Floyd County Health Department Telephone (812) 948-4726

Establishment Name ID# **Telephone Number** Date of EL NOPAL (FK) Inspection Est 812-921-9999 Address 03/22/2024 Own (502) 457-8630 500 LAFOLETTE STATION, FLOYDS KNOBS IN 47119 Owner Purpose Follow Up Released 04/11/2024 03/21/2024 Routine ELIAS ROMAN **Owner's Address** X Follow-up 1212 DANT DRIVE GEORGETOWN, IN 47122 Complaint **Person in Charge Pre-Operational ILDEFONSO GARCIA** Temporary Menu Type **Responsible Person's Email** HACCP 1 _ 2 _ 3 _ 4 <u>X</u> 5 _ DANIELPJ2007@HOTMAIL.COM **Certified Food Handler** Other (list) DANIEL MARTINEZ HERNANDEZ 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" С NC **R** Narrative Section # **To Be Corrected** 324 Х Observed the mop sink faucet leaking around the left handle. 3 weeks, 295 Х Х Observed the can opener and sanitizer hose in need of cleaning. 1 day 415 Х Х Observed flying insects (gnats) in the ware wash area and around trash can 1 week used to scrape off plates. Repeat Violation. Contact a certified pest operator. 218 Х X Observed missing light bulbs on cook line and dish washing area. There 3 weeks should be 3 bulbs in each fixture in these areas. Observed only 1 bulb working in the men's restroom. ---Observed gaps between the fumehood filters Х X Observed no chlorine test strips in the bar area. Observed no Quat test 291 4 days strips for the 3 comparments sink chemical dispenser. Х 256 X Observed no probe thermometer to check cooling temperatures. 1 week 438 Observed 4 spray bottles without a label or common name, 1 day Х Х Observed items stored in handwashing sink to the left of the 3 compartment 344 1 day sink. Х Observed water between tiles near the dish machine where there were gnats. 430 3 weeks These gaps could be breeding the gnats. Grout needs to be repaired and area kept dry. Consider adding a fan to help keep it dry. A SECOND FOLLOW-UP AND FEE IS REQUIRED. THE FEE OF \$212.50 MUST BE PAID BEFORE THE NEXT INSPECTION IN 3 WEEKS. 9 **Summary of Violations** С 3 NC 6 R 5 Received by (name and title printed): Inspected by (name and title printed): ELIAS ROMAN Thomas Snider CFS Received by (signature): Inspected by (signature): - Pe The cc: cc: cc: