Retail Food Establishment Inspection Report

Floyd County Health Department
Telephone:812-948-4726
XL060

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: Flippin Pancakes	Telephone Number: 812 786 6524	Date of Inspection (mm/dd/yr): 1/6/20	PERMIT #: 19-108
Establishment Address (number and street, city, state, zip code): 4320 Charlestown Rd New Albany, IN 47150			
Owner: Shannon Reardon	Purpose: 1. Routine	Follow-up: No	Release Date: 10 days
Owner's Address: 8002 Hidden River Trail Charlestown, IN 47111	2. Follow-up (circled)	Summary of Violations:	
Person in Charge: Shannon Reardon	3. Complaint	C ~~0~~ NC ~~0~~ R ~~0~~	
Responsible Person's E-mail:	4. Pre-Operational		
	5. Temporary	Menu Type *(See back of page)*	
Certified Food Manager: Shannon Reardon (6/17/22)	6. HACCP		
	7. Other (list)	1 ___ 2 ___ 3 X 4 ___ 5 ___	

• 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
			No violations. All corrections made.	

Received by (name and ~~title~~ printed): Shannon Reardon	Inspected by (name and title printed): A.J. Ingram (EHS)
Received by (signature): Shannon Reardon	Inspected by (signature): aj
cc:	cc:
cc:	