

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT Clinton County Health Dept. 1234 Rossville Ave. Frankfort, IN 46041 Phone: (765)659-6385 Fax: (765)656-2014		Release Date		9/12/2026		Date		9/12/26	
		No. of Risk Factor/Intervention Violations		Ø		Time In		11:30 AM	
		No. of Repeat Risk Factor/Intervention Violations		Ø		Time Out			
Establishment		Address		City/State		Zip Code		Telephone	
Domino's Pizza		304 W Walnut St		Frankfort, IN		46041		765-659-3300	
License/Permit #		Permit Holder		Purpose of Inspection		Est. Type		Risk Category	
		Jeff Stegen		Routine		RFE		2	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS									
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item 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 COS=corrected on-site during inspection R=repeat violation									
Compliance Status				COS		R			
Supervision									
1	IN	OUT	N/A	N/O	Person in charge present, demonstrates knowledge, and performs duties				
2	IN	OUT	N/A	N/O	Certified Food Protection Manager				
Employee Health									
3	IN	OUT	N/A	N/O	Management, food employee and conditional employee; knowledge, responsibilities and reporting				
4	IN	OUT	N/A	N/O	Proper use of restriction and exclusion				
5	IN	OUT	N/A	N/O	Procedures for responding to vomiting and diarrheal events				
Good Hygienic Practices									
6	IN	OUT	N/A	N/O	Proper eating, tasting, drinking, or tobacco products use				
7	IN	OUT	N/A	N/O	No discharge from eyes, nose, and mouth				
Preventing Contamination by Hands									
8	IN	OUT	N/A	N/O	Hands clean & properly washed				
9	IN	OUT	N/A	N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed				
10	IN	OUT	N/A	N/O	Adequate handwashing sinks properly supplied and accessible				
Approved Source									
11	IN	OUT	N/A	N/O	Food obtained from approved source				
12	IN	OUT	N/A	N/O	Food received at proper temperature				
13	IN	OUT	N/A	N/O	Food in good condition, safe, & unadulterated				
14	IN	OUT	N/A	N/O	Required records available: molluscan shellfish identification, parasite destruction				
Protection from Contamination									
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				COS		R			
Safe Food and Water									
30				Pasteurized eggs used where required					
31				Water & ice from approved source					
32				Variance obtained for specialized processing methods					
Food Temperature Control									
33				Proper cooling methods used; adequate equipment for temperature control					
34				Plant food properly cooked for hot holding					
35				Approved thawing methods used					
36				Thermometers provided & accurate					
Food Identification									
37				Food properly labeled; original container					
Prevention of Food Contamination									
38				Insects, rodents, & animals not present					
39				Contamination prevented during food preparation, storage & display					
40				Personal cleanliness					
41				Wiping cloths: properly used & stored					
42				Washing fruits & vegetables					

Compliance Status									
Proper Use of Utensils									
43				In-use utensils: properly stored					
44				Utensils, equipment & linens: properly stored, dried, & handled					
45				Single-use/single-service articles: properly stored & used					
46				Gloves used properly					
Utensils, Equipment and Vending									
47				Food & non-food contact surfaces cleanable, properly designed, constructed, & used					
48				Warewashing facilities: installed, maintained, & used; test strips					
49				Non-food contact surfaces clean					
Physical Facilities									
50				Hot & cold water available; adequate pressure					
51				Plumbing installed; proper backflow devices					
52				Sewage & wastewater properly disposed					
53				Toilet facilities: properly constructed, supplied, & cleaned					
54				Garbage & refuse properly disposed; facilities maintained					
55	X			Physical facilities installed, maintained, & clean					
56				Adequate ventilation & lighting; designated areas used					

Person In Charge (Signature) <i>[Signature]</i>		Date:	
Inspector (Signature) <i>[Signature]</i>		Follow-up: YES NO (Circle one) Follow-up Date:	

[illegible]