

Retail Food Inspection Report


Floyd County Health Department
Telephone (812) 948-4726

Establishment Name JIMMY JOHN'S #1139	Telephone Number Est 812-725-8580 Own 617-519-3355	Date of Inspection 10/27/2023	ID#
Address 3001 CHARLESTOWN CROSSING WAY, NEW ALBANY	Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 11/06/2023
Owner 83 SUBS, LLC/ JAY PAGE		Menu Type 1 _ 2 <u>X</u> 3 _ 4 _ 5 _	
Owner's Address 5308 ROCK RIDGE DR LOUISVILLE, KY 40241-			
Person in Charge AMAYA RUSSELL			
Responsible Person's Email ARUSSELL@83SUBS.COM			
Certified Food Handler HEATHER RAINS			

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
390	X	X		Observed a missing door on the dumpster.	2 WEEKS
394		X		Observed an open garbage bag and spilt food on the ground around the dumpster.	TODAY
<p>OBSERVED THE MOP SINK FAUCET HAD LINE TO A CHEMICAL DISPENSER. THE ATMOSPHERIC VACUUM BREAKER ON THE FAUCET IS NOT DESIGNED FOR CONSTANT PRESSURE. FCHD RECOMMENDS INSTALLING A BLEEDER VALVE TO THE FAUCET OR CONNECTING THE DISPENSER TO AN INDEPENDENT WATER LINE. THE HOSES MAY ALSO BE DISCONNECTED BETWEEN USES IN THE MEANTIME.</p>					

Summary of Violations C 0 NC 2 R 1 **2**

Received by (name and title printed): AMAYA RUSSELL	Inspected by (name and title printed): John Klem EHS
Received by (signature):	Inspected by (signature): 
cc:	cc: