

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.

Establishment name	Telephone Number	Date of Inspection	ID#
Sassafras	( ) Establishment	4/8/25	
Establishment address	( ) Owner	7/0/20	11479
229 N. Madison Ave	Purpose:	Follow-up Release	
Owner		Tonow-up Incicase	Date
Owner Gragnu	1. Koddine	Summary of Violation	200
		Summary of violatio	)115.
Owner address	3. Complaint	mi (for Smerringen)	em betimi I
ther have no account and a received with	1 Des Omenstionel	i orseriood department	
Person in charge			
about a busined who			
Responsible person's email	7. Other (list)	Menu Type (See ba	ick of page)
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Certified shod handler		12_3 ⊀	4 5
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• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND	D NARRATIVE COLUMNS MARKED "C"		7 34
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DE		IN THE NARRATIVE BELOW AS	"R"
Section # C/NC R	Narrative	managed was so supprin	To Be Corrected by
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95 S. DRAKE ROAD FRANKLIN IN 46131

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-4, 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  STPAM BOAT CATERING CO. LLC  Establishment address (RFD Bldg.)  SS W MAJSON ST. FRNHLIN, IN  Owner  RYAN WHETHAM  Owner address  Person in charge  RYAN WHETHAM  Responsible person's email	4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up Release Date  5//0/25  Summary of Violations:  OP OPF O COCL  Menu Type (See back of page)
Certified food handler RY AN WHETHAM SERVIAVE EXP. 3/3/2		12_(3/8)45
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN TO Section #	Narrative  OBSERUE  V )	To Be Corrected by
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# 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 establishment Supreme P	roduce @Kroger810			Date of Inspection 4/2/2025
Establishment address	2200 Independence D		Summary of Violations 2C1NC	
Owner			Follow-up Yes	Release Date 4/12/2025
Person - in - Charge	Certified Food Handler		Purpose:	Menu Type 4-Extensive handling
Establishment Identification # 2744	County Johnson	District D5	Routine	

- 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	С		Observed the following internal food temperatures: Watermelon @49*F Cantaloupe @ 45*F Employee stated the cut fruit was prepared at noon 4/2/25	Recommend discarding PHF
191	NC		Cut fruit was observed date marked prepped 4/1/25 @ 5:21 pm and discard 4/2/25 @5:21 pm  Employee stated they started to prepare the fruit inside the bulk containers on 4/2/25 @ noon. The date mark is wrong	Corrected at time of inspection
187	С		Observed chunky guacamole @44*F located inside display cooler for customers	Recommend discarding PHF
303	C		Observed employee not properly sanitizing dishes after washing and rinsing them	
Note:			Hot water is not functioning at the three bay sink located on the right	

Tum

Cold Hard



# 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		telephone		Date of Inspection
Supreme Pro	duce@Krogg(979	317-736-6004		4/4/2025
Establishment address	Je .		Summary of Violations	
970 North Morto	n Street, Franklin IN 4	16131	6	BC0NC
Owner			Follow-up	Release Date
Supreme S	Yes	4/14/2025		
Thlacun	g2020@gmail.com			
Person - in - Charge	Certified Food Handler		Purpose:	Menu Type
				4-Extensive handling
Establishment Identification #	County	District	Routine	
2741	Johnson	D5		

- Critical Items are Identified in the Checklist & Narrative Columns Marked "C"
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Sec#	C/NC	R2	Violation Observed:	To be Corrected by:
187	С		Observed the following internal food temperatures @1:35 p.m.:  1. Cut bulk cantaloupe at 45*F located in a plastic container on a cart  2. Cut bulk watermelon at 45*F located in a plastic container on a cart  3. Cut bulk honeydew at 45*F located in a plastic container on the prep table  Employee metal steam probe thermometer showed the internal temperature of the bulk cut watermelon at 46*F  Employee stated that they took the cart of bulk cut fruit out of the cooler at 7:30 a.m.	Recommend discarding all PHF
187	С		Observed cut melon at 44*F in a plastic container with a lid located in the customer display cooler	Recommend discarding all PHF
303	С		Observed employee rinsing out the bulk watermelon plastic container in the 1st bay of the three bay (used to wash produce). Then placed the container in the 2 <sup>nd</sup> three bay sink (used for dishes) and filled the container up with sanitizer solution  Dishes need to be washed, rinsed, sanitized, and air dried.	

Establishment Representative





# 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

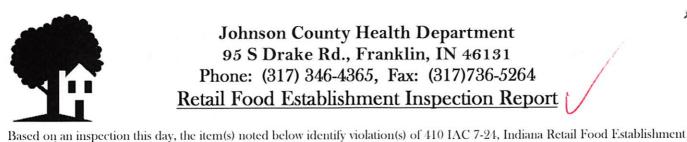
Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Telephone Number Date of Inspection Establishment name Establishment name

TACO BOLL #35305

Establishment address

1 \ S GRANVILLO DR. FRANKLIN, AN ) Establishment 4/4/25 2316 ) Owner Follow-up Release Date Routine Owner Summary of Violations: 2. Follow-up Owner address 3. Complaint 4. Pre-Operational Person in charge 5. Temporary ELIZABENTH NELMS 6. HACCP Responsible person's email Menu Type (See back of page) 7. Other (list) DERUSAFE) 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" To Be Corrected by Narrative Section # C/NC R SOME FOOD PACKAGES NOT STORED OFF FLOOR MINIMUM OF 6 ANCHES ON WAZY-IN FREEZER FLOOR NEXT TO WAZE, UNDER EQUIPMENT 4/10 NOT CLEAN IN KIRHEN/FOOD PREPARATION NC 431



