



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

Betsy
5/6

Based on an inspection this day, the item(s) noted below identify violation(s) of **110 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 Dairy Queen	telephone 317-736-6821	Date of Inspection 5/2/2025
Establishment address 480 N Morton Street, Franklin IN 46131	Summary of Violations 0P 0PF 2CORE	
Owner Joseph Napier	Follow-up No	Release Date 5/12/2025
Person - in - Charge Michael Hammer	Certified Food Handler Michael Hammer (12/16/25)	Purpose: Routine
Establishment Identification # 118	County Johnson	District D5
		Menu Type 3-Extensive handling

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

Sec#	P/PF/CORE	R?	Violation Observed:	To be Corrected by:
286	CORE		Walk in freezer door gasket is split/worn	
189	CORE		Food products not stored 6" off the floor inside walk-in freezer	
Note:			Observed ice scoop for ice machine not stored with handle above food product	

Establishment Representative

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



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

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Betsy
5/27



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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 **110 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 Don Cuervo Tacos and Brews		telephone 317-300-9168		Date of Inspection 5/21/2025	
Establishment address 3113 West Smith Valley Road, Greenwood IN 46142			Summary of Violations 3P, 3PF, 6CORE		
Owner Jacob Lopez			Follow-up No		Release Date 5/31/2025
Person - in - Charge Juan		Certified Food Handler Jessica		Purpose: Routine	Menu Type 4-Extensive handling
Establishment Identification # 2387		County Johnson	District D5		

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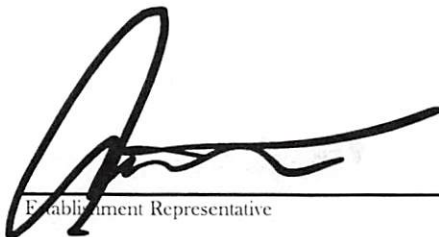
Sec#	P/PF	R?	Violation Observed:	To be Corrected by:
213	P		Observed raw chicken portioned in plastic bags inside walk in cooler at 47°F-50°F - Raw chicken was stored above chorizo	5/21/25
356	P		Observed no dedicated hand sink located in the bar - 3 bay sink can't be used as the dedicated hand sink	5/28/25
279	PF		Observed no metal probe food thermometer (0-220°F)	Corrected at time of inspection- employee brought two food thermometers onsite
NOTE			Standup, single door "true" freezer located in the server area, not in use Flat top grill located by back exterior door, not in use	6/4/25
NOTE			Dish machine sanitizer solution observed less than 50 ppm Red sanitizer buckets chlorine solution observed over 200 ppm	
286	CORE		1. Walk in freezer door frame is damaged (doesn't close properly)- observed ice buildup around the door 2. "Bery" flip top cooler door gasket is spilt/worn 3. "True" two door flip top cooler top right lid is damaged located in the server area	6/4/25

Establishment Representative

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2387 - 5/21/25

		4. Frying pan handle is damaged	
348	P	Appears the Coca-Cola drink machine, ice bin lacks an air gap	5/28/25
456	PF	Toxic spray bottles not labeled	5/21/25
183	CORE	Frying pan is stored hanging off of cook line trash can	5/21/25
430	PF	Observed no paper towels at the hand sink located by the flip top cooler	5/21/25
443	CORE	The following areas are soiled: 1. Walk in cooler door gasket 2. Walk in cooler ceiling 3. Walk in cooler floor where beer is stored	6/4/25
306	CORE	The following equipment are soiled: 1. Can opener 2. Interior of the ice machine 3. Two bay sink drains	6/4/25
176	CORE	Bulk food containers not labeled	5/22/25
189	CORE	Observed food products not stored 6" off the floor inside walk in freezer Single use items and soda boxes not stored 6" off the floor in storage room	5/22/25
		Notes: 1. One larger fryer basket is damaged 2. Remove wooden block under prep table where bulk tea containers are stored 3. Remove all foil 4. Wet rags not stored in sanitizer solution 5. One container of salsa observed at 46°F	



Establishment Representative



Inspected by: Cassi Hall, EHS
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Blake
5/12



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Retail Food Establishment Inspection Report

