

JOHNSON COUNTY HEALTH DEPARTMENT
RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT

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

becky
1/5

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 Dairy Queen	Telephone Number () Establishment	Date of Inspection 12-29-25	ID# 192
Establishment address 601 W. Main St.	() Owner	Follow-up 1-9-26	Release Date
Owner Greenwood 46142	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Summary of Violations: P 1 NC 7 PF Core	
Owner address		Menu Type (See back of page) 1 2 3 X 4 5	
Person in charge			
Responsible person's email Chillybowl@yahoo.com			
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/N/C	R	Narrative	To Be Corrected by
353	C		mop sink is not functioning ↳ hot water (100°F or more) and cold water not provided.	1-1-26
348	P		① Observed a garden hose stored below the flood line @ the 3 Compartment Sink.	12-31-25
430	PF		② Ice Machine lacks an air gap.	
430	PF		Observed no disposable towels @ kitchen hand sink.	Corrected
443	C		Floors, walls, and ceiling are soiled ↳ under equipment	1-30-26
442	C		① Observed many broken floor tiles.	6-1-26
279	PF		② Core base is missing in many areas @	
286	C		Observed no metal probe food thermometer (not provided) @ 200°F	12-29-25
453	C		The following door gaskets are split/worn ① Right Soft Serve machine ② 3 "True" 2 door freezers	2-1-26
453	C		Food Not Stored 6" off walk-in freezer floor.	12-30-25

Received by (name and title printed):

X Hailee Shiftlead

Received by (signature):

X [Signature]

Inspected by (name and title printed):

Cassi Hall

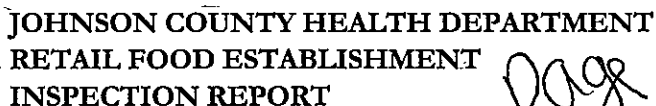
Inspected by (signature):

Cassi Hall

cc:

cc:

cc:



95 S. DRAKE ROAD
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- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" *p*
- 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):		Inspected by (name and title printed):
Received by (signature):		Inspected by (signature):
cc:	cc:	cc:

Bekm
12/14



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 7-26**, 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 Members Inc.		telephone 317-535-8635	Date of Inspection 12/3/2025
Establishment address 2080 South SR 135, Greenwood IN 46143		Summary of Violations 0P, 4PF, 5Core	
Owner Dye's Walk Members INC		Follow-up No	Release Date 12/13/2025
Person - in - Charge Calvin CHEF@DYESWALKKCC.COM kbaumann@dyeswalkkcc.com	Certified Food Handler In progress		Purpose: Routine
Menu Type 4-Extensive handling	Establishment Identification # 1628	County Johnson	District D5

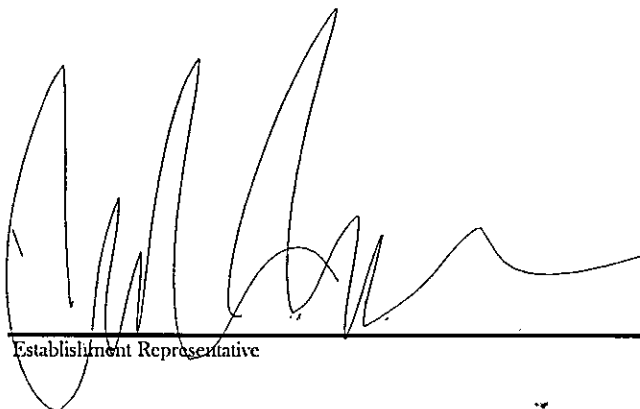
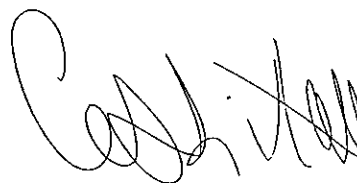
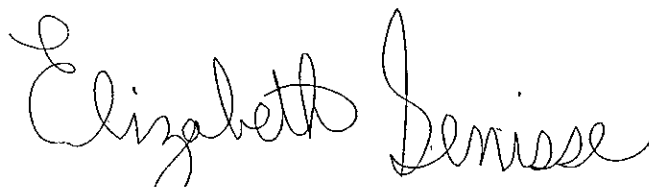
- **Critical Items are Identified in the Checklist & Narrative Columns Marked "P"**
- Violation(s) repeated from previous inspections are denoted in the "summary of violations" & in the narrative below as "R"

Sec#	P/PF	R?	Violation Observed:	To be Corrected by:
175	P		Observed cooked chorizo stored below raw shrimp located in the walk in cooler	Vol. discarded
141	P		Employee stated that they use a cotton towel hanging at the cook line hand washing station to dry their hands	Corrected at time of inspection
430	PF		1. Observed no disposable towels at the hand washing station located at the cook line 2. Observed no disposable towels at the hand washing station located at the employee restroom	Corrected at time of inspection
456	PF		Toxic spray bottle (working container) not labeled in the bar area	
212	Core		Observed many metal pans of baked potatoes stacked on top of each other cooling with plastic covers	
234	Core		Observed a clear plastic lid with mold like substance used to store self-serve ranch dressing located in the central 2 door cooler- product was dated marked "ranch 8/9"	Vol. discarded

Establishment Representative

Inspected by: Cassi Hall, EHS
 (317) 346-4371 chall@co.johnson.in.us

286	Core		<ol style="list-style-type: none"> The following cooler's door gaskets are split/worn <ul style="list-style-type: none"> Walk in cooler Salad flip top cooler Deli flip top cooler Observed lots of ice buildup inside the walk in freezer and outside the door - food products not 6" off floor 	
421	CORE		<ol style="list-style-type: none"> Kitchen exterior door located by the employee restroom is not tight fitting <ul style="list-style-type: none"> Daylight was observed Exterior door in the dining room by the kitchen is not tight fitting <ul style="list-style-type: none"> Daylight was observed 	
442	Core	x	Floor is damaged in the kitchen and dish room	
306	PF	x	<ol style="list-style-type: none"> Interior of the kitchen ice machine is soiled Interior of the downstairs ice machine is soiled 	
283	PF	x	Downstairs - PVC drain lines observed over single-use items & drinks. - - No food, food-contact items, single-use items may be stored under sewage drain lines. Bar - drink cans observed under PVC sewer lines.	

Establishment Representative

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(317) 346-4371 chall@co.johnson.in.us



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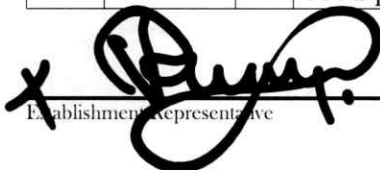
Johnson County Health Department
95 S Drake Rd., Franklin, IN 46131
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Retail Food Establishment Inspection Report

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 Edinburgh Diner LLC		telephone	Date of Inspection 12/26/2025
Establishment address 413 South Eisenhower Drive, Edinburgh IN 46124		Summary of Violations 4P, 4PF, 13Core	
Owner Valon Rahmani		Follow-up Yes	Release Date 1/5/2026
Person - in - Charge gurbja@icloud.com	Certified Food Handler Valon Rahmani (11/4/27)	Purpose: Routine	Menu Type 3-Extensive handling
Establishment Identification # 2045	County Johnson	District D5	

- 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:
341	PF		Observed the following hot water temperatures: 1. 3 compartment sink hot water observed @ 55°F - not at least 110°F 2. Designated hand washing station at the cook line hot water observed @ 58°F - not at least 85°F	12-27-25
213	P		1. Observed previously cooked hamburger patties in a large metal container stored on the stove-top @115°F - Manager stated the product was made about 1 hour ago (11:00 a.m.) 2. Observed raw tenderloin in large plastic containers stored on a cart @ 44°F	12-26-25
431	Core		Observed the food preparation employee prep the lettuce in the designated hand washing station at the cook line	12-26-25
142	P		Observed the food preparation employee do a task at the 3 compartment sink, then started to prep ready to eat onions and tomatoes without changing gloves and washing hands	12-26-25
175	P		1. Observed raw chicken stored above raw bacon located in the walk in cooler 2. Observed raw tenderloin stored above tomatoes located in the walk in cooler	12-27-25
363	Core		1. The 3 compartment sink leaks at the middle drain connection 2. Front hand sink leaks at the drain connection	12-30-25
214	PF		Observed no date marks on ready to eat TCS (time/temperature control) food products	12-26-25

x 
Establishment Representative


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(317) 346-4371 chall@johnsoncounty.in.gov

