Retail Food Establishment Inspection Report

Floyd County Health Department
Telephone:812-948-4726
X6060

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name: Best Western Plus	Telephone Number: 812 945 2771	Date of Inspection (mm/dd/yr): 4/10/2019	PERMIT #: 18-30
Establishment Address (number and street, city, state, zip code): 411 W. Spring St. New Albany, IN 47150			
Owner: NA Hospitality, LLC	Purpose: (1. Routine) 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Follow-up: YES	Release Date: Today
Owner's Address:		Summary of Violations: C 2 NC 4 R ⊘	
Person in Charge: Jani Mazza			
Responsible Person's E-mail: Jani.Mazza@ghs-hotels.com		Menu Type *(See back of page)* 1 [redacted] 2 X 3 4 5	
Certified Food Manager: exempt - continental breakfasts only			

• 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 NARRATIVE BELOW AS "R"

Section#	C/NC	R	Narrative	To Be Corrected By
118	C		Observed kitchen staff unable to answer basic requests:	Retrain staff
			1) replace empty handsink soap	
			2) test sanitizer / locate test strips	
			3) also, new staff member handling cellphone in prep during the entirety of inspection	
438	C		Observed unlabeled spray bottle in warewash area	Today
239	NC		Observed (2) coffee urns stored on floor under 3-comp sink	Today
256	NC		Observed thermometer missing in serving line cooler	Today
340	NC		Observed hand soap unavailable at kitchen handsink	Today
291	NC		Observed test strips unavailable	1 week
		-	E food Handlers	

Received by (name and title printed): Jani Mazza	Inspected by (name and title printed): A.J. Ingram (EHS)
Received by (signature): Jani Mazza	Inspected by (signature): aj
cc:	cc: / cc: