Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name FLOYD COUNTY BREWING COMPANY Address 129 W MAIN ST, NEW ALBANY IN 47150							Telephone Number 470-588-2337 n (502) 724-3202	Date of Inspection 07/18/2024	ID#	
Owner						+	Purpose	Follow Up	Released	
BRIAN HAMPTON							X Routine		07/18/2024	
Owner's Address 7456 SADDLEBROOK CT GREENVILLE, IN 47124-							Follow-up Complaint			
Person in Charge LEWIS LEGG							Pre-Operational			
Responsible Person's Email LEGGLEWIS20@GMAIL.COM							Temporary HACCP	Menu Type 1 2 3 4 _X 5		
Certified Food Handler LEWIS LEGG MORGAN BEATTY							Other (list)			
				AND NARRATIVE COLUMN		ND IN THE N	ARRAIVE COLUMN MARKED AS "R"			
Section #	C	NC	R	Narrative				То Ве С	orrected	
192	Х			Observed a container of chili dated 7-9. 3 days expired. TCS foods (time discarded temperature control) should be discarded after 7 days. The day the food is made is day 1.						
295		Χ	Χ	Observed a build	dup of food debris aro	2 days				
438	Х			Observed a spra	y bottle without a labe	today				
218		X		the blade. (clean	can opener in need of today) Repair or repl ompartment sink. Rep	d 2 weeks				
431		Χ			op area in need of clea	2 days	2 days			
291		Χ		Observed no chl	orine test strips for the	2 days				
294	Х			Observed chlorine sanitizer not being dispensed at the dish machine. Sanitzer must be added manually each time it is ran.						
297		X			film in the coke machi	today	ž i i i i i i i i i i i i i i i i i i i			
187	Х			was whipped cre	ass front cooler in the eam in it, it must stay	1 day				
310		Χ			uildup on the exhaust	5 days				
413		Х		Observed the ba	ck door of the kitchen	left ope	en and 3 flys in the kitchen.	retrain s	taff	
Summary of Violations C 4 NC 7 R 1								11		
Received by (name and title printed): BRIAN HAMPTON							Inspected by (name and title printed): Thomas Snider CFS			
Received by (signature):							Inspected by (signature):			
cc:					cc:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	cc:		