



Retail Food Establishment Inspection Report

State Form 57480
INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

Release Date:

Hendricks County Health Department

Telephone (317) 745-9217

No. Risk Factor/Interventions Violations

0

Date: 01/21/2026

Time In 4:00 pm

No. Repeat Risk Factor/Intervention Violations

0

Time Out 4:14 pm

Establishment Chefs in Motion (To Go Meals)		Address		City/State /		Zip Code		Telephone	
License/Permit # 2601		Permit Holder Jason Anderson		Purpose of Inspection Routine		Est Type Mobile		Risk Category 1	
Certified Food Manager Jason Anderson		ServSafe		Exp. 03/03/2029					

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			17	IN	Proper disposition of returned, previously served, reconditioned & unsafe food				
2	N/A	Certified Food Protection Manager			Time/Temperature Control for Safety						
Employee Health											
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/O	Proper cooling time and temperature				
Good Hygienic Practices											
6	N/O	Proper eating, tasting, drinking, or tobacco products use			21	N/O	Proper hot holding temperatures				
7	N/O	No discharge from eyes, nose, and mouth			22	IN	Proper cold holding temperatures				
Preventing Contamination by Hands											
8	N/O	Hands clean & properly washed			23	IN	Proper date marking and disposition				
9	N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			24	N/A	Time as a Public Health Control; procedures & records				
10		Adequate handwashing sinks properly supplied and accessible			Consumer Advisory						
Approved Source											
11	IN	Food obtained from approved source			25	N/A	Consumer advisory provided for raw/undercooked food				
12	N/O	Food received at proper temperature			Highly Susceptible Populations						
13	IN	Food in good condition, safe, & unadulterated			26	N/A	Pasteurized foods used; prohibited foods not offered				
14	N/A	Required records available: molluscan shellfish identification, parasite destruction			Food/Color Additives and Toxic Substances						
Protection from Contamination											
15	N/A	Food separated and protected			27	N/A	Food additives: approved & properly used				
16	N/A	Food-contact surfaces; cleaned & sanitized			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	Jason Anderson	Date:	01/21/2026
Inspector:	LISA CHANDLER	Follow-up Required:	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> (Circle one)



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Telephone (317) 745-9217

License/Permit #
2601

Date:
01/21/2026

Establishment Chefs in Motion (To Go Meals)	Address	City/State /	Zip Code	Telephone
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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	IN	Water & ice from approved source		
32	N/A	Variance obtained for specialized processing methods		

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		

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		

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		

Food Identification

37	IN	Food properly labeled; original container		
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Physical Facilities

50	N/O	Hot & cold water available; adequate pressure		
51		Plumbing installed; proper backflow devices		
52		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		Adequate ventilation & lighting; designated areas used		

Prevention of Food Contamination

38	N/O	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		

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		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

No violations noted at time of inspection.

Person in Charge Jason Anderson

Date: 01/21/2026

Inspector: LISA CHANDLER

Follow-up Required: YES NO (Circle one)