Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
HOLIDAY INN EXPRESS (NKAC LLC)	Est		
Address 506 W. SPRING ST, NEW ALBANY IN 47150	Own 732-429-3273	04/12/2024	

Owner	Purpose	Follow Up	Released
SAMIR SHAH	X Routine		04/12/2024
Owner's Address 2905 FERN VALLEY RD LOUISVILLE, KY 40213	___ Follow-up		
Person in Charge DANIELLE THOMAS	___ Complaint		
Responsible Person's Email ATHOMAS@LTSHOSPITALITY.COM	___ Pre-Operational		
Certified Food Handler N/A - 3Y CFH MICHELLE FOWLE	___ Temporary	**Menu Type**	
	___ HACCP	1 __ 2 X 3 __ 4 __ 5 __	
	___ 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
438	X			Observed unlabeled chemical bottles. CORRECTION : Unlabeled bottled were either labeled or discarded.	CORRECTED
449	X			Observed open rat bait station on the exterior of the property.	10 DAYS
430		X	X	Observed damaged and missing floor tiles in the mop sink and laundry room.	2 WEEKS

Summary of Violations C 2 NC 1 R 1 3

Received by (name and title printed):	Inspected by (name and title printed):
AMBER THOMAS	John Klem EHS
Received by (signature):	Inspected by (signature): John Klem

cc:	cc:	cc: