

# Retail Food Inspection Report


Floyd County Health Department  
Telephone (812) 948-4726

<b>Establishment Name</b> HOPE SOUTHERN INDIANA	<b>Telephone Number</b> Est 812-948-9248 Own 812-948-9248	<b>Date of Inspection</b> 01/29/2024	<b>ID#</b>
<b>Address</b> 1200 BONO RD, NEW ALBANY IN 47150	<b>Purpose</b> <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)	<b>Follow Up</b>	<b>Released</b>
<b>Owner</b> HOPE SOUTHERN INDIANA		<b>Menu Type</b> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
<b>Owner's Address</b> 1200 BONO RD NEW ALBANY, IN 47150-			
<b>Person in Charge</b> ANGELLA GRAF			
<b>Responsible Person's Email</b> AGRAF@HOPESI.ORG			
<b>Certified Food Handler</b>			

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
218		X	X	Observed ice and frosting in walk-in freezer. Person-in-charge stated there was repair made since the previous inspection but it did not fix the issue. They have moved storage racks away of area of ice to prevent contamination. Freezer may need to be periodically defrosted.	3 weeks

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

Received by (name and title printed): ANGELA GRAF	Inspected by (name and title printed): Thomas Snider CFS	
Received by (signature):	Inspected by (signature): 	
cc:	cc:	cc: