RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

Clinton County Health Dept.
1234 Rossville Ave.
Frankfort, IN 46041

10 days
Release Date

Date 10/8/2025
Time In 12:30 pm
Time Out 1:30 pm

No. of Risk Factor/Intervention Violations — Ø

No. of Repeat Risk Factor/Intervention Violations — Ø

Establishment	Address	City/State	Zip Code	Telephone
Prep & Go	210 Main Street	Michigantown, IN	46057	765 249-4001

License/Permit #	Permit Holder	Purpose of Inspection	Est. Type	Risk Category
	Rosie Groves	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

#	Status	Item	COS	R
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		

#	Status	Item	COS	R
17	IN OUT (N/A) N/O	Proper disposition of returned, previously served, reconditioned & unsafe food		
		Time/Temperature Control for Safety		
18	(IN) OUT N/A N/O	Proper cooking time & temperatures		
19	(IN) OUT N/A N/O	Proper reheating procedures for hot holding		
20	(IN) OUT N/A N/O	Proper cooling time and temperature		
21	(IN) OUT N/A N/O	Proper hot holding temperatures		
22	(IN) OUT N/A N/O	Proper cold holding temperatures		
23	(IN) OUT N/A N/O	Proper date marking and disposition		
24	IN OUT (N/A) N/O	Time as a Public Health Control; procedures & records		
		Consumer Advisory		
25	IN OUT (N/A) N/O	Consumer advisory provided for raw/undercooked food		
		Highly Susceptible Populations		
26	(IN) OUT N/A N/O	Pasteurized foods used; prohibited foods not offered		
		Food/Color Additives and Toxic Substances		
27	(IN) OUT N/A N/O	Food additives: approved & properly used		
28	(IN) OUT N/A N/O	Toxic substances properly identified, stored, & used		
		Conformance with Approved Procedures		
29	IN OUT (N/A) N/O	Compliance with variance/specialized process/HACCP		

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.

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	COS	R
		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) _[signature]_   Date: 10/9/25

Inspector (Signature) _Rodney P. Wann, EHS_

Follow-up: YES   NO   (Circle one)   Follow-up Date:

RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

Clinton County Health Dept.
1234 Rossville Ave.
Frankfort, IN 46041

License/Permit #	Date
	10/8/2025

Establishment	Address		City/State	Zip Code	Telephone
Prep & Go					

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:

Published Comment

Person In Charge Name	Person In Charge (Signature)	Date

Inspector Name	Inspector (Signature)	Date
RODNEY P. WANN	Rodney P. Wann, EHS	10/8/2025