



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

Release Date

10 Days

Date

4-23-26

No. of Risk Factor/Intervention Violations

Time In

Time Out

No. of Repeat Risk Factor/Intervention Violations

Establishment

Address

City/State

Zip Code

Telephone

License/Permit #

Permit Holder

Purpose of Inspection

Est. Type

Risk Category

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			
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			
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 X	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 X	Adequate ventilation & lighting; designated areas used		

Person in Charge (Signature)

Date:

Inspector (Signature)

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



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FOOD PROTECTION DIVISION

2026-0140 License/Permit # April 23 2026 Date

Establishment: Steak N Shake Address: 2624 So. Western City/State: Marion Zip Code: 46753 Telephone: —

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:
307 C - 16	Drunk nozzles pooled at the drive through to include the ice machine has dark debris inside top - all need to be cleaned and sanitized	Today
222 P - 48	No sanitizer made up on site	Today
443 C - 55	Flooring throughout facility has dry food and black debris on it - to exclude corners and walk in cooler	today
440 C - 56	personal items on prep table in back - need to be in designated area	today

Published Comment

Person In Charge (Signature)

Amber Hayes

Date: 4/23/26

Inspector (Signature)

2510

Date: 4/23/26