



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

Release Date

10 Days

Date

Time In

Time Out

10-24-25
10-27-25

No. of Risk Factor/Intervention Violations

4

No. of Repeat Risk Factor/Intervention
Violations

0

Establishment	Address	City/State	Zip Code	Telephone
Supoco Quic Mart 2025-091	2403 W 2nd St R. Winder Singh	Marion IN	46952	7655737030

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	Compliance Status	COS	R
Supervision						
1 IN OUT N/A N/O	Person in charge present, demonstrates knowledge, and performs duties			17 IN OUT N/A N/O	Proper disposition of returned, previously served, reconditioned & unsafe food	
2 IN OUT N/A N/O	Certified Food Protection Manager			18 IN OUT N/A N/O	Proper cooking time & temperatures	
Employee Health						
3 IN OUT N/A N/O	Management, food employee and conditional employee; knowledge, responsibilities and reporting			19 IN OUT N/A N/O	Proper reheating procedures for hot holding	
4 IN OUT N/A N/O	Proper use of restriction and exclusion			20 IN OUT N/A N/O	Proper cooling time and temperature	
5 IN OUT N/A N/O	Procedures for responding to vomiting and diarrheal events			21 IN OUT N/A N/O	Proper hot holding temperatures	
Good Hygienic Practices						
6 IN OUT N/A N/O	Proper eating, tasting, drinking, or tobacco products use			22 IN OUT N/A N/O	Proper cold holding temperatures	
7 IN OUT N/A N/O	No discharge from eyes, nose, and mouth			23 IN OUT N/A N/O	Proper date marking and disposition	
Preventing Contamination by Hands						
8 IN OUT N/A N/O	Hands clean & properly washed			24 IN OUT N/A N/O	Time as a Public Health Control; procedures & records	
9 IN OUT N/A N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			Consumer Advisory		
10 IN OUT N/A N/O	Adequate handwashing sinks properly supplied and accessible			25 IN OUT N/A N/O	Consumer advisory provided for raw/undercooked food	
Approved Source						
11 IN OUT N/A N/O	Food obtained from approved source			Highly Susceptible Populations		
12 IN OUT N/A N/O	Food received at proper temperature			26 IN OUT N/A N/O	Pasteurized foods used; prohibited foods not offered	
13 IN OUT N/A N/O	Food in good condition, safe, & unadulterated			27 IN OUT N/A N/O	Food additives: approved & properly used	
14 IN OUT N/A N/O	Required records available: molluscan shellfish identification, parasite destruction			28 IN OUT N/A N/O	Toxic substances properly identified, stored, & used	
Protection from Contamination						
15 IN OUT N/A N/O	Food separated and protected			29 IN OUT N/A N/O	Compliance with variance/specialized process/HACCP	
16 IN OUT N/A N/O	Food-contact surfaces; cleaned & sanitized			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

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Compliance Status		COS	R	Compliance Status	COS	R
Safe Food and Water						
30	Pasteurized eggs used where required			43	In-use utensils: properly stored	
31	Water & ice from approved source			44	Utensils, equipment & linens: properly stored, dried, & handled	
32	Variance obtained for specialized processing methods			45	Single-use/single-service articles: properly stored & used	
Food Temperature Control						
33	Proper cooling methods used; adequate equipment for temperature control			46	Gloves used properly	
34	Plant food properly cooked for hot holding			Utensils, Equipment and Vending		
35	Approved thawing methods used			47	Food & non-food contact surfaces cleanable, properly designed, constructed, & used	
36	Thermometers provided & accurate			48	Warewashing facilities: installed, maintained, & used; test strips	
Food Identification				49	Non-food contact surfaces clean	
37	Food properly labeled; original container			Physical Facilities		
Prevention of Food Contamination						
38	Insects, rodents, & animals not present			50	Hot & cold water available; adequate pressure	
39	Contamination prevented during food preparation, storage & display			51	Plumbing installed; proper backflow devices	
40	Personal cleanliness			52	Sewage & wastewater properly disposed	
41	Wiping cloths: properly used & stored			53	Toilet facilities: properly constructed, supplied, & cleaned	
42	Washing fruits & vegetables			54	Garbage & refuse properly disposed; facilities maintained	
Person In Charge (Signature)				55	Physical facilities installed, maintained, & clean	
Inspector (Signature)				56	Adequate ventilation & lighting; designated areas used	

Date: Oct. 24, 2025

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



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INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

2025-09 | Oct. 24 2025
License/Permit # Date

Establishment
Buck Mountain

Address 2403 W 2nd St

City/State

Zip Code

Telephone

OUTDOOR FOOD OPERATION & MOBILE RETAIL FOOD ESTABLISHMENT

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

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:
281 PF 48	No fast strips for sanitization on site - needs to be on site	COS
409 C-55	Cycling likes missing and off brown in color - need to be repaired or replaced	
306 C-49	The following may foul contact item - soiled with dry food or other debris/microwater	
445 C-56	Hood vent above fryer is heavily soiled with dust - needs to be cleaned	
286 C-47	Fryer by fryer damaged - needs repaired, leak/gas etc	

Person In Charge (Signature)

Date:

Inspector (Signature)

Date: