



Retail Food Establishment  
Inspection Report

State Form 57480  
INDIANA DEPARTMENT OF HEALTH  
FOOD PROTECTION DIVISION

Release Date: 05/22/2025

Hendricks County Health Department

Telephone (317) 745-9217

No. Risk Factor/Interventions Violations 0

Date: 05/12/2025

Time In 10:00 am

No. Repeat Risk Factor/Intervention Violations 0

Time Out 10:30 am

Establishment  
Huacate Taco Truck

Address  
14386 Banister Drive

City/State  
Noblesville/IN

Zip Code  
46060

Telephone  
865-237-5184

License/Permit #  
2532

Permit Holder  
Huacate,LLC

Purpose of Inspection  
Pre-Operational

Est Type  
Mobile

Risk Category  
3

Certified Food Manager  
Jose Padilla

ServSafe

Exp.  
02/09/2026

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

1	IN	Person-in-charge present, demonstrates knowledge, and performs duties		
2	IN	Certified Food Protection Manager		

17	IN	Proper disposition of returned, previously served, reconditioned & unsafe food		
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Time/Temperature Control for Safety

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		

18	N/O	Proper cooking time & temperatures		
19	N/O	Proper reheating procedures for hot holding		
20	N/O	Proper cooling time and temperature		
21	N/O	Proper hot holding temperatures		
22	N/O	Proper cold holding temperatures		
23	N/O	Proper date marking and disposition		
24		Time as a Public Health Control; procedures & records		

Good Hygienic Practices

6	N/O	Proper eating, tasting, drinking, or tobacco products use		
7	N/O	No discharge from eyes, nose, and mouth		

25	N/A	Consumer advisory provided for raw/undercooked food		
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Consumer Advisory

Preventing Contamination by Hands

8	N/O	Hands clean & properly washed		
9	N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		
10	IN	Adequate handwashing sinks properly supplied and accessible		

26	N/A	Pasteurized foods used; prohibited foods not offered		
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Highly Susceptible Populations

11		Food obtained from approved source		
12		Food received at proper temperature		
13		Food in good condition, safe, & unadulterated		
14		Required records available: molluscan shellfish identification, parasite destruction		

27	N/A	Food additives: approved & properly used		
28	N/A	Toxic substances properly identified, stored, & used		

Food/Color Additives and Toxic Substances

15		Food separated and protected		
16	IN	Food-contact surfaces; cleaned & sanitized		

29	N/A	Compliance with variance/specialized process/HACCP		
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Conformance with Approved Procedures

**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.

Person in Charge      Arturo Serrato

Date:      05/12/2025

Inspector:      LISA CHANDLER

Follow-up Required:      YES      **NO**      (Circle one)



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## 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	N/O	Water & ice from approved source		
32	N/A	Variance obtained for specialized processing methods		

### Food Temperature Control

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

### Food Identification

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

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

### Proper Use of Utensils

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

### Utensils, Equipment and Vending

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

### Physical Facilities

50	IN	Hot & cold water available; adequate pressure		
51	IN	Plumbing installed; proper backflow devices		
52	IN	Sewage & waste water properly disposed		
53		Toilet facilities: properly constructed, supplied, & cleaned		
54	N/O	Garbage & refuse properly disposed; facilities maintained		
55		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	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.	Complete by Date:
Risk: COS: Repeat:		

Summary of Violations:

P: \_\_\_\_\_

Pf: \_\_\_\_\_

Core: \_\_\_\_\_

### Published Comment

Mobile meets health code regulations and the permit has been issued.

Person in Charge Arturo Serrato

Date: 05/12/2025

Inspector: LISA CHANDLER

Follow-up Required:

YES

**NO**

(Circle one)