

# Retail Food Inspection Report


Floyd County Health Department  
Telephone (812) 948-4726

<b>Establishment Name</b> HAZELWOOD MIDDLE SCHOOL	<b>Telephone Number</b> Est 812-542-8502 Own 812-542-4703	<b>Date of Inspection</b> 10/20/2020	<b>ID#</b>
<b>Address</b> 1021 HAZELWOOD AVE, NEW ALBANY IN 47150	<b>Purpose</b> <input checked="" type="checkbox"/> <b>Routine</b> <input type="checkbox"/> <b>Follow-up</b> <input type="checkbox"/> <b>Complaint</b> <input type="checkbox"/> <b>Pre-Operational</b> <input type="checkbox"/> <b>Temporary</b> <input type="checkbox"/> <b>HACCP</b> <input type="checkbox"/> <b>Other (list)</b>	<b>Follow Up</b>	<b>Released</b> 10/30/2020
<b>Owner</b> NAFCS FOOD & NUTRITION SERVICES		<b>Menu Type</b> 1 __ 2 __ 3 <u>X</u> 4 __ 5 __	
<b>Owner's Address</b> 2801 GRANTLINE RD NEW ALABNY, IN 47150-			
<b>Person in Charge</b> MARA OLIVER			
<b>Responsible Person's Email</b> MEOLIVER@NAFCS.ORG			
<b>Certified Food Handler</b> MARA OLIVER			

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"  
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected

**Summary of Violations**      C \_\_\_\_      NC \_\_\_\_      R \_\_\_\_

Received by (name and title printed): MARA OLIVER	Inspected by (name and title printed): A.J. Ingram CHIEF FOOD SPECIALIST
Received by (signature):	Inspected by (signature): 
cc:	cc: