Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
TUMBLEWEED	Est 812-923-6011	10/03/2024	
Address 718 HIGHLANDER POINT, FLOYDS KNOBS IN 47119	Own 502-618-8357		

Owner	Purpose	Follow Up	Released
MATT HIGGINS	X Routine		
Owner's Address 2301 RIVER ROAD SUITE 200 LOUISVILLE, KY 40206	___Follow-up		
Person in Charge DANA MCGREW	___Complaint		
Responsible Person's Email HIGHLANDERPOINT@TUMBLEWEEDINC.NET	___Pre-Operational		
Certified Food Handler ERICA BIFFEL JOEY HODGES	___Temporary	**Menu Type**	
	___HACCP	1 __ 2 __ 3 X 4 __ 5 __	
	___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
199		X		Observed fish thawing in vacuum sealed bags. This increase the risk of Boutulism. Bags should be opened to thaw. Read and follow instruction on packaging.	corrected
324	X			Observed the AVB backflow device on the mop sink leaking. Repair or replace.	1 week
295		X		Observed metal shavings and food debris on the can opener.	today
419	X			Observed Mineral Oil laxative on a shelf in the back food prep station.	corrected
431		X		Observed the floors under the fryer and under the front prep line to be in need of cleaning.	3 days
399		X		Observed newly poured concrete under the bar's 3 compartment that was not smooth and easily cleabable. This area should be tiled or sealed.	2 weeks
309		X		Observed the exhaust fans in the men's and woman's restroom not running.	2 weeks
295		X		Observed rust forming on a wire rack in the bar's prep cooler. Rust should be removed and wire repainted, reconditioned or replaced.	1 week

THE MOP SINK FAUCETS SHOULD BE TURNED OFF WHEN NOT IN USE AND PRESSURE RELEASED FROM HOSES. THIS PROTECTS THE AVB BACKFLOW VALVE.

Summary of Violations C 2 NC 6 R 0 8

Received by (name and title printed):	Inspected by (name and title printed):
ERICA BIFFEL NOE	Thomas Snider CFS
Received by (signature):	Inspected by (signature):

cc:	cc:	cc: