summary of Violations:	
Owner address		C <u>0</u> NC <u>2</u> R <u> </u>	
Person in charge		Menu Type (See back of page)	
Responsible person's email		1 <u> </u> 2 <u>X</u> 3 <u> </u> 4 <u> </u> 5 <u> </u>	
Certified food handler			

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
- VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

[illegible]



Received by (name and title printed): X <u>Cliff Sweet</u>		Inspected by (name and title printed): <u>Terry D Bayless</u>
Received by (signature): X <u>[Signature]</u>		Inspected by (signature): <u>Terry D Bayless</u>
cc:	cc:	cc:



95 S. DRAKE ROAD
FRANKLIN IN 46131
Office 317-346-4365 Fax 317-736-5264

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
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Received by (name and title printed): <div style="border: 1px solid black; padding: 5px; display: inline-block;"> Gloria Aule </div>		Inspected by (name and title printed): <div style="border: 1px solid black; padding: 5px; display: inline-block;"> Terry D Bayless </div>
Received by (signature): <div style="border: 1px solid black; padding: 5px; display: inline-block;">  </div>		Inspected by (signature): <div style="border: 1px solid black; padding: 5px; display: inline-block;">  </div>
cc:	cc:	cc:

Beth
3/24



Johnson County Health Department
95 S Drake Rd., Franklin, IN 46131
Phone: (317) 346-4365, Fax: (317) 736-5264
Retail Food Establishment Inspection Report

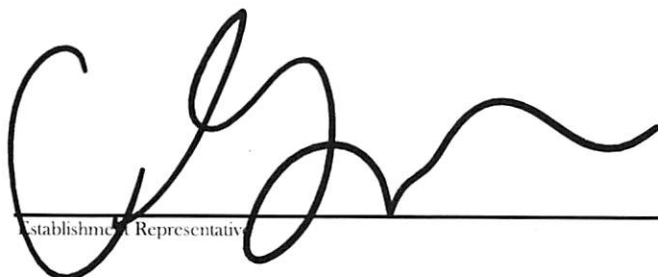


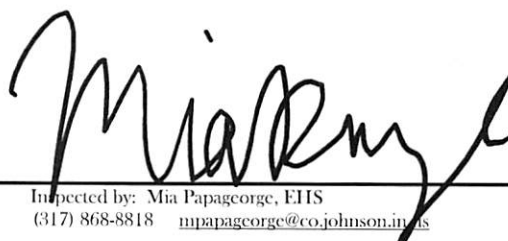
Based on an inspection this day, the item(s) noted below identify violation(s) of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment CVS Pharmacy #2843	Telephone 317-865-2650	Date of Inspection 3/20/2025
Establishment address 402 Marketplace Dr Greenwood, IN 46142	Summary of Violations 0C, 0 NC	
Owner Hook-Superx LLC Email- indygaff@aol.com	Follow-up No	Release Date 3/30/2025
Person - in - Charge Christina Gaffney- manager	Certified Food Handler N/A	Purpose: Routine
Establishment Identification # 1460	County Johnson	District D5
		Menu Type 1- Limited menu

- Critical Items are Identified in the Checklist & Narrative Columns Marked "C"
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Sec#	C/NC	R?	Violation Observed:	To be Corrected by:
			Note- excessive amount of dead insects observed on the ground of the upstairs storage area back end	
			Facility will close April 23, 2025	


Establishment Representative


Inspected by: Mia Papageorge, EHS
(317) 868-8818 mpapageorge@co.johnson.in.us



Betsy
3/27

Johnson County Health Department
95 S Drake Rd Franklin, IN 46131
Phone: (317) 346-4365, Fax: (317) 736-5264
Retail Food Establishment Inspection Report

