Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name EL NOPAL IV LLC Address 730 ROLLING CREEK DR., NEW ALBANY IN 47150							Telephone Number 812-590-3434 n 502-526-8928	Date of Inspection 04/17/2024	ID#	
Owner JAVIER VELASCO							Purpose X Routine	Follow Up 04/29/2024	Released 04/17/2024	
Owner's Address 4211 LAKESIDE DRIVE SELLERSBURG, IN 47172							Follow-up Complaint			
Person in Charge JOSEPH							Pre-Operational			
Responsible Person's Email ELNOPALIV@ICLOUD.COM							Temporary HACCP	Menu Type 1 2 3 4 _X 5		
Certified Food Handler ARMONDO ESTRADA							Other (list)			
				AND NARRATIVE COLUMN NS ARE DENOTED IN THE		AND IN THE N	ARRAIVE COLUMN MARKED AS "R"			
Section #	C	NC	R	Narrative		To Be Corrected				
392		Χ			mpster lid open.	today/retrain				
218		Χ		_	skets of the "fresh"		2 weeks			
336	336 X Observed no hosebib backflow dev							3 days		
430		X		the mop sink. It is not required on the chemical dispenser hose. Observed broken and missing floor tiles near the back door and under the 3 1 month comparments sink.						
441	Х			Observed a DICHLORVOS pest control strip in the bar. It was discarded, PIC stated it must have been old and overlooked and knew they should not be used.						
189	Х		Χ	Measured a pan of beans in the walk-in cooler at 50F and a container of queso dip in the walkin at 55F. Both were made the previous day. Cooked foods should be cooled to 41F or below in 6 hours. Consider using smaller pans, an ice bath with mixing, or an ice paddle for more rapid cooling.						
187	X			Observed the fresh prep cooler's thermometer reading 60F. 4-30-24 Person-in-charge stated the food was stored in the walkin overnight but the condiments were left. 2 jars of garlic, and bottle of mayonaise and a squeeze bottle of sour creme was discarded. Cooler should maintain a temp of 41F or below. Use ice to keep food items cold and empty cooler nightly. Out of temp foods should be discarded after 4 hours.						
				Review emplyed	e health policy with	staff.				
Summary of V	/iolations	(C _	4 NC	3 R <u>1</u>	_		7		
Received by (name and title printed): JANET VELASCO							Inspected by (name and title printed): Thomas Snider CFS			
Received by (signature):							Inspected by (signature):			
cc:					cc:		, , , , , , , , , , , , , , , , , , , ,	cc:		