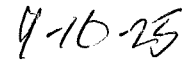


RETAIL FOOD ESTABLISHMENT INSPECTION REPORT State Form 57480 (R2 / 4-25) INDIANA DEPARTMENT OF HEALTH FOOD PROTECTION DIVISION		Release Date 9-20-25		Date 9-10-26	
		No. of Risk Factor/Intervention Violations 3		Time In 3:00	
		No. of Repeat Risk Factor/Intervention Violations 2		Time Out 4:00	
Establishment HOMETOWN IGA #449	Address 30 Hawthorne Dr.	City/State Noblesville, IN	Zip Code 46048	Telephone 812-988-4546	
License/Permit # N/A	Permit Holder Houder's North Foods	Purpose of Inspection Follow-up	Est. Type Full	Risk Category 3	
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 observed 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		Compliance Status		Compliance Status	
Supervision		Time/Temperature Control for Safety			
1 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Person in charge present, demonstrates knowledge, and performs duties	17 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Proper disposition of returned, previously served, reconditioned & unsafe food		
2 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Certified Food Protection Manager	18 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Proper cooking time & temperatures		
Employee Health		19 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Proper reheating procedures for hot holding		
3 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Management, food employee and conditional employee; knowledge, responsibilities and reporting	20 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Proper cooling time and temperature		
4 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Proper use of restriction and exclusion	21 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Proper hot holding temperatures		
5 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Procedures for responding to vomiting and diarrheal events	22 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Proper cold holding temperatures		
Good Hygienic Practices		23 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Proper date marking and disposition		
6 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Proper eating, tasting, drinking, or tobacco products use	24 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Time as a Public Health Control; procedures & records		
7 ☒ IN ☐ OUT ☐ N/A ☐ N/O	No discharge from eyes, nose, and mouth	Consumer Advisory			
Preventing Contamination by Hands		25 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Consumer advisory provided for raw/undercooked food		
8 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Hands clean & properly washed	Highly Susceptible Populations			
9 ☒ IN ☐ OUT ☐ N/A ☐ N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed	26 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Pasteurized foods used; prohibited foods not offered		
10 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Adequate handwashing sinks properly supplied and accessible	Food/Color Additives and Toxic Substances			
Approved Source		27 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Food additives: approved & properly used		
11 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Food obtained from approved source	28 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Toxic substances properly identified, stored, & used		
12 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Food received at proper temperature	Conformance with Approved Procedures			
13 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Food in good condition, safe, & unadulterated	29 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Compliance with variance/specialized process/HACCP		
14 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Required records available: molluscan shellfish identification, parasite destruction	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.			
Protection from Contamination					
15 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Food separated and protected				
16 ☒ IN ☐ OUT ☐ N/A ☐ N/O	Food-contact surfaces; cleaned & sanitized				
GOOD RETAIL PRACTICES					
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.					
Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation					
Compliance Status		Compliance Status		Compliance Status	
Safe Food and Water		Proper Use of Utensils			
30	Pasteurized eggs used where required	43	In-use utensils: properly stored		
31	Water & ice from approved source	44	Utensils, equipment & linens: properly stored, dried, & handled		
32	Variance obtained for specialized processing methods	45	Single-use/single-service articles: properly stored & used		
Food Temperature Control		46	Gloves used properly		
33	Proper cooling methods used; adequate equipment for temperature control	Utensils, Equipment and Vending			
34	Plant food properly cooked for hot holding	47	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
35	Approved thawing methods used	48	Warewashing facilities: installed, maintained, & used; test strips		
36	Thermometers provided & accurate	49 ☒ X	Non-food contact surfaces clean		☒ X
Food Identification		Physical Facilities			
37	Food properly labeled; original container	50	Hot & cold water available; adequate pressure		
Prevention of Food Contamination		51	Plumbing installed; proper backflow devices		
38	Insects, rodents, & animals not present	52	Sewage & wastewater properly disposed		
39	Contamination prevented during food preparation, storage & display	53	Toilet facilities: properly constructed, supplied, & cleaned		
40	Personal cleanliness	54	Garbage & refuse properly disposed; facilities maintained		
41	Wiping cloths: properly used & stored	55	Physical facilities installed, maintained, & clean		
42	Washing fruits & vegetables	56	Adequate ventilation & lighting; designated areas used		
Person In Charge (Signature) Ian McDonald		Date: 9/10			
Inspector (Signature) [Signature]		Follow-up: YES NO (Circle one) Follow-up Date:			



Telephone
812-988-4546

Voluntarily
Disclosed

7-10-25

9-10-25



RETAIL FOOD ESTABLISHMENT INSPECTION REPORT
State Form 57480 (R2 / 4-25)
INDIANA DEPARTMENT OF HEALTH
FOOD PROTECTION DIVISION

License/Permit #

Date

Establishment

HOMETOWN 16A

Address

30 Hawthorne Drive

City/State

Normal IN

Zip Code

47448

Telephone

312-988-8545

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number

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:

Published Comment

all walk freezers at good temps on outside wall
produce area is great - all produce fresh & clean
cream cheese & egg cookers that had issues are all good now
Baby formula out-dated to be discarded
nap buckets need to be cleaned

Person In Charge (Signature)

Larry McDonald

[Signature]

Date: 9/18/25

Inspector (Signature)

[Signature]

Date: 9/18/25