

|                                                                                                                                                                                                         |  |                                                   |  |                       |  |            |  |               |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|--|-----------------------|--|------------|--|---------------|--|
| <b>RETAIL FOOD ESTABLISHMENT<br/>INSPECTION REPORT</b><br><br><b>Clinton County Health Dept.</b><br><b>1234 Rossville Ave.</b><br><b>Frankfort, IN 46041</b><br>Phone: (765)659-6385 Fax: (765)656-2014 |  | Release Date                                      |  | 6/24/2026             |  | Date       |  | 6/14/26       |  |
|                                                                                                                                                                                                         |  | No. of Risk Factor/Intervention Violations        |  | 0                     |  | Time In    |  | 1:10 PM       |  |
|                                                                                                                                                                                                         |  | No. of Repeat Risk Factor/Intervention Violations |  | 0                     |  | Time Out   |  |               |  |
|                                                                                                                                                                                                         |  | Establishment                                     |  | Address               |  | City/State |  | Zip Code      |  |
| Dollar General Store #21041                                                                                                                                                                             |  | 611 N. Main St                                    |  | Kirklin, IN           |  | 46050      |  | 765-204-3455  |  |
| License/Permit #                                                                                                                                                                                        |  | Permit Holder                                     |  | Purpose of Inspection |  | Est. Type  |  | Risk Category |  |
|                                                                                                                                                                                                         |  | DolgenCorp, LLC                                   |  | Routine               |  | RFE        |  | 1             |  |

  

| FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS                                                                                                        |    |     |     |     |                                                                                                                                                                                                                                   |    |     |     |     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|-----|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|-----|-----|
| Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item<br>IN=in compliance    OUT=not in compliance    N/O=not observed    N/A=not applicable |    |     |     |     |                                                                                                                                                                                                                                   |    |     |     |     |
| Mark "X" in appropriate box for COS and/or R<br>COS=corrected on-site during inspection    R=repeat violation                                                         |    |     |     |     |                                                                                                                                                                                                                                   |    |     |     |     |
| Compliance Status                                                                                                                                                     |    |     |     |     | Compliance Status                                                                                                                                                                                                                 |    |     |     |     |
|                                                                                                                                                                       |    |     |     |     |                                                                                                                                                                                                                                   |    |     |     |     |
| <b>Supervision</b>                                                                                                                                                    |    |     |     |     | <b>Time/Temperature Control for Safety</b>                                                                                                                                                                                        |    |     |     |     |
| 1                                                                                                                                                                     | IN | OUT | N/A | N/O | 17                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| Person in charge present, demonstrates knowledge, and performs duties                                                                                                 |    |     |     |     | Proper disposition of returned, previously served, conditioned & unsafe food                                                                                                                                                      |    |     |     |     |
| 2                                                                                                                                                                     | IN | OUT | N/A | N/O | 18                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| Certified Food Protection Manager                                                                                                                                     |    |     |     |     | Proper cooking time & temperatures                                                                                                                                                                                                |    |     |     |     |
| <b>Employee Health</b>                                                                                                                                                |    |     |     |     | <b>Proper reheating procedures for hot holding</b>                                                                                                                                                                                |    |     |     |     |
| 3                                                                                                                                                                     | IN | OUT | N/A | N/O | 19                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| Management, food employee and conditional employee; knowledge, responsibilities and reporting                                                                         |    |     |     |     | Proper cooling time and temperature                                                                                                                                                                                               |    |     |     |     |
| 4                                                                                                                                                                     | IN | OUT | N/A | N/O | 20                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| Proper use of restriction and exclusion                                                                                                                               |    |     |     |     | Proper hot holding temperatures                                                                                                                                                                                                   |    |     |     |     |
| 5                                                                                                                                                                     | IN | OUT | N/A | N/O | 21                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| Procedures for responding to vomiting and diarrheal events                                                                                                            |    |     |     |     | Proper cold holding temperatures                                                                                                                                                                                                  |    |     |     |     |
| <b>Good Hygienic Practices</b>                                                                                                                                        |    |     |     |     | <b>Proper date marking and disposition</b>                                                                                                                                                                                        |    |     |     |     |
| 6                                                                                                                                                                     | IN | OUT | N/A | N/O | 22                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| Proper eating, tasting, drinking, or tobacco products use                                                                                                             |    |     |     |     | Time as a Public Health Control; procedures & records                                                                                                                                                                             |    |     |     |     |
| 7                                                                                                                                                                     | IN | OUT | N/A | N/O | 23                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| No discharge from eyes, nose, and mouth                                                                                                                               |    |     |     |     | <b>Consumer Advisory</b>                                                                                                                                                                                                          |    |     |     |     |
| <b>Preventing Contamination by Hands</b>                                                                                                                              |    |     |     |     | <b>Highly Susceptible Populations</b>                                                                                                                                                                                             |    |     |     |     |
| 8                                                                                                                                                                     | IN | OUT | N/A | N/O | 24                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| Hands clean & properly washed                                                                                                                                         |    |     |     |     | Consumer advisory provided for raw/undercooked food                                                                                                                                                                               |    |     |     |     |
| 9                                                                                                                                                                     | IN | OUT | N/A | N/O | 25                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed                                                                           |    |     |     |     | <b>Food/Color Additives and Toxic Substances</b>                                                                                                                                                                                  |    |     |     |     |
| 10                                                                                                                                                                    | IN | OUT | N/A | N/O | 26                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| Adequate handwashing sinks properly supplied and accessible                                                                                                           |    |     |     |     | Pasteurized foods used; prohibited foods not offered                                                                                                                                                                              |    |     |     |     |
| <b>Approved Source</b>                                                                                                                                                |    |     |     |     | <b>Conformance with Approved Procedures</b>                                                                                                                                                                                       |    |     |     |     |
| 11                                                                                                                                                                    | IN | OUT | N/A | N/O | 27                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| Food obtained from approved source                                                                                                                                    |    |     |     |     | Food additives: approved & properly used                                                                                                                                                                                          |    |     |     |     |
| 12                                                                                                                                                                    | IN | OUT | N/A | N/O | 28                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| Food received at proper temperature                                                                                                                                   |    |     |     |     | Toxic substances properly identified, stored, & used                                                                                                                                                                              |    |     |     |     |
| 13                                                                                                                                                                    | IN | OUT | N/A | N/O | 29                                                                                                                                                                                                                                | IN | OUT | N/A | N/O |
| Food in good condition, safe, & unadulterated                                                                                                                         |    |     |     |     | Compliance with variance/specialized process/HACCP                                                                                                                                                                                |    |     |     |     |
| 14                                                                                                                                                                    | IN | OUT | N/A | N/O | Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury. |    |     |     |     |
| Required records available: molluscan shellfish identification, parasite destruction                                                                                  |    |     |     |     |                                                                                                                                                                                                                                   |    |     |     |     |
| <b>Protection from Contamination</b>                                                                                                                                  |    |     |     |     |                                                                                                                                                                                                                                   |    |     |     |     |
| 15                                                                                                                                                                    | IN | OUT | N/A | N/O |                                                                                                                                                                                                                                   |    |     |     |     |
| Food separated and protected                                                                                                                                          |    |     |     |     |                                                                                                                                                                                                                                   |    |     |     |     |
| 16                                                                                                                                                                    | IN | OUT | N/A | N/O |                                                                                                                                                                                                                                   |    |     |     |     |
| Food-contact surfaces; cleaned & sanitized                                                                                                                            |    |     |     |     |                                                                                                                                                                                                                                   |    |     |     |     |

  

