



**RETAIL FOOD ESTABLISHMENT  
INSPECTION REPORT**

State Form 57480 (7/24)

FLOYD COUNTY HEALTH DEPARTMENT

Release Date

9/2/2025

Date

8/20/2025

No. of Risk Factor/Intervention Violations

1

Time In

13:45

No. of Repeat Risk Factor/Intervention Violations

0

Time Out

17:15

<b>Establishment</b> CLOVERLEAF BAR & GRILL	<b>Address</b> 1423 CULBERTSON AVE	<b>City/State</b> NEW ALBANY, IN	<b>Zip Code</b> 47150	<b>Telephone</b> 812-725-0800
<b>License/Permit #</b> 11341 - Retail Food License	<b>Permit Holder</b> CLOVERLEAF BAR & GRILL	<b>Purpose of Inspection</b> Routine	<b>Est. Type</b>	<b>Risk Category</b> Risk Level 2 (Low)

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item

Mark "X" in appropriate box for COS and/or R

IN = in compliance    OUT = not in compliance    N/O = not observed    N/A = not applicable

COS = corrected on-site during inspection    R = repeat violation

Compliance Status			COS	R
<b>Supervision</b>				
1	IN	Person-in-charge present, demonstrates knowledge, and performs duties		
2	IN	Certified Food Protection Manager		
<b>Employee Health</b>				
3	IN	Management, food employee and conditional employee; knowledge, responsibilities and reporting		
4	IN	Proper use of restriction and exclusion		
5	IN	Procedures for responding to vomiting and diarrheal events		
<b>Good Hygienic Practices</b>				
6	N/O	Proper eating, tasting, drinking, or tobacco products use		
7	IN	No discharge from eyes, nose, and mouth		
<b>Preventing Contamination by Hands</b>				
8	IN	Hands clean & properly washed		
9	IN	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		
10	IN	Adequate handwashing sinks properly supplied and accessible		
<b>Approved Source</b>				
11	IN	Food obtained from approved source		
12	N/O	Food received at proper temperature		
13	IN	Food in good condition, safe, & unadulterated		
14	N/A	Required records available: molluscan shellfish identification, parasite destruction		
<b>Protection from Contamination</b>				
15	IN	Food separated and protected		
16	IN	Food-contact surfaces; cleaned & sanitized		

Compliance Status			COS	R
17	IN	Proper disposition of returned, previously served, reconditioned & unsafe food		
<b>Time/Temperature Control for Safety</b>				
18	N/O	Proper cooking time & temperatures		
19	N/O	Proper reheating procedures for hot holding		
20	IN	Proper cooling time and temperature		
21	N/O	Proper hot holding temperatures		
22	IN	Proper cold holding temperatures		
23	IN	Proper date marking and disposition		
24	N/A	Time as a Public Health Control; procedures & records		
<b>Consumer Advisory</b>				
25	IN	Consumer advisory provided for raw/undercooked food		
<b>Highly Susceptible Populations</b>				
26	N/A	Pasteurized foods used; prohibited foods not offered		
<b>Food/Color Additives and Toxic Substances</b>				
27	IN	Food additives: approved & properly used		
28	IN	Toxic substances properly identified, stored, & used		
<b>Conformance with Approved Procedures</b>				
29	N/A	Compliance with variance/specialized process/HACCP		

**Risk factors** are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

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License/Permit #

11341 - Retail Food License

Date 8/20/2025

<b>Establishment</b> CLOVERLEAF BAR & GRILL	<b>Address</b> 1423 CULBERTSON AVE	<b>City/State</b> NEW ALBANY, IN	<b>Zip Code</b> 47150	<b>Telephone</b> 812-725-0800
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**GOOD RETAIL PRACTICES**

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is **not** in compliance Mark "X" in appropriate box for COS and/or R **COS** = corrected on-site during inspection **R** = repeat violation

Compliance Status		COS	R
<b>Safe Food and Water</b>			
30	Pasteurized eggs used where required		
31	Water & ice from approved source		
32	Variance obtained for specialized processing methods		
<b>Food Temperature Control</b>			
33	Proper cooling methods used; adequate equipment for temperature control		
34	Plant food properly cooked for hot holding		
35	Approved thawing methods used		
36	Thermometers provided & accurate		
<b>Food Identification</b>			
37	Food properly labeled; original container		
<b>Prevention of Food Contamination</b>			
38	Insects, rodents, & animals not present		
39	Contamination prevented during food preparation, storage & display		
40	Personal cleanliness		
41	Wiping cloths: properly used & stored		
42	Washing fruits & vegetables		

Compliance Status		COS	R
<b>Proper Use of Utensils</b>			
43	In-use utensils: properly stored		
44	Utensils, equipment & linens: properly stored, dried, & handled		
45	Single-use/single-service articles: properly stored & used		
46	Gloves used properly		
<b>Utensils, Equipment and Vending</b>			
47	Food & non-food contact surfaces cleanable, properly designed, constructed, & used		
48	Warewashing facilities: installed, maintained, & used; test strips		
49	X Non-food contact surfaces clean		
<b>Physical Facilities</b>			
50	Hot & cold water available; adequate pressure		
51	Plumbing installed; proper backflow devices		
52	Sewage & waste water properly disposed		
53	Toilet facilities: properly constructed, supplied, & cleaned		
54	Garbage & refuse properly disposed; facilities maintained		
55	Physical facilities installed, maintained, & clean		
56	Adequate ventilation & lighting; designated areas used		

**OUTDOOR FOOD OPERATION & MOBILE RETAIL FOOD ESTABLISHMENT**

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Compliance Status		COS	R
57	N/A Outdoor Food Operation		

Compliance Status		COS	R
58	IN Mobile Retail Food Establishment		

Henry Bachmann

Person In Charge (Signature)

Date: 8/22/2025

Thomas Snider, Chief Food

Specialist

Inspector (Signature)

Follow-up: NO Follow-up Date:

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**TEMPERATURE OBSERVATIONS**

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Cheese - Cold-Hold Unit	39 F	-		-	

**OBSERVATIONS AND CORRECTIVE ACTIONS**

Item Number		Complete by Date:
49	Observed cleaning needed on the interior of the ice machine.	8/21/2025

**Published Comment** Ensure a probe thermometer is being used to monitor cooling temperatures.  
 Owner stated plan to provide an outdoor pick-up option and expand the kitchen. Contact FCHD before expanding kitchen.  
 Review illness reporting policy. Ensure there is a procedure for clean up for vomit or diarrhea and a written notification of allergens.

Henry Bachmann  
**Person In Charge (Signature)** Date: 8/22/2025

Thomas Snider, Chief Food  
 Specialist  
**Inspector (Signature)**  Date: 8/22/2025