



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

Release Date	10 Days		Date 9/3/25
No. of Risk Factor/Intervention Violations			Time In
No. of Repeat Risk Factor/Intervention Violations			Time Out

Establishment Boen Center 205-180	Address 236 W Randolph	City/State Upland IN	Zip Code 46989	Telephone 574-544-1095
License/Permit #	Permit Holder AVT Food Systems	Purpose of Inspection Routine	Est. Type 4	Risk Category 4

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		COS	R	Compliance Status	COS	R
Supervision						
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						
3 IN OUT N/A N/O	Management, food employee and conditional employee; knowledge, responsibilities and reporting			19 IN OUT N/A N/O	Proper reheating procedures for hot holding	
4 IN OUT N/A N/O	Proper use of restriction and exclusion			20 IN OUT N/A N/O	Proper cooling time and temperature	
5 IN OUT N/A N/O	Procedures for responding to vomiting and diarrheal events			21 IN OUT N/A N/O	Proper hot holding temperatures	
Good Hygienic Practices						
6 IN OUT N/A N/O	Proper eating, tasting, drinking, or tobacco products use			22 IN OUT N/A N/O	Proper cold holding temperatures	
7 IN OUT N/A N/O	No discharge from eyes, nose, and mouth			23 IN OUT N/A N/O	Proper date marking and disposition	
Preventing Contamination by Hands						
8 IN OUT N/A N/O	Hands clean & properly washed			24 IN OUT N/A N/O	Time as a Public Health Control; procedures & records	
9 IN OUT N/A N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			Consumer Advisory		
10 IN OUT N/A N/O	Adequate handwashing sinks properly supplied and accessible			25 IN OUT N/A N/O	Consumer advisory provided for raw/undercooked food	
Approved Source						
11 IN OUT N/A N/O	Food obtained from approved source			Highly Susceptible Populations		
12 IN OUT N/A N/O	Food received at proper temperature			26 IN OUT N/A N/O	Pasteurized foods used; prohibited foods not offered	
13 IN OUT N/A N/O	Food in good condition, safe, & unadulterated			27 IN OUT N/A N/O	Food additives: approved & properly used	
14 IN OUT N/A N/O	Required records available: molluscan shellfish identification, parasite destruction			28 IN OUT N/A N/O	Toxic substances properly identified, stored, & used	
Protection from Contamination						
15 IN OUT N/A N/O	Food separated and protected			Conformance with Approved Procedures		
16 IN OUT N/A N/O	Food-contact surfaces; cleaned & sanitized			29 IN OUT N/A N/O	Compliance with variance/specialized process/HACCP	
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		COS	R	Compliance Status	COS	R
Safe Food and Water						
30	Pasteurized eggs used where required			Proper Use of Utensils		
31	Water & ice from approved source			43	In-use utensils: properly stored	
32	Variance obtained for specialized processing methods			44	Utensils, equipment & linens: properly stored, dried, & handled	
Food Temperature Control				45	Single-use/single-service articles: properly stored & used	
33	Proper cooling methods used; adequate equipment for temperature control			46	Gloves used properly	
34	Plant food properly cooked for hot holding			Utensils, Equipment and Vending		
35	Approved thawing methods used			47	Food & non-food contact surfaces cleanable, properly designed, constructed, & used	
36	Thermometers provided & accurate			48	Warewashing facilities: installed, maintained, & used; test strips	
Food Identification				49	Non-food contact surfaces clean	
37	Food properly labeled; original container			Physical Facilities		
Prevention of Food Contamination				50	Hot & cold water available; adequate pressure	
38	Insects, rodents, & animals not present			51	Plumbing installed; proper backflow devices	
39	Contamination prevented during food preparation, storage & display			52	Sewage & wastewater properly disposed	
40	Personal cleanliness			53	Toilet facilities: properly constructed, supplied, & cleaned	
41	Wiping cloths: properly used & stored			54	Garbage & refuse properly disposed; facilities maintained	
42	Washing fruits & vegetables			55	Physical facilities installed, maintained, & clean	
Person In Charge (Signature)				56	Adequate ventilation & lighting; designated areas used	
Inspector (Signature)						
Follow-up: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> (Circle one)				Follow-up Date: 9/3/25		

Published Comment

Person In Charge (Signature)

Inspector (Signature)

Date:

Date: 9/3/25