



RETAIL FOOD ESTABLISHMENT
INSPECTION REPORT
State Form 57480 (R2 / 4-25)
INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

Release Date

10 Days

Date

4/30/26

No. of Risk Factor/Intervention Violations

5

Time In

Time Out

2

27

No. of Repeat Risk Factor/Intervention Violations

2

Establishment

Shoart County Jail

Address

214 E. 4th St.

City/State

Marengo, IN

Zip Code

46953

Telephone

2728921732

License/Permit #

2026-0489

Permit Holder

Victor Food Service

Purpose of Inspection

Routine

Est. Type

4

Risk Category

4

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		X
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			

Compliance Status		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		XX
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		XX
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)

David L. Smith

Date:

4-30-26

Inspector (Signature)

Follow-up: YES NO (Circle one)

Follow-up Date:



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State Form 57480 (R2 / 4-25)
INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

License/Permit #

Date

2050489

April 30 2026

Establishment

Address

City/State

Zip Code

Telephone

South County Ind 24 E. 4th St.

Maurion Ind 46153

OUTDOOR FOOD OPERATION & MOBILE RETAIL FOOD ESTABLISHMENT

Circle designated compliance status (IN, OUT, N/A) for each numbered item

Mark "X" in appropriate box for COS and/or R

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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

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:

148 C-6 Employee eating while preparing food/keggs

Today/COS

24 PF-23 Items in cooler by 3 bay sink not marked

Today/COS

185 C-41 soiled-wet towel setting on prep counter *Must be in sanitizer bucket

Today/COS

306 C-49 The following non-food contact items pooled with drug, food and other debris
1. meat slicer
2. can opener base/blade
3. can rack
4. cart containing clean lunchtrays

Today

442 C-55 physical facilities in need of repair or repair - dishroom wall has dark debris on it, needs to be cleaned - include chairs/benches around the metal and hand sink in kitchen

30 days

Person In Charge (Signature)

Sam Fink

Date:

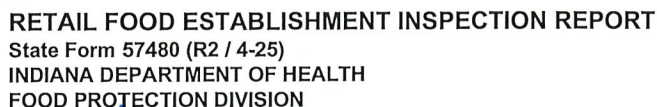
4-30-26

Inspector (Signature)

Sam Fink

Date:

4/30/26



2026-0480
License/Permit #

Date April 30 2026

Establishment

Address

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Complete by Date:

Published Comment

- Published Comment
1. Re-order sanitization test strips - Quatp
 2. Put hand soap dispenser repaired - by 3 bay
 3. Kitchen
Set pans/cooking sheets on paper in freezer
(so non potable water does not damage product)
 4. Grease Trap - clean once a week

Person In Charge (Signature)

Date: 4-30-26

Inspector (Signature)

Date: 4/30/24