Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name ALDI #37							elephone Number 812-920-4249	Date of Inspection	ID#	
Address 3118 GRANT LINE ROAD, NEW ALBANY IN 47150						Own (317) 885-0808		09/27/2023		
Owner							urpose	Follow Up	Released	
ALDI (INDIANA) L.P.							X Routine		10/07/2023	
Owner's Address 486 EAST STOP 18 ROAD GREENWOOD, IN 46143						_	Follow-up Complaint			
Person in Charge HOLLY CAUDILL						-	Pre-Operational			
Responsible Person's Email						7 -	Temporary	Menu Type		
444HCAUDILL@GMAIL.COM						_ -	HACCP	1 <u>X</u> 2 <u> 3 </u>	4 _ 5 _	
Certified Food Handler						-	Other (list)			
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				
177		X	X	Observed packages of food on the floor of the walk in freezer. TODAY						
218		Χ		Observed ice build-up in the walk in freezer. Observed a loud noise coming 3 WEEKS						
200		V		from the lunch meat cooler and standing water in the cool air outlet.						
309 431	X Observed non-functional ventilation in the X X Observed trash and food debris on the floor									
				ATMOSPHERI CONSTANT PI FAUCET OR C	C VACUUM BREAKE RESSURE. FCHD REC ONNECTING THE DIS	R ON TH OMMEN SPENSE	LINE TO A CHEMICAL HE FAUCET IS NOT DE HIDS INSTALLING A BL R TO AN INDEPENDEN N USES IN THE MEAN	SIGNED FOR EEDER VALVE TO T VT WATER LINE. TH		
Summary of Violations C 0 NC 4 R 2						4				
Received by (name and title printed): HOLLY CAUDILL							Inspected by (name and title printed): John Klem EHS			
Received by (signature):						Insp	Inspected by (signature): The state of the			
cc:					cc:			cc:		