

Hendricks County Health Department Telephone (317) 745-9217 Fax (317) 745-9218

Based on the inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Chomp'z Truck Establishment Address							
					Telephone Number	Date of Inspecti 07/04/2024	ion ID#
Establishment Address						05:40 pm	1652
,	Establishment Address					03.10 pm	1002
Owner Kerry and Willie Riddle					PurposeX_ Routine	Follow Up NO	Released 07/14/2024
Owner's Address					Follow-up Complaint		•
Person in Charge Kerry and Willie Riddle					Pre-Operational Temporary	Menu Type 1 2 3_X_ 4 5	
Responsible Person's Email					— HACCP — Other (list)		
Certified Food Handler Exp.							
Willie Riddle ServSafe 06/21/2026				06/21/2026			
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"					DUTTIE NA DDA HAE COLADO MA DAEDA A CADA		
	VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND I Section # C/NC R Narrative					Т	o Be Corrected By
				County Fairgrounds 4th o	of July		•
				. 1			
No violations noted at time of inspection				noted at time of inspection	on.		
		0					
		0					
		0					
		0					
		0					
		0					
		0					
		0					
		0					
		0					
		0					
Summary of Violation			NC _	R <u>0</u> _			
Summary of Violation Received by (name and	s C		NC _	R <u>0</u> _	Inspected by (name and title	printed):	
·	s C		NC _	R0	Inspected by (name and title YOCELI PALAFOX	printed):	
Received by (name and	s C		NC _	R 0		printed):	
Received by (name and Person in charge	s C		NC _	R0	YOCELI PALAFOX	printed):	
Received by (name and Person in charge	s C		NC _	R0	YOCELI PALAFOX	printed):	