

Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name ASHLEIGH'S TASTE OF SOULFOOD LLC	Telephone Number Est Own	Date of Inspection 10/28/2023	ID#
Address ,			
Owner	Purpose <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input checked="" type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 11/04/2023
Owner's Address ,		Menu Type 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
Person in Charge ASHLEIGH YOUNGBLOOD			
Responsible Person's Email AYOUNGBLOOD0003@GMAIL.COM			
Certified Food Handler			

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 COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
NO VIOLATIONS OBSERVED AT TIME OF INSPECTION					

Summary of Violations C NC R **0**

Received by (name and title printed): ASHLEIGH YOUNGBLOOD	Inspected by (name and title printed): Dawn Stackhouse ENVIRONMENTAL SUPERVISOR
Received by (signature):	Inspected by (signature): <i>Dawn Stackhouse</i>
cc:	cc: