Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
KFC (CHARLESTOWN RD)	Est (812) 945-2121	06/12/2025	
Address 4301 CHARLESTOWN RD, NEW ALBANY IN 47150	Own 802-274-4020		

Owner	Purpose	Follow Up	Released
SHERRY HOUSTON	X Routine		06/12/2025
Owner's Address PO BOX 2215 CLARKSVILLE, IN 47131	___Follow-up		
Person in Charge JOHN RUSSELL	___Complaint		
Responsible Person's Email H445022@KFC.COM	___Pre-Operational		
	___Temporary	**Menu Type**	
	___HACCP	1 __ 2 __ 3 X 4 __ 5 __	
Certified Food Handler JOHN RUSSEL	___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
294	X			Observed quaternary ammonia sanitizer concentration to be below 100ppm.	3 days
218		X		Observed build-up of ice in walk-in freezer.	2 weeks
392		X		Observed dumpster lid left open.	Today

Discussed allergen and handwashing signage and vomiting and diarrheal event clean up. All of the major food allergens present in the establishment must be listed in writing. All handwashing sinks used by employees must have a sign stating that employees must was hands. There must be a written policy for handling vomiting and diarrheal events.

Summary of Violations C 1 NC 2 R 0 3

Received by (name and title printed):	Inspected by (name and title printed):
JOHN RUSSELL	Carrie Fischer EHS
Received by (signature):	Inspected by (signature):

cc:	cc:	cc: