



JOHNSON COUNTY HEALTH DEPARTMENT
RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT

95 S. DRAKE ROAD
FRANKLIN IN 46131

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

betsey
115

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 () Owner	Date of Inspection 7-26 11-29-25	ID# 192
Establishment address 601 W. Main St. Greenwood, IN 46142	Purpose: 1. Routine	Follow-up 1-9-16-7	Release Date
Owner address	3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Summary of Violations: 1 NC 8 R	
Person in charge		Menu Type (See back of page) 1 P 2 PF 3 X 4 5	
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/NC	R	Narrative	To Be Corrected by
• 353	Core		mop sink is not functioning 6 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	Machine lacks an air gap. Observed no disposable towels @ kitchen hand sink	Corrected
• 443	Core	①	Floors, walls, and ceilings are Soiled Under equipment	1-30-26
• 442	Core	①	Observed many broken floor tiles.	6-1-26
• 279	PF	②	Car base is missing in many areas on thermometer (not provided) 0-200°F	12-29-25
• 286	Core	①	The following door gaskets are split/worn Right Soft Serve machine	2-1-26
• 453	Core	②	3 "true" 2 door freezers	
			Food not stored 6" off walk-in freezer floor.	12-30-25

Received by (name and title printed):

X Haylee Shifthead

Received by (signature):

+MB

cc:

cc:

Inspected by (name and title printed):

Cassi Hall

Inspected by (signature):

Cass Hall

cc:

Page 1 of

Chall@JohnsonCounty.in.gov
317-346-4371



JOHNSON COUNTY HEALTH DEPARTMENT
RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT *DAG*

ARTICLE
Page 2

**95 S. DRAKE ROAD
FRANKLIN IN 46131**

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 (<input type="checkbox"/>) Establishment (<input type="checkbox"/>) Owner	Date of Inspection 12-29-25	ID# 192
Establishment address 601 W Main St.	Purpose: <ul style="list-style-type: none">1. Routine2. Follow-up3. Complaint4. Pre-Operational5. Temporary6. HACCP7. Other (list)	Follow-up	Release Date
Owner	Summary of Violations:		
Owner address			
Person in charge	C _____ NC _____ R _____		
Responsible person's email			
Certified food handler	Menu Type (See back of page) 1 _____ 2 _____ 3 _____ 4 _____ 5 _____		

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

Received by (*name and title printed*):

Inspected by (name and title printed):

Received by (signature):

Inspected by (signature):

CC:

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

Bekah
12/14

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
Dye's Walk <i>Members Inc.</i>	317-535-8635	12/3/2025
Establishment address 2080 South SR 135, Greenwood IN 46143		Summary of Violations
Owner Dye's Walk Members INC		0P, 4PF, 5Core
Person - in - Charge Calvin CHEF@DYESWALKCC.COM kbaumann@dyeswalkcc.com	Certified Food Handler In progress	Follow-up No Release Date 12/13/2025
Establishment Identification # 1628	County Johnson	District D.5

- 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) 346-43771 chall@co.johnson.in.us

286	Core		<ol style="list-style-type: none"> 1. 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 2. 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"> 1. Kitchen exterior door located by the employee restroom is not tight fitting <ul style="list-style-type: none"> - Daylight was observed 2. 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"> 1. Interior of the kitchen ice machine is soiled 2. Interior of the downstairs ice machine is soiled 	
283	PF	x	<p>Downstairs - PVC drain lines observed over single-use items & drinks. -</p> <p>- No food, food-contact items, single-use items may be stored under sewage drain lines.</p> <p>Bar - drink cans observed under PVC sewer lines.</p>	




Establishment Representative

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 (317) 346-43771 chall@co.johnson.in.us



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

Beth
1/5

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
Edinburgh Diner <i>LLC</i>		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
Establishment Identification # 2045	County Johnson	Menu Type 3-Extensive handling
District D5		

- 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:
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

Establishment Representative

Inspected by: Cassi Hall, ELS
(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
B. Johnson

Reynolds

Establishment Representative

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



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

Belford
12/10

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

- 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: Carl J. Hall, EDS
(317) 346-43731 chall@JohnsonCounty.in.gov



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INSPECTION REPORT**

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

Beky
12/14

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 FedEx FiveStar FiveStar-FedEx #1	Telephone Number () Establishment () Owner	Date of Inspection	ID#
Establishment address 650 Commerce Parkway Greenwood IN 46143	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) _____	Follow-up ✓	Release Date 12/11/25
Owner _____	Summary of Violations: Core <input checked="" type="checkbox"/> H <input checked="" type="checkbox"/> P E <input type="checkbox"/> NC <input type="checkbox"/> R		
Owner address _____			
Person in charge _____			
Responsible person's email _____			
Certified food handler _____	Menu Type (See back of page) 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>		

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
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Received by (name and title printed): <i>Christopher Jones</i>	Inspected by (name and title printed): <i>Paul Bettencourt</i>
Received by (signature): <i>Christopher Jones</i>	Inspected by (signature): <i>Paul Bettencourt</i>
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

Bixby
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 FedEx Five star Fivestar-FedEx#2	Telephone Number () Establishment () Owner	Date of Inspection 12/11/25	ID# 2478
Establishment address 2157 staerles way Greenwood IN 46143	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
Owner	Summary of Violations: <i>wre</i> <i>PF</i> <i>P</i> <i>e</i> <input checked="" type="radio"/> <i>NC</i> <input checked="" type="radio"/> <i>R</i>		
Owner address			
Person in charge			
Responsible person's email			
Certified food handler			
Menu Type (See back of page) 1 <input checked="" type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>			

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
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Received by (name and title printed):

Jonell D. Winters

Inspected by (name and title printed):

Paul Betts

Received by (signature):

ved by (Signature):  cc:

Inspected by (signature):

pected by (Signature):
C: Paul Betrone

CC

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

Bokal
12/09

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	Flap Jacks	telephone	Date of Inspection
		317-458-0345	12/9/2025
Establishment address	2991 Fulmer Drive, Bargersville IN 46106		Summary of Violations
Owner	Tom Lasaru		0P, 1PF, 7Core
Person - in - Charge Refused to give email	Certified Food Handler	Follow-up Yes	Release Date 12/19/2025
Establishment Identification # 1505	County Johnson	District D5	Purpose: Routine
			Menu Type 4-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#	C/NC	R2	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	

Establishment Representative

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



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RETAIL FOOD ESTABLISHMENT
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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.

Establishment name <u>St Francis Health & Wellness Pavilion</u>	Telephone Number () Establishment () Owner	Date of Inspection <u>12/30/25</u>	ID# <u>2894</u>
Establishment address <u>3000 South St 135</u>	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 <u>1/9/26</u>
Owner <u>1040 Sierra Dr., Ste. 600</u>	Summary of Violations:		
Owner address <u>Greenwood 46143</u>	C <u>0</u> NC <u>1</u> R _____		
Person in charge			
Responsible person's email <u>SAMANTHA WILSON</u>	Menu Type (See back of page)		
Certified food handler	1 <u>2</u> 3 <u>4</u> 5 <u>5</u>		

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Received by (name and title printed):

Received by (name and title printed):
 Samantha Wilson

Inspected by (name and title printed):

inspected by (name and title printed):
Ken R. Fawcett 548

B. 1. 11. (signature)

Received by (signature)

CC:

Inspected by *signature*

inspected by (signature):


CC:

CC

cc

Beth
12/18



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 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

- 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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RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT

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FRANKLIN IN 46131

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

BETHY
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. NATURE 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	Summary of Violations: 1P 1PF 6 Core		
Owner address			
Person in charge IRVIN SANCHEZ			
Responsible person's email	Menu Type (See back of page) 1 2 3 X 5		
Certified food handler ROBERTO CABALLAS (SERVSAFE)			

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

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Section #	R	Narrative	To Be Corrected by
474 core		FLOOR, WALL, CEILING CONSTRUCTION NOT COMPLETE IN WEST SIDE ROOM	1/25/26
189 core		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 SHAKES WORN / SPLIT	1/15/26
400 core		OUTSIDE DUMPSTER - LID NOT CLOSE, SOME TRASH ON GROUND	12/20
436 core	—	KITCHEN - ONE LIGHT OUT ON EXHAUST HOOD	12/20
437 core		RESTROOM - MENS RESTROOM MECHANICALS EXHAUST NOT FUNCTIONING	12/28
348 P	—	UPSTAIRS BAR - AIR GAP NOT SEEN ON ICE BIN DRAIN	1/15/26
210 off	—	FROZEN PACKAGES OF MEAT BEING THAWED ON COUNTER AT ROOM TEMPERATURE (67°F)	12/18/25

Received by (name and title printed):

Irvin Sanchez

Inspected by (name and title printed):

Bob Smith EHS

Received by (signature):

Irvin Sanchez

Inspected by (signature):

Bob Smith

cc:

cc:

cc:



JOHNSON COUNTY HEALTH DEPARTMENT
RETAIL FOOD ESTABLISHMENT
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7-26 AM

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

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

P/Pf/Core

• 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
363	Core	✓	① Mechanical dish machine atmospheric vacuum breaker (AVB) leaks	12/15/25
		✓	② Several faucets leak from center connection	
		✓	③ Dirty side of mechanical dish washer jet spray piping leaks	
		✓	④ Clean side of mechanical dish washer round drain leaks from underneath piping	
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	✓	① Taco Bar top counter was cracked/damaged. ② 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):

DR

cc:

cc:

Inspected by (name and title printed):

Andrew Miller, EHS

Inspected by (signature):

Andrew Miller

cc:

NARRATIVE REPORT

Establishment Name Golden Corral			Address 160 S. Martin Dr. IN	Greenwood	Inspection Date 12/5/25
Section#	C/NC	R	REMARKS		TO BE CORRECTED BY
			were measured inside the Pizza Preparation Table ① Cheese 46°F ② Pepperoni 47°F		Moved food to another cooler ↓
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
412	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 SMK 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 ② Raised curb is soiled in Taco Bar area.		12-15-25 ↓
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) Andrew Miller, EHS		Page <u>2</u> of <u>2</u>



**JOHNSON COUNTY HEALTH DEPARTMENT
RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT**

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

Bekal
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 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					
Person in charge Li Yang					
Responsible person's email					
Certified food handler Li Yang		Menu Type (See back of page) 1 <u>2</u> <u>3</u> <u>4</u> <u>5</u>			
<p>• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C", PF - priority foundation, NC - non-compliant</p> <p>• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R" P - priority</p>					
Section #	C/NC	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 refrigeration units lacking date marking		12-10-25
<p>Note: bulk ingredients not secured during storage</p>					

Received by (name and title printed):

Lia

Inspected by (name and title printed):

Mia Papageorge
Inspected by (signature):

Received by (signature):

On

Inspected by *(signature)*:

inspected by (signature): W. H. Mizell

CC:

cc:

CCS