Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
JACOBI'S FOOD MART & GAS NO. 2	Est 812-923-0955	06/24/2025	
Address 6566 HIGHWAY 150, FLOYDS KNOBS IN 47119	Own 502-817-9510		

Owner	Purpose	Follow Up	Released
ELAINE JACOBI	X Routine		06/24/2025
Owner's Address P.O. BOX 250 FLOYDS KNOBS, IN 47119-9520	___Follow-up		
Person in Charge SHERRIE BARNES	___Complaint		
Responsible Person's Email JAMIJACOBI@YAHOO.COM	___Pre-Operational		
Certified Food Handler TABITHA LING LEA BLACKMAN	___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
187	X			Measured chicken salad and sour cream with chives in the prep cooler at 52F. Cooler should maintain 41 before it is used to store tcs foods.	discarded
254		X		Observed the prep cooler to have an inaccurate thermometer.	corrected
297		X		Observed more frequent cleaning needed around the nozzle of the BUNN coffee machine.	1 day
256		X		Observed no thermomter in 2 hot holding cabinets.	3 days
334	X			Observed no backflow device/ backsiphoning on mop sink hose. An air gap must be maintained when filling the mop bucket or a hose bibb may be installed.	1 week
				Review emplyee illness policy and vomit/diahrea procedures.	

Summary of Violations C 2 NC 3 R 0 — 5

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

cc:	cc:	cc: