Retail Food Establishment Inspection Report

State Form 57480
INDIANA DEPARTMENT OF HEALTH

No. Risk Factor/Interventions Violations

Hendricks County Health Department

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Telephone (317) 745-9217

epriorie (317) 743-921

Date: 06/14/2025 Time In 11:00 am

FOOD PROTECTION DIVISION				No. Repeat Risk Factor/Intervention Violations				11:10 am
Establishment Address Plainfield Frigid Frog Mobile-Blue Truck		Address		City/State	Zip Code Telephone			
License/Permit # 1681	Permit Holder Plainfield Frigid			Purpose of Inspection Routine	Est Type Mobile			Risk Category
O. es I.F I.M.		F			-			

Certified Food Manager Exp.
Christina Frazier ServSafe 02/12/2030

Christin	a Frazier ServSale 02/12/203	10						
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS								
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item Mark "X" in appropriate box for COS and/or R								
IN-in compliance OUT-not in compliance N/O-not observered N/A-not app								
Compliance Status COS R				nplianc	e Status	cos	R	
Supervision				IN	Proper disposition of returned, previously served, reconditioned	1 1	ī	
1 1	IN Person-in-charge present, demonstrates knowledge, and				& unsafe food			
	performs duties			Time/Temperature Control for Safety				
2 l	N Certified Food Protection Manager		18	18 N/A Proper cooking time & temperatures				
	Employee Health		19	N/A	Proper reheating procedures for hot holding			
3 I	Management, food employee and conditional employee;		20	N/A	Proper cooling time and temperature		- [
1	knowledge, responsibilities and reporting N Proper use of restriction and exclusion		21	N/A	Proper hot holding temperatures			
		· ⁻	22	IN	Proper cold holding temperatures			
			23	IN	Proper date marking and disposition			
6 I N	Good Hygienic Practices 6 N/O Proper eating, tasting, drinking, or tobacco products use			N/A	Time as a Public Health Control; procedures & records			
	::		Consumer Advisory					
7 IN No discharge from eyes, nose, and mouth			25	N/A	Consumer advisory provided for raw/undercooked food		П.	
Preventing Contamination by Hands 8 N/O Hands clean & properly washed			Highly Susceptible Populations					
	1		26	N/A	Pasteurized foods used; prohibited foods not offered	1 1	П.	
9 N	O No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed	l li	Food/Color Additives and Toxic Substances					
10 I	N Adequate handwashing sinks properly supplied and accessible		27	N/A	Food additives: approved & properly used	1 1	П.	
Approved Source			28	IN	Toxic substances properly identified, stored, & used		· -	
11 I	N Food obtained from approved source	<u> </u>	Conformance with Approved Procedures					
12 N	/O Food received at proper temperature		29	N/A	Compliance with variance/specialized process/HACCP	<u> </u>	П.	
13 I	N Food in good condition, safe, & unadulterated						'	
14 N	N/A Required records available: molluscan shellfish identification, parasite destruction			Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury.				
Protection from Contamination					ealth interventions are control measures to prevent foodbo	orne	1	
15 I	15 IN Food separated and protected			illness or injury.				
16 IN Food-contact surfaces; cleaned & sanitized						┙		

Person in Charge Keith Frazier Date: 06/14/2025

Inspector: YOCELI PALAFOX Follow-up Required: YES NO (Circle one)

Person in Charge

Inspector:

Keith Frazier

YOCELI PALAFOX

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Hendricks County Health Depart	ment
Telephone (317) 745-9217	

Date:

NO

YES

06/14/2025

(Circle one)

INDIANA DEPARTMENT OF HEALTH License/Permit # Date: FOOD PROTECTION DIVISION 1681 06/14/2025 Address City/State Zip Code Establishment Telephone Plainfield Frigid Frog Mobile-Blue Truck **GOOD RETAIL PRACTICES** Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods R-repeat violation Mark "X" in appropriate box for COS and/or R COS-corrected on-site during inspection COS COS Safe Food and Water **Proper Use of Utensils** 30 N/A Pasteurized eggs used where required 43 IN In-use utensils: properly stored 31 ĪN Water & ice from approved source 44 ĪN Utensils, equipment & linens: properly stored, dried, & handled Variance obtained for specialized processing methods 45 ĺΝ Single-use/single-service articles: properly stored & used 32 N/A Gloves used properly 46 N/O **Food Temperature Control** N/A Proper cooling methods used; adequate equipment for 33 Utensils, Equipment and Vending temperature control Food & non-food contact surfaces cleanable, properly 47 IN 34 N/A Plant food properly cooked for hot holding designed, constructed, & used Approved thawing methods used 35 N/A 48 IN Warewashing facilities: installed, maintained, & used; test Thermometers provided & accurate 36 IN 49 ĪN Non-food contact surfaces clean **Food Identification Physical Faclities** 37 IN Food properly labeled; original container 50 IN Hot & cold water available; adequate pressure Prevention of Food Contamination 51 ĪN Plumbing installed; proper backflow devices 38 IN Insects, rodents, & animals not present 52 IN Sewage & waste water properly disposed N/O 39 Contamination prevented during food preparation, storage & 53 ĪN Toilet facilities: properly constructed, supplied, & cleaned uispiay Personal cleanliness 40 IN 54 IN Garbage & refuse properly disposed; facilities maintained IN Wiping cloths: properly used & stored 55 IN Physical facilities installed, maintained, & clean 42 N/A Washing fruits & vegetables 56 ĪN Adequate ventilation & lighting; designated areas used Outdoor Food Operation & Mobile Retail Food Establishment Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item Mark "X" in appropriate box for COS and/or R IN-in compliance OUT-not in compliance N/O-not observered N/A-not applicable COS-corrected on-site during inspection R-repeat violation cos cos Outdoor Food Operation Mobile Retail Food Establishment 58 **TEMPERATURE OBSERVATIONS** (in degrees Fahrenheit) Item/Location Item/Location Item/Location Temp Temp Temp 3*F Ice cream/Freeze **OBSERVATIONS AND CORRECTIVE ACTIONS** Item Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-26, Indiana Retail Food Establishment Complete Sanitation Requirements. Violations cited in this report must be corrected within the time frames below or as stated in Section by Date: 475 and 476 of the Indiana Retail Food Establishment Food Code Risk: COS: Repeat: **Summary of Violations:** Core: **Published Comment** @ Plainfield Public Safety Day No violations noted at time of inspection.

Follow-up Required: