Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name STATE ST CCC, LLC (PARLOUR)						Telephone Number Est 812-920-6400	Date of Inspection	ID#	
Address 225 STATE ST, NEW ALBANY IN 47150						Own 812-207-5334	04/25/2024		
Owner DON ROBINSON						Purpose X Routine	Follow Up 05/28/2024	Released 04/25/2024	
Owner's Address 2325 GREEN VALLEY ROAD NEW ALBANY, IN 47150						Follow-up Complaint	Follow-upComplaintPre-Operational		
Person in Charge ISAIAH BROWN									
Responsible Person's Email PARLOUR1003@CRAFTCULTURECONCEPTS.COM						Temporary HACCP			
Certified Food Handler ALEXIS HOWERY						Other (list)			
CRITICAL ITEMS ARE IDE VIOLATION(S) REPEATED						ND IN THE NARRAIVE COLUMN MARKED AS "R"			
Section #	# C NC R Narrative							To Be Corrected	
322 218 284 324 347 351 382	X	X X X X X	X X X	Observed nonfu Observed chemi Observed drippi Observed hand s	ng faucet on the down sink on the 2nd floor s ed trashcans missing f	ood. ng temperature at 80F.	10 DAY 10 DAY 3 WEER 3 WEER 2. 10 DAY 10 DAY	S S S S S	
Summary of Violations C 1 NC 6 R 3						7			
Received by (nan		itle prii	nted):			Inspected by (name and title printed): John Klem			
Received by (signature):						Inspected by (signature):	Inspected by (signature): I have the second		
ce:					cc:		cc:		