Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
HOUR OF POWER	Est 812-945-1937	07/16/2025	
Address 108 W. MAIN ST, NEW ALBANY IN 47150	Own 812-945-1937		

Owner	Purpose	Follow Up	Released
HOUR OF POWER CHURCH	X Routine		
Owner's Address 108 E MAIN ST NEW ALBANY, IN 47150-	___Follow-up		
Person in Charge HERB FREDRICKS	___Complaint		
Responsible Person's Email SOUL.SEARCHERSMINISTRY@GMAIL.COM	___Pre-Operational		
Certified Food Handler NIKKI SCHROEDER	___Temporary	**Menu Type**	
	___HACCP	1 __ 2 __ 3 X 4 __ 5 __	
	___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
				No violations. Discussed written declarion of allergens, v/d Cleanup procedures, and emplyee illness reporting.	

Summary of Violations C ____ NC ____ R ____ 0

Received by (name and title printed):	Inspected by (name and title printed):
HERB FREDRICKS	Thomas Snider CFS
Received by (signature):	Inspected by (signature):

cc:	cc:	cc: