



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 Heavy's Bar and Grill	Telephone Number Est 317-856-7888	Date of Inspection 02/13/2025 10:52 am	ID# 1264
Establishment Address 8411 Windfall Lane Suite 110, Camby IN 46113			
Owner 5 M LLC	Purpose ☒ Routine ☐ Follow-up ☐ Complaint ☐ Pre-Operational ☐ Temporary ☐ HACCP ☐ Other (list)	Follow Up YES	Released 02/23/2025
Owner's Address		Menu Type 1__ 2__ 3 ☒ 4__ 5__	
Person in Charge Brittany Creed			
Responsible Person's Email			
Certified Food Handler Kyle Malott	Exp. 04/25/2027		

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
141	C	0	A "mold-like" substance was observed on four potatoes and an onion at prep-table of back kitchen.	Corrected
187	C	0	Cooked chicken wings with date of 2/8 and raw ground beef patties were holding an internal temperature of 46-47 degrees Fahrenheit in the up-right two door reach-in cooler of kitchen. (Ambient temperature of 48.9 degrees Fahrenheit)	Corrected
420	C	0	Employee medicine was stored uncovered in Walgreens reach-in cooler.	Corrected
216	NC	0	Observed soiled wiping cloths on base of pizza reach-in cooler.	Today
310	NC	0	An accumulation of grease was observed on the hood filters.	One Week
417	NC	0	Employee items, including coat, were stored on bustub of dry goods.	Corrected
431	NC	0	An accumulation of grease and food debris was observed on floor and plumbing of fryer station.	Today

Section #	C/NC	R	Narrative	To Be Corrected By
Summary of Violations C <u> 3 </u> NC <u> 4 </u> R <u> 0 </u>				
Received by (name and title printed): Person in charge			Inspected by (name and title printed): YOCELI PALAFOX	
Received by (signature):			Inspected by (signature):	
cc:		cc:		cc: