Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
ALDI #37	Est 812-920-4249	04/01/2024	
Address 3118 GRANT LINE ROAD, NEW ALBANY IN 47150	Own (317) 885-0808		

Owner	Purpose	Follow Up	Released
ALDI (INDIANA) L.P.	___Routine		04/11/2024
Owner's Address 486 EAST STOP 18 ROAD GREENWOOD, IN 46143	X Follow-up		
Person in Charge KIRSTEN DORGAN	___Complaint		
	___Pre-Operational		
Responsible Person's Email 444HCAUDILL@GMAIL.COM	___Temporary	**Menu Type**	
	___HACCP	1 X 2 __ 3 __ 4 __ 5 __	
Certified Food Handler	___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		X		Observed the bottom of a cooler display case in need of additional cleaning. Area had liquid food debris. See pictures attached for reference.	before opening
431		X		Observed rock salt on the floor around the previous freon leak. This indicate the area was not completely cleaned. Pictures attached for reference.	before opening

THE STORE MAY BEGIN RECEIVING DELIVERIES AND RESTOCKING SHELVES. THE STORE SHOULD REMAIN CLOSED UNTIL THE VIOLATIONS ARE CORRECTED AND PICTURES OF THE CORRECTIONS ARE SENT TO 502-396-7231 AND EMAILED TO TSNIDER@FLOYDCOUNTY.IN.GOV . COPIES OF INVOICES OR RECIPETS OF WORK DONE SHOULD BE EMAILED AS WELL.

Summary of Violations C 0 NC 2 R 0 2

Received by (name and title printed):	Inspected by (name and title printed):
KIRSTEN DORGAN	Thomas Snider CFS
Received by (signature):	Inspected by (signature):

cc:	cc:	cc: