Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name EAGLE NUTRITION 22 Address 502 VINCENNES ST, NEW ALBANY IN 47150 Owner ALEJANDRA MENDEZ Owner's Address 1343 BEELER ST NEW ALBANY, IN 47150 Person in Charge IRIS ANDRES						Telephone Number Est 502-345-1137 Own 502-345-1137 Purpose X Routine Follow-up Complaint Pre-Operational	Date of ID# Inspection 11/06/2024 Follow Up Released 11/06/2024 Menu Type		
Responsible Person's Email AMC_AGUILAS@HOTMAIL.COM						——Temporary HACCP	1 <u>X</u> 2 <u> 3 </u>	4 5	
Certified Food Handler N/A						Other (list)			
	IDENTIFIED IN THE CHECK ED FROM PREVIOUS INSPE				ONS" AND IN THE N	ARRAIVE COLUMN MARKED AS "R"	1		
Section #	ction # C NC R Narrative						To Be Corrected		
Summary of V Received by (na	ame and title print	_	0 NC	<u>1</u> R _		nspected by (name and title	fe printed):		
IRIS ANDRES						Chomas Snider CFS			
Received by (signature):					I	Inspected by (signature):			
cc:				cc:			cc:		