

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 Goldie's LLC					Telephone Number	Date of Inspection 10/26/2024	ID#	
Establishment Address					1	11:00 am	2173	
,	Coo							
Owner Shelby House					PurposeX_ Routine	Follow Up NO	Released 11/05/2024	
Owner's Address					Follow-up Complaint Pre-Operational Temporary	Menu Type 1 2_X_ 3 4 5		
Person in Charge Shelby House								
Responsible Person's Email					HACCP Other (list)			
Certified Food Handler Exp.]			
Shelby House ServSafe 03/28/2027								
CRITICAL ITEMS ARE IDENT								
VIOLATION(S) REPEATED FE Section #	C/NC	SPECTION R	Narrative	"SUMMARY OF VIOLATIONS" AND I	N THE NARRAIVE COLUMN MARKED AS "R"	To 1	Be Corrected By	
Section "	Circ			ay, Talon Stream Park		101	oc corrected by	
No violations noted at time of inspection					on.			
		0						
	1	<u> </u>				I		
Summary of Viola		С _	NC .	R <u>0</u>				
Received by (name and title printed):					Inspected by (name and title printed):			
Person in charge					YOCELI PALAFOX			
Received by (signature):					Inspected by (signature):			
					1 3 3			
cc:				cc:	,	cc:		