| GOOD RETAIL PRACTICES                                                                                                                                                  |  |  |  |  |                                                                                    |  |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|------------------------------------------------------------------------------------|--|--|--|--|
| Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.                                      |  |  |  |  |                                                                                    |  |  |  |  |
| Mark "X" in box if numbered item is not in compliance    Mark "X" in appropriate box for COS and/or R    COS=corrected on-site during inspection    R=repeat violation |  |  |  |  |                                                                                    |  |  |  |  |
| Compliance Status                                                                                                                                                      |  |  |  |  | Compliance Status                                                                  |  |  |  |  |
|                                                                                                                                                                        |  |  |  |  |                                                                                    |  |  |  |  |
| <b>Safe Food and Water</b>                                                                                                                                             |  |  |  |  | <b>Proper Use of Utensils</b>                                                      |  |  |  |  |
| 30                                                                                                                                                                     |  |  |  |  | 43                                                                                 |  |  |  |  |
| Pasteurized eggs used where required                                                                                                                                   |  |  |  |  | In-use utensils: properly stored                                                   |  |  |  |  |
| 31                                                                                                                                                                     |  |  |  |  | 44                                                                                 |  |  |  |  |
| Water & ice from approved source                                                                                                                                       |  |  |  |  | Utensils, equipment & linens: properly stored, dried, & handled                    |  |  |  |  |
| 32                                                                                                                                                                     |  |  |  |  | 45                                                                                 |  |  |  |  |
| Variance obtained for specialized processing methods                                                                                                                   |  |  |  |  | Single-use/single-service articles: properly stored & used                         |  |  |  |  |
| <b>Food Temperature Control</b>                                                                                                                                        |  |  |  |  | <b>Utensils, Equipment and Vending</b>                                             |  |  |  |  |
| 33                                                                                                                                                                     |  |  |  |  | 46                                                                                 |  |  |  |  |
| Proper cooling methods used; adequate equipment for temperature control                                                                                                |  |  |  |  | Gloves used properly                                                               |  |  |  |  |
| 34                                                                                                                                                                     |  |  |  |  | 47                                                                                 |  |  |  |  |
| Plant food properly cooked for hot holding                                                                                                                             |  |  |  |  | Food & non-food contact surfaces cleanable, properly designed, constructed, & used |  |  |  |  |
| 35                                                                                                                                                                     |  |  |  |  | 48                                                                                 |  |  |  |  |
| Approved thawing methods used                                                                                                                                          |  |  |  |  | Warewashing facilities: installed, maintained, & used; test strips                 |  |  |  |  |
| 36                                                                                                                                                                     |  |  |  |  | 49                                                                                 |  |  |  |  |
| Thermometers provided & accurate                                                                                                                                       |  |  |  |  | Non-food contact surfaces clean                                                    |  |  |  |  |
| <b>Food Identification</b>                                                                                                                                             |  |  |  |  | <b>Physical Facilities</b>                                                         |  |  |  |  |
| 37                                                                                                                                                                     |  |  |  |  | 50                                                                                 |  |  |  |  |
| Food properly labeled; original container                                                                                                                              |  |  |  |  | Hot & cold water available; adequate pressure                                      |  |  |  |  |
| <b>Prevention of Food Contamination</b>                                                                                                                                |  |  |  |  | <b>Physical Facilities</b>                                                         |  |  |  |  |
| 38                                                                                                                                                                     |  |  |  |  | 51                                                                                 |  |  |  |  |
| Insects, rodents, & animals not present                                                                                                                                |  |  |  |  | Plumbing installed; proper backflow devices                                        |  |  |  |  |
| 39                                                                                                                                                                     |  |  |  |  | 52                                                                                 |  |  |  |  |
| Contamination prevented during food preparation, storage & display                                                                                                     |  |  |  |  | Sewage & wastewater properly disposed                                              |  |  |  |  |
| 40                                                                                                                                                                     |  |  |  |  | 53                                                                                 |  |  |  |  |
| Personal cleanliness                                                                                                                                                   |  |  |  |  | Toilet facilities: properly constructed, supplied, & cleaned                       |  |  |  |  |
| 41                                                                                                                                                                     |  |  |  |  | 54                                                                                 |  |  |  |  |
| Wiping cloths: properly used & stored                                                                                                                                  |  |  |  |  | Garbage & refuse properly disposed; facilities maintained                          |  |  |  |  |
| 42                                                                                                                                                                     |  |  |  |  | 55                                                                                 |  |  |  |  |
| Washing fruits & vegetables                                                                                                                                            |  |  |  |  | Physical facilities installed, maintained, & clean                                 |  |  |  |  |
|                                                                                                                                                                        |  |  |  |  | 56 Adequate ventilation & lighting; designated areas used                          |  |  |  |  |

  

|                              |  |                                                     |  |
|------------------------------|--|-----------------------------------------------------|--|
| Person In Charge (Signature) |  | Date: 6/16/26                                       |  |
| Inspector (Signature)        |  | Follow-up: YES (NO) (Circle one)    Follow-up Date: |  |

[illegible]

[illegible]