



## RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

State Form 48669 (R2/2-05)  
SDH Form 51-0001

Clinton County Health Department  
1234 Rossville Ave., Ste. B  
Frankfort, IN 46041

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 <i>SIPS LLC d/b/a Briggby Coffee Stone #657</i>	Telephone Number (614) 318-4274	Date of Inspection (mm/dd/yr) <i>Jan 30, 2025</i>	ID #
Establishment Address (number and street, city, State, ZIP code) <i>24474 E. WABASH ST. FRANKFORT, IN</i>			
Owner <i>Chris Salazar/o</i>	Purpose: 1. Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list) <i></i>	Follow-up <i>N/A</i>	Release Date <i>10 days</i>
Owner's Address <i>3281 N. 1080W Tipton, IN 46072</i>	Summary of Violations: <i>C ✓ NC ✓ R ✓</i>		
Person in Charge <i>Chris Salazar/o</i>	Menu Type (See back of page) <i>1 2 ✓ 3 4 5</i>		
Responsible Person's E-mail <i>store657@briggby.com</i>			
Certified Food Handler <i>✓</i> <i>Chris Salazar/o</i>			

- 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"

Received by (name and title printed): <i>Chris Salzarulo</i>	Inspected by (name and title printed): <i>RODNEY P. WAWN, ADMINISTRATOR</i>	
Received by (signature): <i>Chris Salzarulo</i>	Inspected by (signature): <i>Rodney P. Wawn</i>	
CC:	CC:	CC: