Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
FALCONS BURGER, LLC DBA RALLY'S 4302	Est 678-909-2362	05/30/2024	
Address 2350 STATE ST, NEW ALBANY IN 47150	Own 678-909-2362		

Owner	Purpose	Follow Up	Released
SHAMSUDDIN CHARANIA	X Routine		05/30/2024
Owner's Address 1995 N. PARK PLACE SUITE 430 ATLANTA, GA 30006	___ Follow-up		
Person in Charge GERON BROWN	___ Complaint		
	___ Pre-Operational		
Responsible Person's Email RALLYS4302@THEFALCONSGROUP.COM	___ Temporary	**Menu Type**	
	___ HACCP	1 __ 2 __ 3 X 4 __ 5 __	
Certified Food Handler STACY JOHNSON	___ 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
334	X			Observed hose on mop sink extending blew lip of sink removing the air gap. Correction: Remove hose or trim hose so that there is an air gap of at least twice the diameter of the water supply.	3 days
218		X	X	Observed ice build-up in walk in freezer. Observed prep cooler not functioning. Person in charge (PIC) stated that there was a ticket in for repairs. Correction: Repair equipment.	2 weeks
324		X	X	Observed public restroom to be out of order. PIC stated that it was closed because of plumbing issues. Correction Repair plumbing. Observed safety anchor for grill present but not attached. Correction: Attached safety anchor.	2 weeks
431		X	X	Observed accumulation of cigarette butts in the storm drain by the back door. Correction: Clean up debris.	1 week

Summary of Violations C 1 NC 3 R 3 4

Received by (name and title printed):	Inspected by (name and title printed):
STACY JOHNSON	Carrie Fischer EHS
Received by (signature):	Inspected by (signature):

cc:	cc:	cc: