

Retail Food Inspection Report


Floyd County Health Department
Telephone (812) 948-4726

Establishment Name ARNI'S, INC	Telephone Number Est 812-945-1149 Own 765-838-2985	Date of Inspection 01/29/2024	ID#
Address 1208 STATE STREET, NEW ALBANY IN 47150			
Owner BRAD COHEN	Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 01/29/2024
Owner's Address 2200 ELMWOOD AVENUE STE D-10 LAFAYETTE, IN 47904-			Menu Type 1 ___ 2 ___ 3 <input checked="" type="checkbox"/> 4 ___ 5 ___
Person in Charge AIDEN KERBY			
Responsible Person's Email AKERBY@MEETYOUATARNIS.COM			
Certified Food Handler AIDEN KERBY			

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 NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
294	X			Measured the sanitizer concentration at the 3-compartment sink at 0ppm. Observed sanitizer not moving through hose when dispenser button was pushed. Sanitizer should be added manually until the dispenser is adjusted or repaired. When pushing the dispenser for the sanitizer the water had bubbles and there was a pipe connecting the sanitizer to the soap. Unsure of the purpose of this pipe. It may be dispensing soap into the sanitizer bay. Have the contracted chemical company explain its purpose to the person in charge.	3 days
426		X		Observed spilled cat food behind the building.	1 day

Summary of Violations C 1 NC 1 R 0 2

Received by (name and title printed): AIDEN KERBY	Inspected by (name and title printed): Thomas Snider CFS
Received by (signature):	Inspected by (signature): 
cc:	cc: