Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

| | | | | | | _ | T | | 1 | |
|---|---|----|---|--|-----------------------------|---------|---|-----------------------|----------------------------|--|
| Establishment Name ADRIENNE & COMPANY DONUTS AND DESSERTS | | | | | | Est | Telephone Number 812-923-0011 | Date of Inspection | ID# | |
| Address 5801 US 150, FLOYDS KNOBS IN 47119 | | | | | | Owr | 812-282-2665 | 02/07/2024 | | |
| Owner ADRIENNE & CO INC. | | | | | | | Purpose X Routine | Follow Up | Released 02/17/2024 | |
| Owner's Address 129 W. COURT AVENUE JEFFERSONVILLE, IN 47130 | | | | | | 1 | Follow-up | | ļ | |
| Person in Charge JENNIFER KEPLEY | | | | | | 1 | ComplaintPre-Operational | | | |
| Responsible Person's Email | | | | | | 1 | Temporary | Menu Type | | |
| NIAGASHANE.MARTINO@GMAIL.COM | | | | | | | HACCP | 1 _ 2 <u>X</u> 3 _ | - 4 - 5 - | |
| Certified Food Handler MYRA MARTINO | | | | | | | 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 | | |
| 218 | | Х | | Observed an overbulbs or repair l | erhead light to be out in t | 3 weeks | | | | |
| 347 | | Х | | Observed paper towel dispenser for hand washing sink to be empty. Correction: each handwashing sink should be provided with adequate means to dry hands. | | | | | | |
| 392 | | Χ | | Observed the lid of the dumpster left open. Correction: keep lid of the dumpster closed when not in use. | | | | | | |
| 324 | | X | X | Observed faucet of three compartment sink to have a steady leak. Correction: plumbing should be maintained and in good repair. Asked person in charge (PIC) if there were currently plans to get it fixed. PIC stated that there was. | | | | | | |
| 430 | | X | X Observed a hole where drywall was removed and exposing insulation in back prep area along the back wall. Observed mold on the walls and floor of the back prep area near and around the hole on the drywall. Correction: Keep hole in wall covered to prevent contamination of food until repairs can be made. Remove and replace any materials deeply affected by mold. Clean and sanitize any surface mold. PIC stated that they had recently pulled that section out to start repairs. | | | | | | | |
| Summary of Violations C <u>0</u> NC <u>5</u> R <u>2</u> 5 | | | | | | | | | | |
| Received by (name and title printed): SHANE MARTINO | | | | | | | Inspected by (name and title printed): Carrie Fischer EHS | | | |
| Received by (signature): | | | | | | | Inspected by (signature): | | | |
| | | | | | | | Con Con Time her | | | |
| cc: | | | | | cc: | | | cc: | | |