## **Retail Food Inspection Report**

Floyd County Health Department Telephone (812) 948-4726

Establishment Name							Telephone Number	Date of	ID#
WHITE CASTLE #14							812-945-7864	Inspection	
Address 1701 E. SPRING ST, NEW ALBANY IN 47150						Own	502-361-2317	07/31/2024	
Owner							Purpose	Follow Up	Released
WHITE CASTLE							X Routine		07/31/2024
Owner's Address 4420 KILN CT LOUISVILLE, KY 40218							Follow-up		
Person in Charge KILEY CARDWELL							ComplaintPre-Operational		
							Temporary	Menu Type	
Responsible Person's Email COYM@WHITECASTLE.COM							НАССР	1 _ 2 _ 3 <u>X</u> 4 _ 5 _	
Certified Food Handler  NICOLE CLARK  SAM JENKINS-SIMPSON  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			
415	Х						blishment. Recommendation	2 weeks	
256		V		is to locate the breeding site and properly treat for pests.			2 4		
236		Χ		Observed that the prep coolers in the prep area were all missing thermometers. Correction: Place thermometers in all of the coolers missing			3 days		
				them.					
291		Х		Observed test strips to check the concentration of sanitizer to be expired.  3 days					
295	Correction: Obtain new test strips.  S X Observed soda fountain in lobby to l						d-up of biofilm around the	Today	
2,3		~					rease frequency of cleaning	Today	
	to prevent build-up of biofilm.								
351		Χ		Observed trashcan in women's bathroom stall to be missing its lid. 2 weeks Correction: replace lid.					
392		Χ		Observed dump	ster lid left open. Correctlosed to prevent entry to	Today			
431		Χ	Χ	Observed accum	nulation of food debris of	1 week			
	floor of the walk-in cooler. Correction: Clean floor of walk-in cooler.  Increase frequency of cleaning to prevent accumulation of food debris.								
				Increase frequer	ncy of cleaning to preve	nt accu	mulation of food debris.		
Summary of Violations C 1 NC 6 R 1									
Received by (name and title printed):							nspected by (name and title	printed):	
						C	arrie Fischer EHS		
Received by (signature):							nspected by (signature):		
							Coolos Jeselier		
					T				
cc:					cc:			cc:	