Establishment

Person in Charge

Erick Pillco

## Retail Food Establishment Inspection Report

State Form 57480
INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

Address

Release Date:	07/28/2025

City/State

Hendricks County Health Department

Zip Code

Telephone (317) 745-9217

Date:

Telephone

07/18/2025

Date:

07/18/2025

No. Risk Factor/Interventions Violations 0

No. Repeat Risk Factor/Intervention Violations 0

Time In 5
Time Out 5

5:30 pm 5:39 pm

Fresko LLC				/	1					
License/Per 2424	se/Permit # Permit Holder Erick Pillco				Purpose of Inspection Routine		Est Type Mobile	Risk Ca	ategory 3	
Certified Fo Erick Pillco	od Manager	ServSafe	Ex 08/23/							
		FOC	DBORNE ILLNESS RI	SK FACTO	RS AN	ID PUB	LIC HEALTH INTER	VENTIONS		
Cirolo dosis	gnated compliance status (II	N OUT N/O N/A) for	r oach numbered item				Mark "Y" in	appropriate how for COS and/or P		
IN-in compliance	•	compliance	N/O-not observered	N/A-not	Mark "X" in appropriate box for COS and/or N/A-not applicable COS-corrected on-site during inspection					ition
Compliand						ompliand	<u> </u>	COS		
		Supervisio	.n		17	l in	Proper disposition of re	eturned, previously served, reconditioned	ı	1 1
1 IN	Person-in-charge pres			1 1		]	& unsafe food			
	performs duties							perature Control for Safety		
2 IN	Certified Food Protec	tion Manager			18	4	Proper cooking time &			
		Employee He		, ,	19	4	Proper reheating proce			
3 IN	Management, food er knowledge, responsib				20	1	Proper cooling time an			
4 IN	Proper use of restricti		<del>.</del>	1	- 21		Proper hot holding tem			
5 IN	Procedures for respon	nding to vomiting a	nd diarrheal events		- 22	4	Proper cold holding ter			
	Go	od Hygienic P	ractices		23		Proper date marking a			
6 IN	Proper eating, tasting	, drinking, or tobac	co products use		24	N/A	.	h Control; procedures & records		
7 IN	No discharge from ey	es, nose, and mou	th		-	1		onsumer Advisory		
	Preventii	ng Contamina	tion by Hands		25	N/A		ovided for raw/undercooked food	<u> </u>	
8 IN	Hands clean & proper	ly washed	-			I NI/A		Susceptible Populations		
9 IN	No bare hand contact		a pre-approved		26	N/A	.	d; prohibited foods not offered		
10 IN	alternative procedure properly allowed  Adequate handwashing sinks properly supplied and accessible				- 27	N/A	Food/Color A Food additives: approv	dditives and Toxic Substances		
Approved Source					28	4		erly identified, stored, & used		
11 IN	Food obtained from a		uice	1 1	1	1"`				
12 N/O	Food received at prop				- 29	N/A		ce with Approved Procedures ace/specialized process/HACCP		
13 IN	Food in good conditio		erated		-	1			<u> </u>	<u>-</u>
14 N/A	Required records ava parasite destruction	ilable: molluscan s	hellfish identification,		-			ctices or procedures identified as the	<b>;</b>	
	<b>-</b>	ction from Cor	ntamination		- 1		•	control measures to prevent foodbo	rne	
15 IN	Food separated and p	orotected			7	illness c	or injury.	•		
16 IN	Food-contact surface	s; cleaned & sanitiz	zed		`  L					
	<b>F</b>				- •					

Inspector: BRIAN PORTWOOD Follow-up Required: YES NO (Circle one)

## **Retail Food Establishment Inspection Report**

State Form 57480

INDIANA DEPARTMENT OF HEALTH FOOD PROTECTION DIVISION

Hendricks County Health Department Telephone (317) 745-9217

License/Permit # 2424

Date: 07/18/2025

Establishment Address C Fresko LLC	City/State	Zip Code	Telephone		

	o LLC	,,,,,		Address				/	Otate		Zip Code	Тетері	OTIC	
					G	OOD F	RETA	IL PR	ACTIC	ES				
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.														
				N	fark "X" in appropriate	box for CC	OS and/	or R		COS-corrected on	n-site during inspection		R-repeat violation	on
						cos	R						CO	S R
Safe Food and Water Proper Use of Utensils														
30	N/A	Pasteurized egg	s used where required					43	IN	In-use utensils: properl	ly stored			
31	IN		approved source					44	IN	Utensils, equipment &			led	
32	N/A		ed for specialized proce			.ll	J	45	IN	Single-use/single-servi	ice articles: properly	stored & used		
33	Food Temperature Control  33 IN Proper cooling methods used; adequate equipment for							46	IN J	Gloves used properly	- <u>-</u>		<b>.</b>	.1
		temperature cor	trol			.		47	IN	Food & non-food conta	s, Equipment au act surfaces cleanab			
34	N/A		erly cooked for hot holdi	ng 		.				designed, constructed,				
35  36	N/O IN	Approved thawir	ig memods used  provided & accurate			.		48	IN	Warewashing facilities: strips	. installed, maintain	eu, & useu, iesi		.]]
	l . :"`. J	- Thermometers p	Food Identific	ration		.l l	l J	49	IN	Non-food contact surfa	ices clean		<b>.</b>	.   ]
37	IN	Food properly la	beled; original containe					50	IN	Hot & cold water availa	Physical Facilit			
		Pre	vention of Food C	ontamina	tion			51	IN	Plumbing installed; pro				
38	IN		, & animals not present					52	IN	Sewage & waste water				
39	IN	Contamination p	revented during food pr	reparation, s	torage &			53	IN	Toilet facilities: properly		lied, & cleaned		-
40	IN	Personal cleanli	ness					54	IN	Garbage & refuse prop				
41	IN	Wiping cloths: p	roperly used & stored					55	IN	Physical facilities instal	lled, maintained, &	clean		
42	N/O	Washing fruits &	vegetables					56	IN	Adequate ventilation &				-
				Out	door Food Ope	eration	& M	obile F	Retail F	Food Establishmer				
Ci	ircle desig	anated compliance st	atus (IN, OUT, N/O, N/A) fo								appropriate box for C0	OS and/or R		
	n compliar		T-not in compliance		ot observered	N/A-	not app	licable		COS-corrected on	n-site during inspection		R-repeat violation	on
						cos	R						C	OS R
57	N/A	Outdoor Food	Operation					58	IN	Mobile Retail Food	d Establishment			
												E 1 1 10		•
					TEM	IPERA1	TURE	OBS	ERVAT	TIONS	(in degree	s Fahrenheit)		
Item/	Locatio	on	Temp		Item/Location				Tem	<u>'                                      </u>	m/Location		Temp	
	ages - gr - steam t	rill cooling drawer	40.8 160.2		Ham - prep cooler				38.0	Stea	ık - steam table		160.9	
TOIK	- steam t	table	100.2	<u>.</u>	OBSERVAT	TIONS	AND	CORE	PECTIV	/E ACTIONS			I	
					ow identify violations of 410 IAC 7-26, Indiana Retail Food Establishment must be corrected within the time frames below or as stated in Section							Compl by Dat		
			475 and 476 of the Inc										, 5, 5ut	٥.
_														
	isk: OS:													
	epeat:													
٠	mma	ry of Violatio	no. Di			Pf:				Coro				
Jou	IIIIIIa	ry or violatic	ons: P:		_	FI.	_		-	Core: _				
Pers	on in (	Charge Ei	rick Pillco									)ate: 07/1	8/2025	
Insp	ector:	В	RIAN PORTWOOI	D					Follo	w-up Required:	YES 1	(Circle on		