



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

Release Date

10 Days

June 30
2026

No. of Risk Factor/Intervention Violations

2

Time In

Time Out

#27

No. of Repeat Risk Factor/Intervention Violations

1

Establishment

Little Caesars
#20553

Address

1325 W. 4th St

City/State

Marion

Zip Code

46952

Telephone

765-662-3355

License/Permit #

FEI-2026-0156

Permit Holder

Buzzing Caesar's

Purpose of Inspection

Routine

Est. Type

2

Risk Category

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			

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	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	X	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	X	Adequate ventilation & lighting; designated areas used			X

Person In Charge (Signature)

[Signature]

Date:

6-30-26

Inspector (Signature)

[Signature]

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



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INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

2026-0156
License/Permit #

Date June 30 2026

Establishment

Address

City/State

Zip Code

Telephone

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Item Description	Item Type	Item Status
1	Item 1 Description	Item 1 Type	Item 1 Status
2	Item 2 Description	Item 2 Type	Item 2 Status
3	Item 3 Description	Item 3 Type	Item 3 Status
4	Item 4 Description	Item 4 Type	Item 4 Status
5	Item 5 Description	Item 5 Type	Item 5 Status
6	Item 6 Description	Item 6 Type	Item 6 Status
7	Item 7 Description	Item 7 Type	Item 7 Status
8	Item 8 Description	Item 8 Type	Item 8 Status
9	Item 9 Description	Item 9 Type	Item 9 Status
10	Item 10 Description	Item 10 Type	Item 10 Status
11	Item 11 Description	Item 11 Type	Item 11 Status
12	Item 12 Description	Item 12 Type	Item 12 Status
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85	Item 85 Description	Item 85 Type	Item 85 Status

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:

306-C

49 The following non food/contact areas
soiled with dry food and/or other debris
1. Green rack near the 3 bay sink to in-
clude floor underneath
2. Outside door of the walk in cooler

→

445-1

56 HVAC system had dust on it through out kitchen area, above pizza oven - missing tiles

ASAP

Published Comment

Person In Charge (Signature)

Date:

Inspector (Signature)

Date: