Retail Food Establishment Inspection Report

State Form 57480
INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

Release Date:	07/28/2025	Hendricks County Health Department Telephone (317) 745-9217
No. Risk Factor/Interventions Violations	0	Date: 07/18/2025 Time In 11:10 am Time Out 11:20 am
No. Repeat Risk Factor/Intervention Violations	0	

Establishment	Address	City/State	Zip Code	Telephone
Orange Leaf Frozen Yogurt-Cart #2		/		

License/Permit #	Permit Holder	Purpose of Inspection	Est Type	Risk Category
2564	Stephanie Bernhardt	Pre-Operational	Mobile	1

Certified Food Manager: Stephanie Bernhardt — ServSafe — Exp. 02/02/2030

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
IN-in compliance OUT-not in compliance N/O-not observered N/A-not applicable

Mark "X" in appropriate box for COS and/or R
COS-corrected on-site during inspection R-repeat violation

	Compliance Status		COS	R
Supervision				
1	IN	Person-in-charge present, demonstrates knowledge, and performs duties		
2	N/A	Certified Food Protection Manager		
Employee Health				
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				
6	N/O	Proper eating, tasting, drinking, or tobacco products use		
7	N/O	No discharge from eyes, nose, and mouth		
Preventing Contamination by Hands				
8	N/O	Hands clean & properly washed		
9	N/A	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				
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				
15	N/A	Food separated and protected		
16	N/A	Food-contact surfaces; cleaned & sanitized		
17	IN	Proper disposition of returned, previously served, reconditioned & unsafe food		
Time/Temperature Control for Safety				
18	N/A	Proper cooking time & temperatures		
19	N/A	Proper reheating procedures for hot holding		
20	N/A	Proper cooling time and temperature		
21	N/A	Proper hot holding temperatures		
22	N/O	Proper cold holding temperatures		
23	N/A	Proper date marking and disposition		
24	N/A	Time as a Public Health Control; procedures & records		
Consumer Advisory				
25	N/A	Consumer advisory provided for raw/undercooked food		
Highly Susceptible Populations				
26	N/A	Pasteurized foods used; prohibited foods not offered		
Food/Color Additives and Toxic Substances				
27	N/A	Food additives: approved & properly used		
28	N/A	Toxic substances properly identified, stored, & used		
Conformance with Approved Procedures				
29	N/A	Compliance with variance/specialized process/HACCP		

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: Brian McLane/Tyler Lappin — Date: 07/18/2025

Inspector: YOCELI PALAFOX — Follow-up Required: YES NO (Circle one)

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License/Permit #	Date:
2564	07/18/2025

Establishment	Address	City/State	Zip Code	Telephone
Orange Leaf Frozen Yogurt-Cart #2		/		

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

Safe Food and Water

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

Food Temperature Control

			COS	R
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/O	Thermometers provided & accurate		

Food Identification

			COS	R
37	N/A	Food properly labeled; original container		

Prevention of Food Contamination

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

Proper Use of Utensils

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

Utensils, Equipment and Vending

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

Physical Faclities

			COS	R
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	N/O	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 observered — 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		

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 requirements.Permit issued.

@ Splash Island Water Park

Person in Charge: Brian McLane/Tyler Lappin — Date: 07/18/2025

Inspector: YOCELI PALAFOX — Follow-up Required: YES [NO] (Circle one)