Based on an inspection this day, the item(s) noted below identify violation(s) of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment name Dairy Queen		Telephone Number 317-535-7587		Date of Inspection 3/24/2025	
Establishment address 99 S Hwy 31 Whiteland, IN 46184			Summary of Violations: 2C, 6NC		
Owner Khushbu Patel/ Whiteland Sunrise Group Email- whitelanddairyqueen@gmail.com			Follow-up No		Release Date 4/3/2025
Person in charge Jinit Patel- manager		Certified food handler Jinit Patel Serv Safe exp 10/15/29		Purpose Routine	
Establishment Identification # 2760		County Johnson	District D5	Menu Type 3-Extensive handling	

- Critical Items are Identified in the Checklist & Narrative Columns Marked "C"
- Violation(s) repeated from previous inspections are denoted in the "summary of violations" & in the narrative below as "R"

Sec#	C/NC	R	Narrative	To Be Corrected by:
355	NC	R	Employee stated dirty mop water is disposed of into 3 bay sink. No mop service sink provided	3/24/25
430	NC	R	Walk-in freezer floor threshold is unsealed wood with slight ice buildup around freezer door	3/30/25
187	C		The following internal food temperatures were observed for holding food products in and above the food prep cooler: 4 containers of sliced and shredded cheeses at 50°F, cut tomatoes at 47°F, cooked bacon at 70°F	3/24/25
191	C		Date marking absent on ready-to-eat time temperature control foods (hot dogs and queso) in the food prep cooler and walk-in cooler	3/24/25
218	NC		Door gaskets split on several cooler and freezer units	4/1/25
			Shelving rusty in the walk-in cooler	
295	NC		Front and back of the fan unit in the walk-in cooler dusty	3/26/25
297	NC		Kitchen and front of house soda nozzles soiled	3/24/25
431	NC		Floor under shelving in walk-in cooler soiled	3/30/25
			Floor next to wall behind the ice machine soiled	

Jinit

Mia Papageorge

Received by

Inspected by Mia Papageorge, EHS
(317) 868-8818 mpapageorge@co.johnson.in.us



JOHNSON COUNTY HEALTH DEPARTMENT
RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT

95 S. DRAKE ROAD
FRANKLIN IN 46131
Office 317-346-4365 Fax 317-736-5264

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3/7

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment name PALES2 FAMILY RESTAURANT	Telephone Number () Establishment () Owner	Date of Inspection 3/4/25	ID# 2524
Establishment address 1071 W JEFFERSON ST. FRANKLIN, IN	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up (YES)	Release Date 3/14/25
Owner		Summary of Violations: C 1 NC 13 R	
Owner address		Menu Type (See back of page) 1 2 3 4X 5	
Person in charge PHILIP LADD			
Responsible person's email			
Certified food handler PHILIP LADD (RENEWED EXP 2027)			

• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"

• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section #	C/NC	R	Narrative	To Be Corrected by
200	C	*	SANITIZER NOT DETECTED ON DISHWASHER AFTER FINAL SANITIZATION RINSE AT MECHANICAL DISHWASHER	3/5/25
392	NC	*	LEDS NOT CLOSED ON OUTSIDE DUMPSTER	3/6
218	NC	*	DOOR GASKET WORN ON REFRIGERATOR LOCATED ACROSS FROM GRILL	4/4
431	NC	*	FLOOR NOT CLEAN NEXT TO WALK-IN UNDER EQUIPMENT IN KITCHEN, WORN IN AREA	3/9
295	NC	*	INSIDE TOP OF ICE MAKER NOT CLEAN	3/9
411	NC	*	SOME CEILING LIGHTS ARE OUT IN KITCHEN	3/14
431	NC	*	CEILING TILES/SOME DUSTY, NOT CLEAN IN KITCHEN	3/9
295	NC	*	SOME METAL SHELVING IN KITCHEN NOT CLEAN	3/9
295	NC	*	BOX FAN IN DISTROOM /COVER NOT CLEAN, DUSTY	3/8
218	NC	*	WALK-IN FREEZER DOOR DOES NOT CLOSE TIGHTLY	4/4
399	NC	*	FLOOR BASE COUING MISSING IN AREAS	4/4
218	NC	*	WALK-IN COOLER SHELVING WEARING, NOT CLEAN	3/9
295	NC	*	FLOOR NOT CLEAN	
431	NC	*	RESTROOM MECHANICAL EXHAUST COVERS NOT CLEAN	3/8

