## Retail Food Establishment



Inspection Report State Form 48669 (R2/2-05) SDH From 51-0001 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.

<b>Establishment Name</b> Fresko LLC		<b>Telephone Number</b> Est	Date of Inspection 06/01/2024	ID#
Establishment Address			04:10 pm	2424
<b>Owner</b> Erick Pillco		Purpose Routine Follow-up Complaint Pre-Operational Temporary	Follow Up NO	<b>Released</b> 06/11/2024
Owner's Address			Menu Type 1 2 3 <u>_X</u> _ 4 5	
Person in Charge Erick Pillco				
Responsible Person's Email		HACCP Other (list)		
Certified Food Handler	Exp.			
Erick Pillco ServSafe	08/23/2027			
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 NARRAIVE COLUMN MARKED AS "R"				
Section # C/NC R Narrative To Be Corrected By				Corrected By
No violations n	oted at the time of inspec	tion.		
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Summary of Violations C NC R _0				
Received by (name and title printed):		Inspected by (name and title printed):		
Reviewed w/person-in-charge		BRIAN PORTWOOD		
Received by (signature):		Inspected by (signature):		
cc: cc:		+	cc:	