Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
YUM MI	Est 812-948-2012	06/21/2023	
Address 4510 CHARLESTOWN RD, NEW ALBANY IN 47150	Own 502-432-5115		

Owner	Purpose	Follow Up	Released
ALICIA KAIYARAJ	X Routine		06/21/2023
Owner's Address 3712 ASTROCRAFT DR LOUISVILLE, KY 40229	___Follow-up		
Person in Charge ALICIA KAIYARAJ	___Complaint		
Responsible Person's Email	___Pre-Operational		
	___Temporary	**Menu Type**	
	___HACCP	1 __ 2 __ 3 X 4 __ 5 __	
Certified Food Handler ALICIA KAIYARAJ	___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
294		X		Observed sanitizer at a concentration above 400ppm. CORRECTION : Sanitizer was diluted with water to the appropriate concentration.	CORRECTED
324	X			Observed gas appliances not secured with safety chains.	3 WEEKS
218		X		Observed torn gaskets on the cooler.	2 WEEKS
291		X	X	Observed no test strips.	1 WEEK
411		X	X	Observed lighting in prep and washing area at 40 ftc.	3 WEEKS

Summary of Violations C 1 NC 4 R 2 5

Received by (name and title printed):	Inspected by (name and title printed): John Klem EHS
Received by (signature):	Inspected by (signature): John Klem

cc:	cc:	cc: