

# Retail Food Inspection Report


Floyd County Health Department  
Telephone (812) 948-4726

<b>Establishment Name</b> LEAVEN BAKERY	<b>Telephone Number</b> Est 502-536-8823 Own 661-599-8592	<b>Date of Inspection</b> 01/16/2025	<b>ID#</b>
<b>Address</b> 1515 E. MARKET ST, NEW ALBANY IN 47150	<b>Purpose</b> <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	<b>Follow Up</b>	<b>Released</b> 01/26/2025
<b>Owner</b> KIMBERLY MAXEY		<b>Menu Type</b> 1 _ 2 _ 3 <u>X</u> 4 _ 5 _	
<b>Owner's Address</b> 3696 WAGNER DR FLOYD KNOBS, IN 47119			
<b>Person in Charge</b> ZACH MAXEY			
<b>Responsible Person's Email</b> BAKERYLEAVEN@GMAIL.COM			
<b>Certified Food Handler</b> SHARON COUSINEAU			

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 NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
				ALL VIOLATIONS CORRECTED	

**Summary of Violations**      C           NC           R           **0**

Received by (name and title printed): ZACH MAXEY	Inspected by (name and title printed): Carrie Fischer EHS
Received by (signature):	Inspected by (signature): 

cc:	cc:	cc:
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