





# Retail Food Establishment Inspection Report

State Form 57480

INDIANA DEPARTMENT OF HEALTH  
FOOD PROTECTION DIVISION

Hendricks County Health Department  
Telephone (317) 745-9217

License/Permit #  
2693

Date:  
08/29/2026

Establishment  
Fruit Monsters Fruit Bowls

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/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 | IN | Food properly labeled; original container |  |  |
|----|----|-------------------------------------------|--|--|

### Prevention of Food Contamination

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

## 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:<br>COS:<br>Repeat: |                                                                                                                                                                                                                                                                                                                                 |                   |

Summary of Violations:

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

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

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

### Published Comment

@Bounce Bash, Avon Town Hall Park

Person in Charge Sarah Modesto

Date: 08/29/2026

Inspector: LISA CHANDLER

Follow-up Required:

YES

**NO**

(Circle one)