430	PF	Observed no paper towels at the designated hand washing station - Hand sign needs to be posted - "Employees must wash hands"	12-26-25
306	Core	Equipment, utensils, and sides of equipment are soiled - The exhaust hood system is heavily soiled - The can opener is soiled - Food storage containers are soiled	12-30-25
443	Core	Floors, walls, and ceilings are soiled	12-30-25
348	P	1. Observed no air gap/break at the 3 compartment sink - Used for food preparation 2. Observed no air gap at the soda station ice bin	12-30-25
285	Core	Large equipment is not easily movable	12-30-25
453	Core	Walk in cooler is not in use Artic air freezer is not in use	12-30-25
392	Core	Dumpster lid is not closed	12-30-25
436	Core	Light intensity in the walk in cooler is not adequate	12-30-25
234	Core	Observed cardboard lining shelving units and as a storage container	12-30-25
431	PF	Hand soap not provided at men's restroom hand washing station	12-26-25
286	Core	Front ice maker scoop storage container is damaged	12-27-25
285	Core	Walk in cooler bottom shelves for storage racks are not 6" off floor - Food is stored - floor not easily cleanable	12-30-25
442	Core	1. Wall around the mop sink basin is worn 2. Exhaust fan is not functioning in the restroom	12-30-25
276	Core	Stove not provided with exhaust hood system	12-30-25
		Establishment is closed due to operating with no hot water and unsanitary conditions. Establishment may not reopen without our offices approval with a follow up inspection.	
	note	Light is not shielded in the front cooler	

Cassi Hall
Behrman

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Establishment Representative

Inspected by: Cassi Hall, EHS
(317) 346-4371 chall@johnsoncountymt.in.gov



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Retail Food Establishment Inspection Report

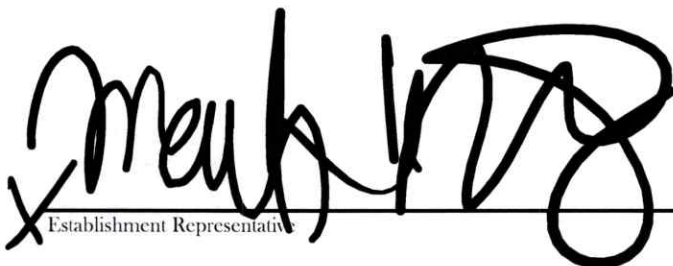
Betsy
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Based on an inspection this day, the item(s) noted below identify violation(s) of 410 IAC 7-26, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of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

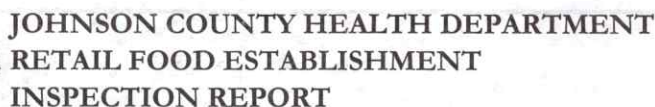
establishment El Beso	telephone 317-535-3355	Date of Inspection 12/9/2025
Establishment address 2993 Fulmer Drive, Bargersville IN 46106	Summary of Violations 0P, 1PF, 1Core	
Owner Michelle Michaelis	Follow-up Yes	Release Date 12/19/2025
Person - in - Charge Maribel Munoz Urdezired1@yahoo.com	Certified Food Handler Maribel Munoz (7/16/30)	Purpose: Routine
Establishment Identification # 2380	County Johnson	District D5
Menu Type 4-Extensive handling		

- Critical Items are Identified in the Checklist & Narrative Columns Marked "P"
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Sec#	P/PF/Core	R?	Violation Observed:	To be Corrected by:
430	PF		Observed no disposable towel at the hand washing station at the cook-line	12-9-25
226	Core		Observed rice in a plastic grocery bag @ 84°F located in the microwave - Manager stated the employees are reheating the rice - Not a food grade container or easily cleanable material/surface	Vol. discarded at time of inspection


Establishment Representative


Inspected by: **Chall FHS**
(317) 346-43731 chall@johnsoncounty.in.gov



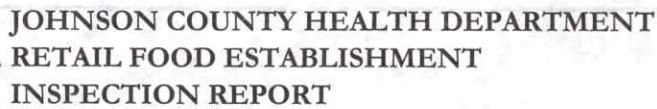
95 S. DRAKE ROAD
FRANKLIN IN 46131
Office 317-346-4365 Fax 317-736-5264