Based on an inspection this day, the item(s) noted below identify violation(s) of **110 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 Dye's Walk		telephone 317-535-8635		Date of Inspection 5/5/2025	
Establishment address 2080 South SR 135, Greenwood IN 46143				Summary of Violations 0P, 1PF, 6CORE	
Owner				Follow-up No	Release Date 5/15/2025
Person - in - Charge Blake CHEF@DYESWALKCC.COM kbaumann@dyeswalkcc.com		Certified Food Handler Blake (4/25/29)		Purpose: Routine	Menu Type 4-Extensive handling
Establishment Identification # 1628		County Johnson	District D5		

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Sec#	P/PF	R?	Violation Observed:	To be Corrected by:
216	P		Observed batter used for raw chicken and fish in metal containers with lids located on a cart by fryer @55°F with no time stamp/sticker <ul style="list-style-type: none">- Establishment is using time as a public health control- <i>A SOP must be provided onsite per the new food code 7-26</i>	Corrected at time of inspection
212	PF		Observed soup in a large plastic container with a lid greater than 4" located in the walk in cooler at 84°F <ul style="list-style-type: none">- manager stated that they are in the process of cooling the soup to 41°F or less	5-5-25
234	CORE		The table countertop located by the two bay sink is peeling <ul style="list-style-type: none">- Not smooth and easily cleanable	6-5-25
442	CORE		The floor in the dish area is worn Cove base is missing in the dish area Wall is worn under the two bay sink	7-5-25
443	CORE		The ceiling located in the dish area is dusty	7-5-25

Establishment Representative

Blake D. Clug

Inspected by: Cassi Hall, EHS
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Cassi Hall
Elizabeth F. Emisse

5-5-25
#1628-pg 2



		The walls along the dish machine and two bay sink are soiled	
443	CORE	Storage room located by the kitchen needs cleaned and organized	5-19-25
421	CORE	Storage room located by the kitchen exterior door is not tight fitting <ul style="list-style-type: none">- Door is not self-closing- A large hole was observed	5-19-25
189	CORE	The shelving unit (bottom shelf) is not 6" off the floor	5-8-25
		Note: <ul style="list-style-type: none">1. Establishment needs detailed cleaned2. Observed many rodent droppings in the storage room and in the snack bar cabinets- Premier Pest Control was onsite 5/1/25	

+ Blaha Clarence

Cassi Hall

Establishment Representative

Inspected by: Cassi Hall, EHS
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Betam
6/2

✓

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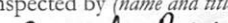
Received by (name and title printed): • Juan Guia maintenance		Inspected by (name and title printed): Paul Betiku EHS
Received by (signature): • Juan Guia		Inspected by (signature): Paul Betiku
cc:	cc:	cc:

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 Five star food service - National Trade	Telephone Number #1	Date of Inspection 5/28/25	ID# 2472
Establishment address 2011 south tech dr Greenwood IN	() Establishment () Owner	Follow-up -	Release Date
Owner	Purpose: 1. <u>Routine</u> 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Summary of Violations: C <u>D</u> NC <u>D</u> R <u> </u>	
Owner address		Menu Type (See back of page)	
Person in charge		1 <u> </u> 2 <u>✓</u> 3 <u> </u> 4 <u> </u> 5 <u> </u>	
Responsible person's email			
Certified food handler			

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[illegible]

Received by (name and title printed): Jason Small, OPS Manager	Inspected by (name and title printed): Paul Berman EHS
Received by (signature): 	Inspected by (signature): 
cc:	cc:



Buku
6/2



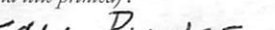

Telephone Number
#2) Establishment
() Owner

Purpose:

1. Routine
2. Follow-up
3. Complaint
4. Pre-Operational
5. Temporary
6. HACCP
7. Other (list)

- | | |
|--|--------------|
| Follow-up
← | Release Date |
| Summary of Violations: | |
| C <u> D </u> NC <u> D </u> R <u> </u> | |
| Menu Type (See back of page) | |
| 1 <u> </u> 2 <u> ✓ </u> 3 <u> </u> 4 <u> </u> 5 <u> </u> | |

there are no violation during inspection.

Inspected by (name and title printed): Lindsay Burkes / HR Business Partner	Inspected by (name and title printed): Paul Belieu Lts
Inspected by (signature): 	Inspected by (signature): 
cc:	cc:



Benny
6/2

1 ✓

Telephone Number _____
() Establishment _____
() Owner _____

- Purpose:
1. Routine
 2. Follow-up
 3. Complaint
 4. Pre-Operational
 5. Temporary
 6. HACCP
 7. Other (*list*)

No violation during inspection

Inspected by (name and title printed):
Paul Beliku EHS

Inspected by (signature):
Paul Beliku

cc:



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FRANKLIN IN 46131
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[illegible]

Received by (name and title printed): "KEVIN SINCLAIR"	Inspected by (name and title printed): Paul Belieu EHS
Received by (signature): [Signature]	Inspected by (signature): [Signature]
cc:	cc:



Belen
6/2

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✓

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establishment Folktale Event Center		Telephone 317-300-9967		Date of Inspection 5/28/2025	
Establishment address 245 S Madison GREENWOOD IN 46142			Summary of Violations 0P, 2PF, 1CORE		
Owner Mark and Katie Henrichs			Follow-up No		Release Date 6/7/2025
Person - in - Charge Danielle Freeman		Certified Food Handler		Purpose: Routine	Menu Type 2-Limited menu
Establishment Identification # 2588		County Johnson	District		

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Sec#	P/PF	R?	Violation Observed:	To be Corrected by:
260	C	R	No thermometer observed in the chest freezer	6/4/25
301	P/f	R	No chemical test strips observed	6/4/25
456	P/f	R	Observed chemical spray bottles not labeled	5/29/25

Betsy
6/13



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establishment Freedom Springs Concession Stand	telephone 317-884-2078	Date of Inspection 5/30/2025	
Establishment address 850 W Stop 18 Road, Greenwood IN 46143		Summary of Violations 0P, 0PF, 0CORE	
Owner City of Greenwood		Follow-up No	Release Date 6/10/2025
Person - in - Charge	Certified Food Handler	Purpose: Routine	Menu Type 1- Limited menu
Establishment Identification # 1879	County Johnson	District D5	

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Sec#	P/PF	R?	Violation Observed:	To be Corrected by:
			No items noted at time of inspection	
			Note: First aid Kit was stored above prep-table and hot dog roller - Needs to be stored in a designated area where food products, single use items, food contact surfaces, and equipment can't be potentially contaminated.	


Establishment Representative


Inspected by: Cassi Hall, EHS
(317) 346-43771 chall@co.johnson.in.us



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

Establishment name FRIENDS DINER	Telephone Number () Establishment () Owner	Date of Inspection 5/5/25	ID# 2202
Establishment address 989 US 31 WHITLAND, IN	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up —	Release Date 5/15/25
Owner PEREZ		Summary of Violations: (1) PF (3) CORE	
Owner address		NO	
Person in charge RUBEN PEREZ		Menu Type (See back of page) 1 2 3 4 X 5	
Responsible person's email			
Certified food handler RUBEN PEREZ			

~~* CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED *~~

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Section #	280	R	Narrative	To Be Corrected by
443	(CORE)	*	FLOOR IN AREAS OF KITCHEN NOT CLEAN, UNDER EQUIPMENT, NEXT TO WALL (FEW SMALL FLIPS SEEN)	5/10/25
401	(CORE)	*	DRAIN PLUG NOT INSTALLED ON OUTSIDE DUMPSTER	5/30
286	(CORE)	*	DOOR GASKET WORN / SPLIT ON 2 DOOR AND 3 DOOR UPRIGHT REFRIGERATORS IN KITCHEN	5/30
430	(PF)	*	DISPOSABLE TOWELS NOT AVAILABLE AT HANDSINKS IN KITCHEN	CORRECTED 5/5/25
(NOTE)			(1) CHEST FREEZER NOT IN USE	✓
(NOTE)			HAND WASHING SIGNS NOT POSTED FOR EMPLOYEES AT HANDSINK	

Received by (name and title printed):

Inspected by (name and title printed):

Received by (signature):

Inspected by (signature):

cc:

CC:

CC: