



Retail Food Establishment
Inspection Report

State Form 57480
INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

Release Date: 08/15/2025

Hendricks County Health Department

Telephone (317) 745-9217

No. Risk Factor/Interventions Violations 1

Date: 08/05/2025

Time In 3:55 pm

No. Repeat Risk Factor/Intervention Violations 0

Time Out 4:05 pm

Establishment Magnolia Cafe		Address		City/State /		Zip Code		Telephone	
License/Permit # 2265		Permit Holder Misty Fain/Aubrey Fain		Purpose of Inspection Followup		Est Type Mobile		Risk Category 2	
Certified Food Manager Misty Fain		Food Handler		Exp. 02/03/2026					

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 compliance		OUT-not in compliance		N/O-not observed		N/A-not applicable		COS-corrected on-site during inspection		R-repeat violation													
Compliance Status					COS		R		Compliance Status			COS		R									
Supervision														17		IN		Proper disposition of returned, previously served, reconditioned & unsafe food					
1		IN		Person-in-charge present, demonstrates knowledge, and performs duties																			
2		IN		Certified Food Protection Manager																			
Employee Health														18		N/A		Proper cooking time & temperatures					
3		IN		Management, food employee and conditional employee; knowledge, responsibilities and reporting																			
4		IN		Proper use of restriction and exclusion																			
5		IN		Procedures for responding to vomiting and diarrheal events																			
Good Hygienic Practices														19		N/A		Proper reheating procedures for hot holding					
6		N/O		Proper eating, tasting, drinking, or tobacco products use																			
7		IN		No discharge from eyes, nose, and mouth																			
Preventing Contamination by Hands														20		N/A		Proper cooling time and temperature					
8		IN		Hands clean & properly washed																			
9		IN		No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed																			
10		IN		Adequate handwashing sinks properly supplied and accessible																			
Approved Source														21		N/A		Proper hot holding temperatures					
11		IN		Food obtained from approved source																			
12		N/O		Food received at proper temperature																			
13		IN		Food in good condition, safe, & unadulterated																			
14		N/A		Required records available: molluscan shellfish identification, parasite destruction																			
Protection from Contamination														22		N/A		Proper cold holding temperatures					
15		IN		Food separated and protected																			
16		IN		Food-contact surfaces; cleaned & sanitized																			
														23		N/A		Proper date marking and disposition					
														24		N/A		Time as a Public Health Control; procedures & records					
														25		N/A		Consumer advisory provided for raw/undercooked food					
														26		N/A		Pasteurized foods used; prohibited foods not offered					
														27		N/A		Food additives: approved & properly used					
														28		IN		Toxic substances properly identified, stored, & used					
														29		N/A		Compliance with variance/specialized process/HACCP					
														<p>Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.</p>									

Person in Charge		Misty Fain		Date:		08/05/2025	
Inspector:		SARAH DALLAS		Follow-up Required:		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> (Circle one)	



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INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

Hendricks County Health Department
Telephone (317) 745-9217

License/Permit #
2265

Date:
08/05/2025

Establishment
Magnolia Cafe

Address

City/State
/

Zip Code

Telephone

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in appropriate box for COS and/or R

COS-corrected on-site during inspection

R-repeat violation

COS R

COS R

Safe Food and Water

30	N/A	Pasteurized eggs used where required		
31	IN	Water & ice from approved source		
32	N/A	Variance obtained for specialized processing methods		

Food Temperature Control

33	N/A	Proper cooling methods used; adequate equipment for temperature control		
34	N/A	Plant food properly cooked for hot holding		
35	N/A	Approved thawing methods used		
36	N/A	Thermometers provided & accurate		

Food Identification

37	N/A	Food properly labeled; original container		
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Prevention of Food Contamination

38	IN	Insects, rodents, & animals not present		
39	IN	Contamination prevented during food preparation, storage & display		
40	IN	Personal cleanliness		
41	N/O	Wiping cloths: properly used & stored		
42	N/O	Washing fruits & vegetables		

Proper Use of Utensils

43	IN	In-use utensils: properly stored		
44	IN	Utensils, equipment & linens: properly stored, dried, & handled		
45	IN	Single-use/single-service articles: properly stored & used		
46	IN	Gloves used properly		

Utensils, Equipment and Vending

47	IN	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
48	IN	Warewashing facilities: installed, maintained, & used; test strips		
49	IN	Non-food contact surfaces clean		

Physical Facilities

50	N/O	Hot & cold water available; adequate pressure		
51	IN	Plumbing installed; proper backflow devices		
52	IN	Sewage & waste water properly disposed		
53	IN	Toilet facilities: properly constructed, supplied, & cleaned		
54	IN	Garbage & refuse properly disposed; facilities maintained		
55	IN	Physical facilities installed, maintained, & clean		
56	IN	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 observed

N/A-not applicable

COS-corrected on-site during inspection

R-repeat violation

COS R

COS R

57	N/A	Outdoor Food Operation			58	IN	Mobile Retail Food Establishment		
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TEMPERATURE OBSERVATIONS

(in degrees Fahrenheit)

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp

OBSERVATIONS AND CORRECTIVE ACTIONS

Item		Complete by Date:
	Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-26, Indiana Retail Food Establishment Sanitation Requirements. Violations cited in this report must be corrected within the time frames below or as stated in Section 475 and 476 of the Indiana Retail Food Establishment Food Code.	
5-153-(a) Risk: Pf COS: No Repeat:	(a) A retail food establishment shall have written procedures for employees to follow when responding to vomiting or diarrheal events that involve the discharge of vomitus or fecal matter onto surfaces in the retail food establishment. The procedures must address the specific actions employees shall take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomitus or fecal matter.	01/01/2026

Summary of Violations:

P: 0

Pf: 1

Core: 0

Published Comment

Previous violations from 7/8/2025 were corrected at time of inspection.

Person in Charge Misty Fain

Date: 08/05/2025

Inspector: SARAH DALLAS

Follow-up Required:

YES

NO

(Circle one)