

Retail Food Inspection Report


Floyd County Health Department
Telephone (812) 948-4726

| | | | |
|--|--|--|-------------------------------|
| Establishment Name ST. MARKS UNITED CHURCH OF CHRIST | Telephone Number Est 812-945-2569 Own 812-945-2569 | Date of Inspection 06/22/2024 | ID# |
| Address 222 E. SPRING STREET, NEW ALBANY IN 47150 | Purpose <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) | Follow Up | Released 07/01/2024 |
| Owner ST. MARKS UNITED CHURCH OF CHRIST | | Menu Type 1 _ 2 _ 3 <u>X</u> 4 _ 5 _ | |
| Owner's Address 222 E. SPRING STREET NEW ALBANY, IN 47150- | | | |
| Person in Charge | | | |
| Responsible Person's Email OFFICE@STMARKSUCC.ORG | | | |
| Certified Food Handler KATRIN OLEMACHER | | | |

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 |
|-----------|---|----|---|---------------|-----------------|
| | | | | No violations | |

Summary of Violations C NC R **0**

| | |
|---|---|
| Received by (name and title printed): PATTY HIGGINBOTHAM | Inspected by (name and title printed): Thomas Snider CFS |
| Received by (signature): | Inspected by (signature):  |
| cc: | cc: |