Received by (name and title printed):

Philip Ladd

Received by (signature):

Philip Ladd

cc:

Inspected by (name and title printed):

Bob Smith EHS

Inspected by (signature):

Bob Smith

cc:





95 S. DRAKE ROAD
FRANKLIN IN 46131
Office 317-346-4365 Fax 317-736-5264

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

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[illegible]

Received by (name and title printed): T. Craig Redmore		Inspected by (name and title printed): Terry D. Bayless	
Received by (signature): 		Inspected by (signature): 	
cc:	cc:	cc:	

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment name EL Abuelo	Telephone Number () Establishment () Owner	Date of Inspection 3/24/25	ID# 1833
Establishment address 989 N. US 31 Whiteland	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up	Release Date
Owner IN		Summary of Violations:	
Owner address		C <u>0</u> NC <u>1</u> R <u> </u>	
Person in charge		Menu Type (See back of page)	
Responsible person's email		1 <u> </u> 2 <u> </u> 3 <u> </u> 4 <u>X</u> 5 <u> </u>	
Certified food handler ALAN ZARAGOZA			

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
- VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

[illegible]

Received by (name and title printed): I Norberto zaragoza		Inspected by (name and title printed): Terry D. Bayless
Received by (signature): I [Signature] 1/30/03		Inspected by (signature): Terry D. Bayless
cc:	cc:	cc:



Belen
3/24

✓

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Phone: (317) 346-4365, Fax: (317) 736-5264
Retail Food Establishment Inspection Report

Based on an inspection this day, the item(s) noted below identify violation(s) of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

establishment El Beso		telephone 317-535-3355	Date of Inspection 3/19/2025
Establishment address 2993 Elmer Drive So. Grove Blvd., Bargersville IN 46106		Summary of Violations 0C6NC	
Owner Michelle Michaelis		Follow-up Yes	Release Date 3/29/2025
Person - in - Charge Maribel Munoz	Certified Food Handler Maribel Munoz (7/20/25)		Purpose: Routine
Establishment Identification # 2380	County Johnson	District D5	Menu Type 4-Extensive handling

- Critical Items are Identified in the Checklist & Narrative Columns Marked "C"
- Violation(s) repeated from previous inspections are denoted in the "summary of violations" & in the narrative below as "R"

Sec#	C/NC	R?	Violation Observed:	To be Corrected by:
415	NC		Observed one dead cockroach at the mop sink area. Establishment is in the process of working with Picket Fence Pest Control Bugs-Be-Gone and Marquez pest control solutions LLC (last inspected on 3/6/25)	3/26/25
218	NC		Observed the following internal food temperatures inside flip top cooler: - Raw chicken @ 42°F - Raw Steak @ 42°F - Raw chorizo @ 43°F Ambient air temperature was observed at 42°F	3/19/25
177			Observed plastic containers of cut onions and cilantro stored in ready to eat cut peppers and tomatoes containers located in the flip top cooler	3/19/25
218	NC		- Observed a broken metal strainer with a handle - Observed a bolt/screw missing for the produce flip top lid - Coca-cola cooler door gasket is split/worn - Bulk yellow bucket (appeared to contain sugar) lid is broken	3/26/25
216	NC		- Observed the microwave stored on wooden blocks - Observed dish machine table legs stored on wooden blocks - Observed plastic wrap around the metal holder for order receipts along the cookline Not water proof or easily cleanable	3/26/25
431	NC		- Exhaust hood system is soiled - Flip top cooler door gaskets are soiled	3/26/25
177	NC		Bulk tortilla chips are not covered/protected from potential contamination	3/20/25

Establishment Representative

Inspected by: Cassi Hall, EHS
(317) 346-43731 chall@co.johnson.in.us



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FRANKLIN IN 46131
Office 317-346-4365 Fax 317-736-5264

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

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[illegible]

Received by (name and title printed): Danielle Phillips HR Manager	Inspected by (name and title printed): Paul Betts EHR
Received by (signature): Danielle M Phillips	Inspected by (signature): Paul Betts
cc:	cc:



Johnson County Health Department
95 S Drake Rd., Franklin, IN 46131
Phone: (317) 346-4365, Fax: (317) 736-5264
Retail Food Establishment Inspection Report

Bottom
3/25

Based on an inspection this day, the item(s) noted below identify violation(s) of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

establishment Four Seasons	telephone 317-859-1985	Date of Inspection 3/24/2025
Establishment address 1140 N State Road 135, Greenwood IN 46142	Summary of Violations 0C2NC	
Owner George Potamousis	Follow-up No	Release Date 4/4/2025
Person - in - Charge Margarita margaritabg@comcast.net	Certified Food Handler Nick Potamousis	Purpose: Routine
Establishment Identification # 324	County Johnson	District D5
		Menu Type 4-Extensive handling

- Critical Items are Identified in the Checklist & Narrative Columns Marked "C"
- Violation(s) repeated from previous inspections are denoted in the "summary of violations" & in the narrative below as "R"

Sec#	C/NC	R?	Violation Observed:	To be Corrected by:
218	NC		1. Observed a plastic broken/damaged container with cut potatoes stored in it located in the walk in cooler 2. Bulk sugar container lid is broken/damaged	
430	NC		1. Observed a hole in the wall above the three bay sink 2. Grout is missing in many areas of the kitchen	
			Notes: 1. Observed the following internal food temperatures inside flip top cooler - Cut sausage at 54°F, employee stated the sausage was cooked and then cut around 8:00 a.m. and is cooling in the cooler - Shredded cheese at 43°F Recommend to turn cooler down or repair 2. Continue to detail clean	

M. S. Helman

C. J. Hall

Establishment Representative



Inspector: C. J. Hall, JHS
(317) 346-43731 johnson@johnson.in.us

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report. ✓

Establishment name Freddy's Frozen Custard + Steakburgers	Telephone Number () Establishment () Owner	Date of Inspection 3-6-25	ID# 2393
Establishment address 2306 N. Morton St. Franklin, IN 46131	Purpose: <u>1. Routine</u> 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up —	Release Date 3-16-25
Owner Eric Cole		Summary of Violations:	
Owner address 66223 7111 W. 151st St. Ste 12 Overland Park, KS		C <u>0</u> NC <u>1</u> R <u>—</u>	
Person in charge Beth Stinson - GM		Menu Type (See back of page)	
Responsible person's email eric.cole@mmercustard.com		1 <u>—</u> 2 <u>—</u> 3 <u>✓</u> 4 <u>—</u> 5 <u>—</u>	
Certified food handler Beth Stinson ServSafe exp 9/20/28			

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[illegible]

Received by (name and title printed): Beth Stinson General Manager		Inspected by (name and title printed): Mia Papageorge, EHS	
Received by (signature): 		Inspected by (signature): 	
cc:		cc:	

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment name <i>Fujisan</i>	Telephone Number () Establishment () Owner	Date of Inspection <i>3/5/25</i>	ID# <i>2106</i>
Establishment address <i>1101 Windhorst Way Greenwood IN</i>	Purpose: <input checked="" type="radio"/> 1. Routine <input type="radio"/> 2. Follow-up <input type="radio"/> 3. Complaint <input type="radio"/> 4. Pre-Operational <input type="radio"/> 5. Temporary <input type="radio"/> 6. HACCP <input type="radio"/> 7. Other (list)	Follow-up	Release Date
Owner		Summary of Violations:	
Owner address		C <input type="radio"/> NC <input type="radio"/> R <input type="radio"/>	
Person in charge		Menu Type (See back of page)	
Responsible person's email		1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified food handler <i>X 24</i>			

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
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[illegible]

Received by (name and title printed): x <i>Z</i>		Inspected by (name and title printed): <i>Terry D. Bayless</i>
Received by (signature): x <i>Z</i>		Inspected by (signature): <i>Terry D. Bayless</i>
cc:	cc:	cc:



JOHNSON COUNTY HEALTH DEPARTMENT
RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT

95 S. DRAKE ROAD
FRANKLIN IN 46131
Office 317-346-4365 Fax 317-736-5264

Bokm
3/27

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

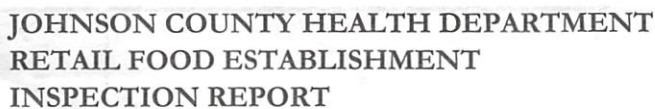
Establishment name Great Wall	Telephone Number () Establishment () Owner	Date of Inspection 3-26-25	ID# 2021
Establishment address 1840 Northwood Plz Dr Franklin IN 46131	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up -	Release Date 4-6-25
Owner Li Yang		Summary of Violations: C 2 NC 3 R 1	
Owner address 1067 Oakleaf Rd. Franklin, IN 46131		Menu Type (See back of page) 1 2 3 4 5	
Person in charge			
Responsible person's email nenuwlin@me.com			
Certified food handler Li Yang 2/22/30			

• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"

• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section #	C/NC	R	Narrative	To Be Corrected by
112	NC	✓	front left upright cooler residential, not NSF/ANSI commercial approved	whenever no longer 4°F or below
216	NC		cardboard & foil lining many surfaces throughout facility: legs on shelving in walk-in cooler, sauce storage table on wok cook line, fryer utensil storage, some shelving in the back. Cloth w/ excessive amount of oil stored between fryer & woks	3-28-25
173	C		raw chicken stored above ready-to-eat chicken & vegetables in walk-in cooler	3-26-25
174	NC		bulk white ingredients (salt, sugar) not labeled on wok cook time line	3-28-25
191	C		no date markings seen on ready-to-eat time, temperature control foods	3-26-25
Notes: ① employee/personal food shall be labeled & stored separately from customer food ② employees shall not eat in the kitchen				

Received by (name and title printed): Nenuw. Lin	Inspected by (name and title printed): Mia Papageorge, EHS
Received by (signature): 	Inspected by (signature):
cc:	cc:



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FRANKLIN IN 46131
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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

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[illegible]

Received by (name and title printed): L. Marise B. Horton R. 200		Inspected by (name and title printed): Terry D. Bayless	
Received by (signature): [Signature]		Inspected by (signature): [Signature]	
cc:	cc:	cc:	



JOHNSON COUNTY HEALTH DEPARTMENT
RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT

95 S. DRAKE ROAD
FRANKLIN IN 46131
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Bekm
3/13

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment name Hokkaido Ramen House	Telephone Number () Establishment () Owner	Date of Inspection 3-10-25	ID# 2558
Establishment address 1251 US Hwy 31N Greenwood, IN 46142	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up -	Release Date 3-20-25
Owner Zhenyu Weng		Summary of Violations: C 1 NC 2 R 3	
Owner address 1015 Oswego Rd Carmel, IN 46032		Menu Type (See back of page) 1 2 3 4 5	
Person in charge Carol/Shuiyang Chen - owner			
Responsible person's email hokkaido1251@gmail.com			
Certified food handler Shuiyang Chen (ServSafe exp 3/13/28)			

• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"

• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section #	C/NC	R	Narrative	To Be Corrected by
191	C	R	ready to eat, potentially hazardous foods (pork belly, sauces) without date markers in walk-in cooler	3-10-25
297	NC	R	soda nozzles soiled	
218	NC	R	blue lids used to store sauces in walk-in cooler damaged	3-15-25
Notes: ① sauces with animal products (egg & dairy) & sauces that state "refrigerate after opening" shall be kept in the walk cooler, or hot held outside of the temperature danger zone, 42°F-134°F				
② slight ice build up in walk-in freezer				
③ wet rag used to stabilize cutting board in back kitchen				

Received by (name and title printed):

Shuiyang Chen

Received by (signature):

[Signature]

Inspected by (name and title printed):

Mia Papageorge, EHS

Inspected by (signature):

[Signature]

cc:

cc:

cc:



JOHNSON COUNTY HEALTH DEPARTMENT
RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT

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FRANKLIN IN 46131
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Betkin
317

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment name <i>House of Tokyo</i>	Telephone Number () Establishment () Owner	Date of Inspection <i>3/6/25</i>	ID# <i>515</i>
Establishment address <i>172 Melody Lane Greenwood, IN 46142</i>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up .	Release Date
Owner		Summary of Violations: C <i>4</i> NC <i>12</i> R	
Owner address		Menu Type (See back of page) 1 2 3 4 <input checked="" type="checkbox"/> 5	
Person in charge			
Responsible person's email			
Certified food handler			

• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"

• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section #	C/NC	R	Narrative	To Be Corrected by
178	NC		couple of food products are not covered inside walk-in cooler.	3/7
177	NC		There are food items that are not 6" off the ground inside the walk-in cooler.	3/10
430	NC		Siding entrance by the walk-in freezer & the dry storage is worn.	↓
343	C		Hand sink in the kitchen is not operational.	3/19
347	NC		Paper towel dispenser does not work.	3/10
439	C		Pesticide spray bottle is stored at hand sink.	ASAP
414	NC		There's a gap/space underneath back exit door	3/19
177	NC		Alcohol observed inside meat cooler - Alcohol not separated from food.	ASAP
431	NC		Ground & walls at dish washing area is soiled. (ii) Floor at back exit, by the prep-sink station is soiled. (iii) Floor & wall by the storage area is soiled & underneath the dish & utensils storage is soiled.	3/12
191	C		There are no date markings on couple of food items in walk-in cooler	↓

Received by (name and title printed): <i>ROSY Tinzack</i>	Inspected by (name and title printed): <i>Paul Betkin EHS</i>
Received by (signature): <i>[Signature]</i>	Inspected by (signature): <i>[Signature]</i>
cc:	cc:



Johnson County Health Department
460 N. Morton St., Ste. A, Franklin, IN 46131
Phone: (317) 346-4365, Fax: (317) 736-5264
Retail Food Establishment Inspection Report

*Before
3/24*

Based on an inspection this day, the item(s) noted below identify violation(s) of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

establishment Huckaby's Smokehouse Catering Company	BBQ Steaks & Sweets	telephone 3178518995	Date of Inspection 3/21/2025 4p
Establishment address 1140 N SR 135, STE I-L, Greenwood, IN 46142		Summary of Violations 0 C, 3 NC, 0 R	
Owner Carl Huckaby		Follow-up No	Release Date 3/31/2025
Person - in - Charge Carl Huckaby	Certified Food Handler		Purpose: Routine
Establishment Identification # 2503	County Johnson	District D5	Menu Type 4-Extensive handling
Chef@thefoodguys.net			

- Critical Items are Identified in the Checklist & Narrative Columns Marked "C"
- Violation(s) repeated from previous inspections are denoted in the "summary of violations" & in the narrative below as "R"

Sec#	C/NC	R?	Violation Observed:	To be Corrected by:
187	C		Note: Cole Slaw at 45°F, Cottage Cheese at 46°F at 4:26pm in flip-top cooler. Food product in bottom at 40°F. Product is uncovered and in plastic pans.	3/21/25
218	NC		Hood Filters not snug. Walk-in-cooler ceiling is leaking. Owner is working with company to remedy issue.	3/30/25
179	NC		Sneeze Guards not provided over sauces offered to the consumer.	3/21/25

Carl

Elizabeth Senisse