



**Retail Food Establishment
Inspection Report**

State Form 57480
**INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION**

Release Date: 07/27/2026

Hendricks County Health Department

Telephone (317) 745-9217

No. Risk Factor/Interventions Violations 0

Date: 07/17/2026

Time In 11:37 am

No. Repeat Risk Factor/Intervention Violations 0

Time Out 11:43 am

Establishment As You Wish Catering		Address		City/State /		Zip Code		Telephone	
License/Permit # 1947		Permit Holder Victoria Middlebrook		Purpose of Inspection Routine		Est Type Mobile		Risk Category 3	
Certified Food Manager Victoria Middlebrook		ServSafe		Exp. 07/03/2031					

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															17	IN	Proper disposition of returned, previously served, reconditioned & unsafe food												
1	IN	Person-in-charge present, demonstrates knowledge, and performs duties																											
2	IN	Certified Food Protection Manager																											
Employee Health															Time/Temperature Control for Safety														
3	IN	Management, food employee and conditional employee; knowledge, responsibilities and reporting												18	N/O	Proper cooking time & temperatures													
4	IN	Proper use of restriction and exclusion												19	N/O	Proper reheating procedures for hot holding													
5	IN	Procedures for responding to vomiting and diarrheal events												20	N/A	Proper cooling time and temperature													
														21	IN	Proper hot holding temperatures													
														22	IN	Proper cold holding temperatures													
														23	IN	Proper date marking and disposition													
														24	IN	Time as a Public Health Control; procedures & records													
Good Hygienic Practices															Consumer Advisory														
6	IN	Proper eating, tasting, drinking, or tobacco products use												25	N/A	Consumer advisory provided for raw/undercooked food													
7	IN	No discharge from eyes, nose, and mouth																											
Preventing Contamination by Hands															Highly Susceptible Populations														
8	IN	Hands clean & properly washed												26	N/A	Pasteurized foods used; prohibited foods not offered													
9	IN	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															Food/Color Additives and Toxic Substances														
11	IN	Food obtained from approved source												27	N/A	Food additives: approved & properly used													
12	N/O	Food received at proper temperature												28	IN	Toxic substances properly identified, stored, & used													
13	IN	Food in good condition, safe, & unadulterated																											
14	N/A	Required records available: molluscan shellfish identification, parasite destruction																											
Protection from Contamination															Conformance with Approved Procedures														
15	IN	Food separated and protected												29	N/A	Compliance with variance/specialized process/HACCP													
16	IN	Food-contact surfaces; cleaned & sanitized																											

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		Dane and Victoria Middlebrook		Date:		07/17/2026	
Inspector:		BRIAN PORTWOOD		Follow-up Required:		YES ☐ NO ☒ (Circle one)	



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Hendricks County Health Department
Telephone (317) 745-9217

License/Permit #
1947

Date:
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Establishment
As You Wish Catering

Address

City/State
/

Zip Code

Telephone

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

Food Temperature Control

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

Food Identification

37	IN	Food properly labeled; original container		
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Prevention of Food Contamination

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

Proper Use of Utensils

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

Utensils, Equipment and Vending

47	IN	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
48	IN	Warewashing facilities: installed, maintained, & used; test strips		
49	IN	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	IN	Toilet facilities: properly constructed, supplied, & cleaned		
54	IN	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 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	N/A	Mobile Retail Food Establishment		
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TEMPERATURE OBSERVATIONS

(in degrees Fahrenheit)

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Chicken wings - hot hold under heat lamps	160	Pulled pork - crockpot	155		

OBSERVATIONS AND CORRECTIVE ACTIONS

Item		Complete by Date:
	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 .	
Risk: COS: Repeat:		

Summary of Violations:

P: _____

Pf: _____

Core: _____

Person in Charge Dane and Victoria Middlebrook

Date: 07/17/2026

Inspector: BRIAN PORTWOOD

Follow-up Required:

YES

NO

(Circle one)