## **Retail Food Inspection Report**

Floyd County Health Department Telephone (812) 948-4726

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Establishment Name STONE REST INN (COMMISSARY)				Telephone Number	er	Date of Inspection	ID#
Address 8757 RUFING RD, GREENVILLE IN 47124				Own 502-593-3045		04/20/2023	
Owner				Purpose		Follow Up	Released
PATRICK CRABTREE				X Routine			04/30/2023
<b>Owner's Address</b> 22 BROOKVIEW DR NEW ALBANY, IN 47150				Follow-up			
Person in Charge				Complaint			
PATRICK CRABTREE				Pre-Operatio	onal		
Responsible Person's Email				Temporary		Menu Type	
PCRABTREE23@GMAIL.COM				НАССР		1 <u>X</u> 2 <u>3</u>	4 _ 5 _
<b>Certified Food Handler</b> ZAYNE HUTCHISON				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 F	R Narrative				To Be Co	orrected
291	×	device that accur	kit for sanitizer water. C rately measures the conce e provided and used.			r 3 DAYS	
Summary of Violations C <u>0</u> NC <u>1</u> R <u>0</u>						1	
Received by (name and title printed):				Inspected by (name and title printed):			
				John Klem EHS			
Received by (signature):					Inspected by (signature): The Klem		
сс:			сс:	-		cc:	