Retail Food Establishment Inspection Report

State Form 57480
INDIANA DEPARTMENT OF HEALTH

Release Date:	06/14/2025

No. Risk Factor/Interventions Violations

Hendricks County Health Department

Telephone (317) 745-9217

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n		Date:	06/

Date: 06/04/2025 Time In 6:00 pm

FOOD PROTECTION DIVISION				at Risk Factor/Intervention Violation	Time Out	6:15 pm
Establishment Podium BBQ	Address		City/State	Zip Code		
icense/Permit # Permit Holder 135 Vince Johnson			Purpose of Inspection Routine	Est Type Mobile		Risk Category

Certified Food Manager Exp.
Vince Johnson Servsafe 03/08/2026

Vince Johnson Servsafe 03/08/2026											
	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	complianc	e OUT-not in compliance	N/O-not observered	N/A-not	applicable		COS-corrected on-site during inspection	tances			
C	ompliand	ce Status		cos	R Co	ompliand	e Status	COS R			
Supervision						IN	Proper disposition of returned, previously served, recondition	ned			
1	IN	Person-in-charge present, demonstrate		T		1	& unsafe food				
		performs duties					Time/Temperature Control for Safety				
2	IN	Certified Food Protection Manager			18	N/O	Proper cooking time & temperatures				
		Employee H	ealth		19	N/O	Proper reheating procedures for hot holding				
3	IN	Management, food employee and cond			20	N/O	Proper cooling time and temperature				
4	IN	knowledge, responsibilities and reporting Proper use of restriction and exclusion	ig		21	IN	Proper hot holding temperatures				
5	I IN		and diarrhaal avanta		22	IN	Proper cold holding temperatures				
					23	IN	Proper date marking and disposition				
Good Hygienic Practices 6 IN Proper eating, tasting, drinking, or tobacco products use		1 1	24	N/A	Time as a Public Health Control; procedures & records						
 7					-	4	Consumer Advisory				
				25	N/A	Consumer advisory provided for raw/undercooked food					
	I 181	Preventing Contamina	ition by Hands	1 1		Highly Susceptible Populations					
8	IN	Hands clean & properly washed			- 26	N/A	Pasteurized foods used; prohibited foods not offered				
9	IN	No bare hand contact with RTE food or alternative procedure properly allowed	a pre-approved			4	Food/Color Additives and Toxic Substance				
10	IN	Adequate handwashing sinks properly	supplied and accessible		27	N/A					
	1	Approved Sc	ource		28	IN	Toxic substances properly identified, stored, & used				
11	IN	Food obtained from approved source			1	23 IN Proper date marking and disposition 24 N/A Time as a Public Health Control; procedures & records Consumer Advisory 25 N/A Consumer advisory provided for raw/undercooked food Highly Susceptible Populations 26 N/A Pasteurized foods used; prohibited foods not offered Food/Color Additives and Toxic Substances 27 N/A Food additives: approved & properly used					
12	N/O	Food received at proper temperature			29	N/A					
13	IN	Food in good condition, safe, & unadult	erated		·	4	 				
14	N/A	Required records available: molluscan parasite destruction	shellfish identification,								
		Protection from Co	ntamination				•	dborne			
15 IN Food separated and protected						illness o	r injury.				
16	IN	Food-contact surfaces; cleaned & sanit	ized								
	•	,									

Person in Charge Vince Johnson Date: 06/04/2025

Inspector: LISA CHANDLER Follow-up Required: YES NO (Circle one)

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INDIANA DEPARTMENT OF HEALTH FOOD PROTECTION DIVISION

Hendricks County Health Departmer	١t
Telephone (317) 745-9217	

License/Permit# 2135

Date: 06/04/2025

Establishment Address					City/State Zip Code Telephone						ne						
Podium BBQ																	
							GOOD I	RETAIL	PRAC	TIC	ES						
G	ood Retai	il Practices are pre	ventative meas	ures to control		of pathogens, chemica Mark "X" in appropriate				ds.	COS-corrected or	n-site during insp	ection		R-repeat	violation	
							cos	R								cos	R
				Food and	Water		,					oper Use o	f Utensils	s			
30	N/A									IN 	In-use utensils: proper					ļ	
31	IN	Water & ice fr						-		IN 					d 		
32	N/A	Variance obta		<u> </u>			l	<u> </u>		IN 	Single-use/single-serv	ice articles: pro	perly store	d & used			
33	N/O	Proper cooling		mperature			ı		46	IN J	Gloves used properly					L I	
		temperature of	•					ļļ.,	47	IN	Utensils Food & non-food conta	s, Equipment act surfaces cle					1
34	IN	Plant food pro	perly cooked	for hot holdir	ng				.		designed, constructed					<u> </u>	
35	N/O	Approved that	wing methods	used]] ·	48	IN	Warewashing facilities	: installed, mai	ntained, & ı	used; test			
36	IN	Thermometer	s provided & a	accurate				<u> </u>	49	 IN	strips Non-food contact surfa	aces clean					
0.7	18.1			d Identific						ا		Physical Fa	aclities			L I	
37	IN	Food properly						lJ	50	IN	Hot & cold water avail						
38	IN	Pr Insects, roder	evention o		ontamin	ation	ı	, , , , , ,	51	IN	Plumbing installed; pro	oper backflow o	devices			i	
39	IN IN	Contamination			enaration	storage &			52	IN	Sewage & waste wate		osed				
39	IIN	display	i preventeu ui	uring 1000 pr	eparation, s	storage &		-	53		Toilet facilities: properl		supplied, &	cleaned			
40	IN	Personal clea	nliness] -	54 N	1/0	Garbage & refuse pro	perly disposed;	facilities m	aintained		i i	
41	IN	Wiping cloths	properly used	d & stored] [] [55	IN	Physical facilities insta	ılled, maintaine	d, & clean			i	
42	N/A	Washing fruits	& vegetables	3]]]]]	56	IN	Adequate ventilation &					i	
					Ou	tdoor Food Or	neration	& Mohi	le Re	tail I	Food Establishme					1	,
0:			-4-4 (INL OUT	- N/O N/A) f			oci atioii	a mos	ic ite	tuii i			f 000 d	1/ D			
	rcie desig i compliai	gnated compliance	Status (IN, OUT			erea item -not observered	N/A.	-not applical	nle		COS-corrected or	n appropriate box		I/OF K	R-repeat	violation	
	ООПРІНІ	1100		pilatioc	14/0-	TIOT ODDGETVERED	1071	пот арриоа	,,,,,			Traite during map			Teropout	violation	
I	N 1/A	To =	10 "				cos		50 I	18.1	Luizbize	15 (18)				COS	R
57	N/A	Outdoor Fo	od Operation				l	11	58	IN	Mobile Retail Foo	d Establishmer	11			l	. I !
						TEI	MPERA	TURE O	BSER	RVAT	TIONS	(in de	grees Fah	renheit)			
Item/	Locatio	on		Temp		Item/Location				Tem	p Ite	m/Location			Temp		
		shoulder- uprigh	cooler	41		coleslaw-upright				40_	pulle	ed pork-hot tab	le		145		
mac r	cheese	e- hot table		135		baked beans-hot			<u> l</u> .	138				<u> </u>			
						OBSERVA	ATIONS	AND CO	RRE	CTI	VE ACTIONS						
Item											C 7-26, Indiana Retail Fo				C	omplete	•
				•					within	the ti	ime frames below or as	on			/ Date:		
			475 and 4	76 of the Inc	liana Retail	l Food Establishmer	nt Food Co	ode.									
R	isk:																
	OS:																
R	epeat:																
			l												k		
_				_							_						
Su	mma	ry of Violat	ions:	P:		_	Pf:				Core: _						
		Comment															
INO V	เงเลแง	ns noted at	ime oi mst	Dection													
Pers	on in (Charge	Vince Johr	nson									Date:	06/04	/2025		
Insp	ector:		LISA CHAI	NDLER					F	ollo	w-up Required:	YES	NO	(Circle one)		