



Retail Food Establishment

Inspection Report

State Form 48669 (R2/2-05)

SDH Form 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.

Establishment Name Foodiegang Bites	Telephone Number Est	Date of Inspection 07/03/2024 08:00 am	ID# 2443
Establishment Address ,			
Owner Kehinde Bamidele	Purpose <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input checked="" type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up NO	Released
Owner's Address		Menu Type 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
Person in Charge Kehinde Bamidele			
Responsible Person's Email			
Certified Food Handler Kehinde Bamidele	Exp. 360 Training 11/29/2027		

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 NARRATIVE COLUMN MARKED AS "R"

Section #	C/NC	R	Narrative	To Be Corrected By
			Mobile meets health code regulations and the permit has been issued.	
		0		

Summary of Violations C ☐ NC ☐ R ☒ 0

Received by (name and title printed):

Kehinde Bamidele

Inspected by (name and title printed):

LISA CHANDLER

Received by (signature):

Inspected by (signature):

cc:

cc:

cc: