

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 5/22/2026	Date 5/12/26
		No. of Risk Factor/Intervention Violations 0	Time In 3:20 pm
		No. of Repeat Risk Factor/Intervention Violations 0	Time Out 3:53 pm
Establishment NHK Seating Plant #3	Address 2298 W SR 28	City/State Frankfort, IN	Zip Code 46041
License/Permit #	Permit Holder Continental Canteen	Purpose of Inspection Routine	Est. Type Micro Mkt
		Risk Category 1	

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	Description
Supervision			
1	IN		Person in charge present, demonstrates knowledge, and performs duties
2	IN		Certified Food Protection Manager
Employee Health			
3	IN		Management, food employee and conditional employee; knowledge, responsibilities and reporting
4	IN		Proper use of restriction and exclusion
5	IN		Procedures for responding to vomiting and diarrheal events
Good Hygienic Practices			
6	IN		Proper eating, tasting, drinking, or tobacco products use
7	IN		No discharge from eyes, nose, and mouth
Preventing Contamination by Hands			
8	IN		Hands clean & properly washed
9	IN		No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed
10	IN		Adequate handwashing sinks properly supplied and accessible
Approved Source			
11	IN		Food obtained from approved source
12	IN		Food received at proper temperature
13	IN		Food in good condition, safe, & unadulterated
14	IN		Required records available: molluscan shellfish identification, parasite destruction
Protection from Contamination			
15	IN		Food separated and protected
16	IN		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	Description
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
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			Physical facilities installed, maintained, & clean
56			Adequate ventilation & lighting; designated areas used

Person In Charge (Signature) 	Date:
Inspector (Signature) 	Follow-up: YES (NO) (Circle one) Follow-up Date:

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

Clinton County Health Dept.

1234 Rossville Ave.

Frankfort, IN 46041

Phone: (765)659-6385 Fax: (765)656-2014

License/Permit #

Date 5/12/26

Establishment

Address

City/State

Zip Code

Telephone

NHK Seating Plant #3

OUTDOOR FOOD OPERATION & MOBILE RETAIL FOOD ESTABLISHMENT

Circle designated compliance status (IN, OUT, N/A) for each numbered item
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Mark "X" in appropriate box for COS and/or R
COS=corrected on-site during inspection R=repeat violation

Compliance Status

COS R

Compliance Status

COS R

57 IN OUT N/A N/O Outdoor Food Operation

58 IN OUT N/A N/O Mobile Retail Food Establishment

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
chicken BLT wrap	35°	Deluxe Chicken C. Bowl	37°		
MILK	38.5°				
double cheese burger	39°				
FRID LIFE MILK	37°				
BOILED EGGS	39°				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-26, Indiana Retail Food Establishment Sanitation Requirements. Violations cited in this report must be corrected within the time frames below or as stated in Section 475 and 476 of the Indiana Retail Food Establishment Food Code.

Complete by Date:

No violations noted @ time of inspection
All in compliance

Person In Charge (Signature)

Date:

Inspector (Signature)

Kelley A. Wynn, EHS

Date: 5/12/2026

