Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name PENN STATION EAST COAST SUBS Address 2154 NEW ALBANY PLAZA, NEW ALBANY IN 47150							Telephone Number (812) 941-9600 502-210-8629	Date of Inspection 03/12/2024	ID#	
Owner PENN, IN LLC							Purpose X Routine	Follow Up	Released 03/12/2024	
Owner's Address 12407 REHL RD LOUISVILLE, KY 40299 Person in Charge						_	Follow-upComplaint Pre-Operational			
TONYA HAUSBERGER Responsible Person's Email 72@PENNSUBS.COM Certified Food Handler							Temporary HACCP Other (list)	Menu Type 1 2 3 _X	Menu Type 1 2 3 _X 4 5	
	IDENTIFIED IN T			AND NARRATIVE COLUMN NS ARE DENOTED IN THE		ND IN THE NA	RRAIVE COLUMN MARKED AS "R"			
Section #	C	NC	R	Narrative		To Be Corrected				
382 393 431	X	×××		food prep line. At the injured finge unable to wash t prep. All bandag Observed all dur	A glove was worn with r. Hands must be was heir hands because of ges must be covered be mpsters on bare soil. ster without a drain pl	h the fing shed. COI f injury m y a glove	ed in gauze, working on the cut out to accommodate RRECTION: Employees ust be restricted from food in food prep areas.		<u> </u>	
Summary of V Received by (n					3 R 2	In	spected by (name and title	printed):		
MEGAN WILLIAMS							John Klem EHS			
Received by (signature):						In	Inspected by (signature): The Herm			
cc:					cc:			cc:		