

460 N. MORTON ST. STE A FRANKLIN, IN 46131

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

Page 1 of

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Establishment name Center Cireve & School	Telephone Number () Establishment	Date of Inspection	ID#
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2455 S. Margantown Rd Chreenwood, The	Purpose:	Follow-up Release	
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460 N. MORTON ST. STE A FRANKLIN, IN 46131

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

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460 N. MORTON ST. STE A 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) Establishment Establishment address
4900 W. Stones Crossing Rol Treenwood
The 46143) Owner Purpose: Follow-up Release Date 1. Routine enter Cirove Community Selvost Corp. 2. Follow-up Summary of Violations: 3. Complaint 4. Pre-Operational Person in charge 5. Temporary 6. HACCP Responsible person's email Menu Type (See back of page) 7. Other (list) 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" Narrative To Be Corrected by Section # C/NC R Received by (name and title printed):

JOHNSON COUNTY HEALTH DEPARTMENT 95 S DRAKE RD FRANKLIN, IN 46131

PHONE: 317-346-4365 FAX:317-736-5264

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95 S. DRAKE ROAD FRANKLIN IN 46131

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

7-26 Am

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95 S. DRAKE ROAD FRANKLIN IN 46131

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

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95 S. DRAKE ROAD FRANKLIN IN 46131

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

7-26 AW
Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food

Establishm	ent Sani	tation	Requirements. The time limit for corre	ection of each violation is specifie	d in the narrative portion	on of this report.
Establishmer Establishmer	334	s	Creek Elemento Greenwood Rd IN 46/43	Telephone Number Uy Establishment Owner	Date of Inspection 4-16-25	
2111 S	She	ek		Purpose:	Follow-up Relea	ase Date - 24 - 25
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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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95 S. DRAKE ROAD WY FRANKLIN IN 46131

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

Page 1 of

Establishme	nt name			Telephone Number	Date of Inspection	ID#
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Establishme	nt addres	S	d middle School Greenwood veritt Rd. IN	() Owner	4/11/25	2084
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460 N. MORTON ST. STE A FRANKLIN, IN 46131

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

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JOHNSON COUNTY HEALTH DEPARTMENT

95 S DRAKE RD

FRANKLIN, IN 46131

PHONE: 317-346-4365 FAX:317-736-5264

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Establishmen	nt name	nIV.	Elementing ven Rel Cirtenwood 1N 4 6142 Community School Corp	Telephone Number () Establishment		D#
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Center	CINE	Ne	Community Selver Confe	2. Follow-up	Summary of Violations:	
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95 S. DRAKE ROAD FRANKLIN IN 46131 Office 317-346-4365 Fax 317-736-5264

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95 S. DRAKE ROAD FRANKLIN IN 46131

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

7-26 Am

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

Establishmen	nt Sani	tation	Requirements. The time limit for correction	on of each violation is specified	in the narrative portion	of this report.
Establishment Lea Establishment	t name	nt	Crossing Elementa Whiteland, IN 5W. 46184	Telephone Number () Establishment () Owner	Date of Inspection 4-28-25	13/8
Owner				1. Routine		8 - 25
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Certified food CCC CRITICAL IT	lia	. (Combs 10/7/26 ENTIFIED IN THE CHECKLIST AND NARRATIVE	E COLUMNS MARKED "C"	123	_45
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JOHNSON COUNTY HEALTH DEPARTMENT 95 S DRAKE RD

FRANKLIN, IN 46131

PHONE: 317-346-4365 FAX:317-736-5264

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95 S. DRAKE ROAD FRANKLIN IN 46131

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

Establishment Sanitation Requirements. The time limit for correct					
Establishment name	Telephone Number	Date of Inspection	ID#		
Southwest Elementary	() Establishment	4/14/25	390		
Establishment address	() Owner				
619 m, smith Valley Rdi	Purpose:	Follow-up Releas	e Date		
Owner Greenwood, IN	1. Routine				
	2. Follow-up	Summary of Violat	Summary of Violations:		
Owner address	3. Complaint	- American Can IV in			
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Person in charge Holland and School Roll of the Person in charge Holland School					
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& Jennifer whaley					
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATI			C HDH		
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JOHNSON COUNTY HEALTH DEPARTMENT

FRANKLIN, IN 46131

PHONE: 317-346-4365 FAX:317-736-5264

Page 1 of

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.

Date of Inspection Telephone Number Establishment address

Establishment address

4135 W. Smith valley Rd Tu 46142

Owner

Center Community School Corp.

Owner Community School Corp.

Compleint) Establishment 4/17/25 Follow-up Release Date Summary of Violations: 3. Complaint 4. Pre-Operational $_{\rm C}$ \bigcirc $_{\rm NC}$ \bigcirc $_{\rm R}$ Person in charge 5. Temporary 6. HACCP Menu Type (See back of page) Responsible person's email 7. Other (list) Certified food handler VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R" Narrative To Be Corrected by Section # C/NC R during inspution. Received by (name and title printed):



460 N. MORTON ST. STE A 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 name Walnut Cavove E.S Establishment address 4079 N. 500 W. Bargersville IN 4610 G Owner Center Grove Community Ellust Corp. Owner address Person in charge Responsible person's email			Bargersville IN 4610G	Telephone Number () Establishment () Owner Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Date of Inspection ID# 4 15 2-5 2-286 Follow-up Release Date Summary of Violations: C	
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95 S. DRAKE ROAD FRANKLIN IN 46131

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

7-26 (Am)

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food

Establishm	nent Sanit	ation Requ	irements. The time limit for correc	tion of each violation is specified	in the narrative portion	of this report.	
Establishment name			101.	Telephone Number	Date of Inspection	ID#	
Establishme	ont address	telan	& Elementary	() Establishment	4-16-25	5 415	
170	Cont	er C	Whiteland	() Owner	Follow-up Releas		
Owner	CCIII	4 07	, IN TUIXY	Purpose: 1. Routine	Follow-up Release	-24-25	
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Owner addi				3. Complaint	i (L. ii. 2 maio stemoj si kr		
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D	erin	yer	1 o House	6. HACCP	The Control of the Control		
Responsible	person's	email	(Servsake	7. Other (list)	Menu Type (See	back of page)	
Certified floo	od handler	. 0	1011001	128	1 2 / 3		
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95 S. DRAKE ROAD FRANKLIN IN 46131

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

7-26 (AM)

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food

Establishm	ent Sani	tation	Requirements. The time limit for correction	on of each violation is specified	in the narrative portio	n of this report.	
Establishment name				Telephone Number	Date of Inspection	ID#	
Entitlema High School				() Establishment	4-14-25	: 4110	
Establishment address 2007 Ch Whiteland				() Owner		13	
Owner	110	u	07. 110 44184	Purpose:	Follow-up Release Date		
Owner	Pro	00		1. Routine	Ves 4-26-25 Summary of Violations:		
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Owner addre				3. Complaint	O complete and the	amen bannat	
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