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



Retail Food Establishment Inspection Report

establishment		telephone		Date of Inspection
Top Tier Cakes 317-449-3902				4/1/2025
Establishment address	Summary of Violations	s		
225 North US 3		0C0NC		
Owner			Follow-up	Release Date
	Jenna Elkins		No	4/11/2025
Person - in - Charge	Certified Food Handle	er	Purpose:	Menu Type
Jenna Rigsby			D	2-Limited menu
Establishment Identification #	County	District	Routine	
2636	Johnson	D5		

- 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:
			No items noted at time of inspection	
			Note:  - Removes cloths that clean dishes are stored to air dry on after the wash, rinse, and sanitize process	
	-			



### 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.

	317-207-0920		
	01, 20, 0020		4/3/2025
		Summary of Violations:	
n, IN 46131		2	C, 3NC
		Follow-up	Release Date
Nichole and Carl Rains			
Email- nichole@urbanairfranklin.com			
food handler		Purpose	Menu Type
Clara I	Havener		1- Limited menu
clara@urbanairfranklin.com			
County	District		
hnson	D5		
	Rains Franklin.con food handler Clara I	Franklin.com  food handler  Clara Havener  County  District	Rains Follow-up No franklin.com food handler Clara Havener  No District  Routine

- 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:
439	С		Toxic and poisonous sanitizer spray bottles stored above open and unopened sauces	4/3/25
295	NC		<ul><li>Interior of nacho cheese dispenser soiled</li><li>Ovention® metal oven rack soiled</li></ul>	4/4/25
174	NC		Garlic cooking oil not in original packaging not labeled with common name	4/5/25
136	С		Employee observed eating in the food prep area	4/3/25
418	NC		Employee belongings stored in food prep area, available lockers shall be used	4/3/25
			Notes: 1. Floor under soda boxes soiled	
			2. sanitizer test strips compromised	
			3. branded buckets used to serve "beer buckets" with ice are rusty	

Received it Many Hammer

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



95 S. DRAKE ROAD FRANKLIN IN 46131

Office 317-346-4365 Fax 317-736-5264

(26)

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-27, Indiana Retail Food

Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report

Establishment Saintation Requirements. The time mint for correct	tion of each violation is specified	in the narrative portion (	77 tino reporti
Establishment name  WAZ - MART SUPERCENTED		Date of Inspection 4/30/2S	ID#
Establishment address  2/25 N MORON FRANKLIN, IN	Purpose:	Follow-up Release	- 1
Owner	1. Routine	- 5	10/25
WAL-MART	2. Follow-up	Summary of Violation	ons:
Owner address	3. Complaint 4. Pre-Operational	(17PF 6)	core
Person in charge	5. Temporary	OK W	R
SAZOB NIX about a delangue sa		ni pas guidous gaisaire.	9 9853630
Responsible person's email	7. Other (list)	Menu Type (See ba	ick of page)
Certified food handler  SACOB NIX GERNSARE)		123_	4 🔻 5
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATI	IVE COLUMNS MARKER		
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN T	THE "SUMMARY OF VIOLATIONS" AND I		THE RESERVE OF THE PARTY OF THE
Section # PANODY	Narrative		To Be Corrected by
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286 CORE & PAINT PRELING		IHCK-IN	5/20
COOLER SHELVEN		1011	5/20/25
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Retail Food Establishment Inspection Report

Based on an inspection this day, the item(s) noted below identify violation(s) of 410 IAC 7-26, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment		telephone		Date of Inspection
Wild Eggs	502-376-5405		4/16/2025	
Establishment address		Summary of Violations		
1279 North Emerson A	ve, Greenwood IN	46143	2P 1PF 1C	
Owner			Follow-up No	Release Date 4/26/2025
Person - in - Charge Rachel camara@wildeggs.com	Certified Food Handler	Certified Food Handler		Menu Type 3-Extensive handling
Establishment Identification # 2915	County Johnson	District D5		

- 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:
216	P		Observed eggs yolk inside a plastic container on the cook line at 93*F without a time sticker  - Manager stated that the establishment uses time as a public health control for the egg yolks	Corrected
431	С		Observed plastic containers and a spoon stored in the designated hand sink located at the cook line	4/16/25
247	PF		Many thermometers not easily seen/observed in cooler units	4/26/25
151	- C		Observed an employee handling food products without a hair restraint	Corrected
286	C		Observed a knife with a damaged yellow handle located by the walk in cooler	4/16/25
213	Р		Observed the following internal food temperatures inside the two door warmer unit:  - Queso @ 80*F - Sausage gravy @ 75*F	4/16/25

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



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Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment name	Telephone Number	Date of Inspection	ID#	
Establishment address  Establishment address  ERANKLING-A	( ) Establishment ( ) Owner	14/3/25	223 <i>S</i>	
Establishment address FRANKLING A. 1125 W DEFFERSIN ST.	Purpose:	Follow-up Release	Date	
Owner	1. Routine	- 141	13/25	
	2. Follow-up	Summary of Violations:		
Owner address	3. Complaint	Later to the Committee of the Committee		
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Person in charge	5. Temporary	C_ONC_LR		
SANDY BIDDLE	6. HACCP			
Responsible person's email	7. Other (list) Menu Type (See back of page)			
Certified food handler BRUSPER ED	P)	12345		
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE				
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE     Section # C/NC R	e "summary of violations" and in Narrative		To Be Corrected by	
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Owner address  Person in char  Responsible	Kohu nt addres 7 A	s  1,   purpago  orno \l	Dadison Ave  Greenwood, In  Sales of the North Content Retail front  Sales of the Ave are a mailten and a content  sales of the condition of suggle meal service.	4. Pre-Operational 5. Temporary	Date of Inspection  H/11/25  Follow-up Release Date  Summary of Violations:  C NC R  Menu Type (See back of page)	
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