Floyd County Health Department Telephone (812) 948-4726

| Establishment Name PENN STATION EAST COAST SUBS | | | | | | Telephone Number (812) 941-9600 | Date of Inspection | ID# | |
|--|---|----|---|---|--|--|-------------------------|----------------------------|--|
| Address 2154 NEW ALBANY PLAZA, NEW ALBANY IN 47150 | | | | | | 502-210-8629 | 11/18/2024 | | |
| Owner PENN, IN LLC | | | | | | Purpose Routine | Follow Up 12/09/2024 | Released 11/18/2024 | |
| Owner's Address 12407 REHL RD LOUISVILLE, KY 40299 | | | | | | X Follow-up Complaint | | | |
| Person in Charge MEGAN WILLIAMS | | | | | | Pre-Operational | | | |
| Responsible Person's Email 72@PENNSUBS.COM | | | | | | Temporary Menu Type HACCP 1 2 3 _X 4 5 | | | |
| Certified Food Handler MEGAN WILLIAMS | | | | | | 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 # | С | NC | R | Narrative | | | To Be C | orrected | |
| 441 | Х | | | Observed 2 Dichlorvos, Hot Shot brand, product is not approved for Retail Food a | | | discarde | 1 | |
| 187 | Х | | Х | customers. Notify maintenance.12-9-24Observed the fry prep cooler's thermometer reading 50F. Barbecue sauce12-9-24that was in the cooler over night was measured at 52F. The prepped fries12-9-24and deli items were moved to a colder cooler.12-9-24 | | | | | |
| 393 | | х | x | Observed the dumpster missing a plug. | oler. | | 11-26-24 | L | |
| 430 | | X | | Observed 2 missing floor tiles near the fryers. | | | 12-9-24 | | |
| 218 | | Х | | Observed a damaged gasket on the fry pr | 12-9-24 | | | | |
| 431 | | Х | Х | Observed the following areas in need of cabinet, syrup spill under syrup boxes. | rved the following areas in need of cleaning; fries under handwashing net, syrup spill under syrup boxes. | | | | |
| | | | | A FOLLOW-UP INSPECTION AND SE | ECON | D FOLLOW-UP FEE IS RI | EQUIRED. | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Summary of Violations C <u>2</u> NC <u>4</u> R <u>5</u> | | | | | | | 6 | | |
| Received by (name and title printed): | | | | | | nspected by (name and title | printed): | | |
| MEGAN WILLIAMS | | | | | | Thomas Snider CFS | | | |
| Received by (signature): | | | | | | Inspected by (signature): | | | |
| cc: | | | | cc: | | | cc: | | |