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[illegible]

Received by (name and title printed): Christopher Jones	Inspected by (name and title printed): paul betten
Received by (signature): Christopher Jones	Inspected by (signature): paul betten
cc:	cc:



Brian
12/18

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Establishment name FedEx Five star Fivestar-FedEx#2	Telephone Number () Establishment () Owner	Date of Inspection 12/11/25	ID# 2478
Establishment address 2157 Staircase way Greenwood IN 46143	Purpose: 1. <u>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: Core PF P e <u> </u> <u> </u> <u> </u> <u> </u> e <u> </u> <u> </u> <u> </u> <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			

- 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): Jonell D. Winters		Inspected by (name and title printed): Paul Betiku etts	
Received by (signature): Jonell D. Winters		Inspected by (signature): Paul Betiku	
cc:		cc:	



Johnson County Health Department
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Retail Food Establishment Inspection Report

Boksi
12/10/09

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.

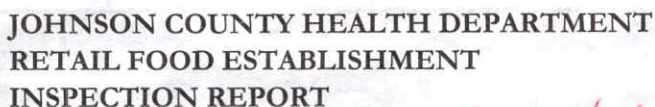
establishment	Flap Jacks	telephone	317-458-0345	Date of Inspection	12/9/2025
Establishment address	2991 Fulmer Drive, Bargersville IN 46106			Summary of Violations	0P, 1PF, 7Core
Owner	Tom Lasaru			Follow-up	Yes
Person - in - Charge	Refused to give email	Certified Food Handler		Purpose:	Menu Type
Establishment Identification #	1505	County	Johnson	Routine	4-Extensive handling
		District	D5		

- Critical Items are Identified in the Checklist & Narrative Columns Marked "P"
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Sec#	C/NC	R?	Violation Observed:	To be Corrected by:
286	Core		Observed a damaged small metal mixing bowl - A piece of the metal is missing	12-9-25
306	PF	x	Interior of ice maker is soiled	1-1-26
443	Core	x	Floors, walls, and ceiling are soiled throughout the kitchen - continue to detail clean	1-1-26
442	Core		Floor grout is missing in areas of the kitchen	2-1-26
440	Core		Observed an employee's drink (without a lid and straw) stored on-top of the flip top cooler located by the kitchen hand washing station	Corrected at time of inspection
363	Core		The handle marked hot located at the hand washing station in the server area is not functioning - water was observed at 54°F	12-16-25
440	Core	x	Personal items not stored in designated area	12-12-25
306	Core		Observed soiled utensil stored with clean dishes above the three compartment sink	12-9-25
			Notes: - Hood filters are not tight fitting - Ensure employees wash hands after changing gloves and before putting new gloves on	

Ted J. J. J.
Establishment Representative

Cassi Hall
Inspected by: Cassi Hall, EHS
(317) 346-43731 chall@JohnsonCounty.in.gov



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

Franciscan Senior Health + Wellness

Establishment name St Francis Health & Wellness Pavilion	Telephone Number () Establishment () Owner	Date of Inspection 12/30/25	ID# 2894
Establishment address 3000 South SR 135	Purpose: <input checked="" type="radio"/> 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up	Release Date 1/9/26
Owner 1040 Sierra Dr., Ste. 600		Summary of Violations:	
Owner address Greenwood 46143		C <u>0</u> NC <u>1</u> R <u> </u>	
Person in charge		Menu Type (See back of page)	
Responsible person's email Samantha Wilson		1 <u> </u> 2 <u>X</u> 3 <u> </u> 4 <u> </u> 5 <u> </u>	
Certified food handler			

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Section #	C/NC	R	Narrative	To Be Corrected by
286	C		<p>KEEP EYES ON REFRIGERATOR TEMP</p> <p>AMBIENT TEMP READ 38°</p> <p>INTERNAL THERMOMETER 21°C = 69°F</p> <p>ADVISED SAMANTHA TO GET NEW INTERNAL THERMOMETERS FOR REFRIGERATOR AND FREEZER</p>	

Received by (name and title printed):

Inspected by (name and title printed):

Received by (signature):

Inspected by (signature):

CC:

CC:

CC:

Beth
12/18



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95 S Drake Rd Franklin, IN 46131
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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 name Freddy's Frozen Custard and Steakburgers		Telephone Number 317-786-32-37		Date of Inspection 12/10/2025	
Establishment address 2306 N Morton St Franklin, IN 46131			Summary of Violations: 2P, 2Pf, 3 Core		
Owner Eric Cole Email- beth.stinson@mmcustard.com			Follow-up Yes		Release Date 12/20/2025
Person in charge Shelby Ham- AM		Certified food handler Shelby Ham		Purpose Routine	
Establishment Identification # 2393		County Johnson	District D5	Menu Type 3-Extensive handling	

- Core Items are Identified in the Checklist & Narrative Columns Marked "C", Priority as "P", and Priority foundation as "Pf"
- Violation(s) repeated from previous inspections are denoted in the "summary of violations" & in the narrative below as "R"

Sec#	C/P/Pf	R	Narrative	To Be Corrected by:
214	Pf		- Sliced brisket stored in walk-in cooler past discard date of 11/26/25 - Prepared onion stored in walk-in cooler past discard date of 12/1/25	12/10
443	Core		Floor next to walls soiled throughout kitchen	12/17
213	P		Sliced American cheese by grill at 46°F	12/10
242	Core		Can opener soiled	12/12
176	Core		Bulk ingredient not labeled	12/10
316	P		Kitchen sanitizer bucket concentration inadequate	12/10
306	Pf		- Front of house soda nozzles soiled - Drive-thru soda nozzles soiled	12/10
			Notes: - Women's restroom lacking hand soap - Unnecessary broken equipment: dish machine, grill, and prep cooler - One flying insect observed - Metal blade of spatulas chipped	

Received by

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



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INSPECTION REPORT

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Beth
12/19

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-2, 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 Garment Factory Events	Telephone Number () Establishment () Owner	Date of Inspection 12/18/25	ID# 2156
Establishment address 101 E MARINE ST. FRANKLIN, IN	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up —	Release Date 12/28/25
Owner IRVIN SANCHEZ		Summary of Violations: 1P / 1PF / 6 CORE	
Owner address		Menu Type (See back of page) 1 — 2 — 3 X — 5 —	
Person in charge IRVIN SANCHEZ			
Responsible person's email			
Certified food handler ROBERTO CABALLAS (SERVSAFE)			

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "P"
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Section #	CORE R	Narrative	To Be Corrected by
412 (CORE)		FLOOR, WALL, CEILING CONSTRUCTION NOT COMPLETE IN WEST SIDE ROOM	1/25/26
189	CORE X	BAGGED ONIONS, BAGS OF ALL PURPOSE FLOUR NOT STORED OFF FLOOR MINIMUM OF 6 INCHES IN WEST SIDE ROOM	12/20
286	CORE	KITCHEN - (1) UPRIGHT FREEZER DOOR GASKET WORN / SPLIT	1/5/26
400	(CORE) X	OUTSIDE DUMPSTER - LID NOT CLOSED, SOME TRASH ON GROUND	12/20
436	(CORE) X	KITCHEN - ONE LIGHT OUT ON EXHAUST HOOD	12/20
437	(CORE) X	RESTROOM - MENS RESTROOM MECHANICAL EXHAUST NOT FUNCTIONING	12/28
348	(P) X	UPSTAIRS BAR - AIR GAP NOT SEEN ON JCO BTN DRAIN	1/5/26
210	(PF) X	FROZEN PACKAGES OF MEAT BEING THAWED ON COUNTER AT ROOM TEMPERATURE (67°F)	corrected 12/18/25

Received by (name and title printed): * Irvin Sanchez	Inspected by (name and title printed): Bob Smith EHS
Received by (signature): <i>Irvin Sanchez</i>	Inspected by (signature): <i>Bob Smith</i>
cc:	cc:



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7-26 Am

Beky
12/18

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 Golden Corral Restaurant	Telephone Number () Establishment () Owner	Date of Inspection 12/5/25	ID# 2575
Establishment address 160 S. Marlin Dr. Greenwood IN 46142	Purpose: <u>1. Routine</u> 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up Yes	Release Date 12/15/25
Owner Michael Cantey		Summary of Violations: p pf Core e 1 ne 0 x 13	
Owner address		Menu Type (See back of page) 1 2 3 4 ✓ 5	
Person in charge			
Responsible person's email rest2412@goldencorral.net			
Certified food handler			

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

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

Section #	C/X/C	R	Narrative	To Be Corrected by
363	Core		<u>1</u> Mechanical dish machine atmospheric vacuum breaker (AVB) leaks <u>2</u> Several faucets leak from center connection <u>3</u> Dirty side of mechanical dish washer jet spray piping leaks <u>4</u> Clean side of mechanical dish washer round drain leaks from underneath piping	12/15/25
421	Core	✓	East and West entry/exit doors are not tight-fitting at the center bottom.	12/25/25
298	Core	✓	Pressure gauge on kitchen dish machine was above 25 (read ~28) psi.	12/15/25
436	Core	✓	Lighting inside walk-in freezer appears inadequate	12/25/25
286	Core	✓	<u>1</u> Taco Bar top counter was cracked/damaged. <u>2</u> Pizza Preparation table bottom interior was "heavily" iced over	4/25/26
213	P		The following internal product temperatures	Corrected

Received by (name and title printed):

Roger Thomas

Received by (signature):

[Signature]

Inspected by (name and title printed):

Andrew Miller, EHS

Inspected by (signature):

[Signature]

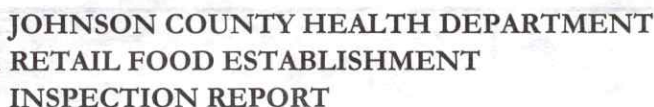
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NARRATIVE REPORT

Establishment Name			Address	Inspection Date
Section#	C/NC	R	REMARKS	TO BE CORRECTED BY
Golden Corral			160 S. Marlmi Dr. ^{Greenwood} IN	12/5/25
			were measured inside the Pizza Preparation Table	Moved food to another cooler
			① Cheese 46°F	↓
			② Pepperoni 47°F	↓
286	Core		Walk-in-cooler shelving (some) are rusty.	12-25-25
442	Core		Grout repair needed in cook area and dish area.	12-25-25
				↓
286	Core		Tub for chicken breading is cracked	12-10-25
442	Core		Kitchen mechanical exhaust system was in use without all filters in-place (one was missing) and the firm was cooking.	12-6-25
				↓
286	Core		Jet spray hose at dish area three bay sink is worn/damaged.	12-25-25
				↓
286	Core		Entree one door cooler contains interior damaged/cracked shelving and the interior door is damaged with exposed insulation (yellow).	1-25-26
				↓
442	Core		Interior floor of the walk-in-freezer is buckled and is worn	4-5-26
				↓
443	Core	①	Floor is soiled near floor mixer in Bakery area.	12-15-25
		②	Raised curb is soiled in Taco Bar area.	↓
NOTE:			Written and approved SOP for time used as a public health control is needed onsite and a copy sent to our office per new food code 410 TAC 7-26, for approval.	
Received By (Name & Title)			Inspected By (Name & Title)	Page 2 of 2
			Andrew Miller, EHS	



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 Great Wall Chinese Restaurant		Telephone Number () Establishment () Owner		Date of Inspection 12-10-25	ID# 2021
Establishment address 1840 Northwood Plaza Franklin		Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)		Follow-up —	Release Date 12-10-25
Owner Li Yang				Summary of Violations:	
Owner address				Core 1 PF 1 P 1 NC R	
Person in charge Li Yang				Menu Type (See back of page)	
Responsible person's email				1 2 3 X 4 5	
Certified food handler Li Yang					
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C", PF - priority foundation, core • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R" P-priority					
Section #	C/N/C	R	Narrative	To Be Corrected by	
272	Core		residential fridge & freezer unit (silver) observed in kitchen	when broken replace w/ commercial	
175	P		raw beef & chicken stored above ready-to-eat food (cream cheese)	12-10-25	
214	PF		ready-to-eat food in walk-in all refrigeration units lacking date marking	12-10-25	
			Note: bulk ingredients not secured during storage		
Received by (name and title printed): Lin			Inspected by (name and title printed): Mia Papageorge		
Received by (signature): 			Inspected by (signature): 		
cc:		cc:		cc:	