

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.

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|-----------------------------------------------------------------------------|--|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------|
| Establishment Name Travelin' Tom's Coffee Truck VIN 0325 | | | Telephone Number Est | Date of Inspection 04/11/2025 | ID# 2018 |
| Establishment Address 4592 Dale Drive Suite D, Lafayette IN 47905 | | | | 04:40 pm | |
| Owner Tim Valiant | | | Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) | Follow Up NO | Released 04/21/2025 |
| Owner's Address | | | | Menu Type 1__ 2 <input checked="" type="checkbox"/> 3__ 4__ 5__ | |
| Person in Charge Grant Valiant | | | | | |
| Responsible Person's Email | | | | | |
| Certified Food Handler Tim Valiant | | | | | |
| Exp. ServSafe 02/12/2027 | | | | | |

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

| Section # | C/NC | R | Narrative | To Be Corrected By |
|-----------|------|---|--------------------------------------------|--------------------|
| | | | No violations noted at time of inspection. | |
| | | 0 | | |
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|--------------------------------------------------------|--|---------------------------------------------------------|--|
| Summary of Violations C NC R <u>0</u> | | | |
| Received by (name and title printed): Grant Valiant | | Inspected by (name and title printed): LISA CHANDLER | |
| Received by (signature): | | Inspected by (signature): | |
| cc: | | cc: | |