Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
MARK ELROD TOWERS/ LIFESPAN RESOURCES	Est 812-948-8330	04/09/2025	
Address 1 WOLFE TRACE, NEW ALBANY IN 47150	Own		

Owner	Purpose	Follow Up	Released
LIFESPAN RESOURCES ATTN. RAMONA MILLER	X Routine		
Owner's Address 33 STATE ST SUITE 308 NEW ALBANY, IN 47150	___Follow-up		
Person in Charge EMILY ARNOLD	___Complaint		
Responsible Person's Email RLUDOLPH@LSR14.ORG	___Pre-Operational		
Certified Food Handler N/A	___Temporary	**Menu Type**	
	___HACCP	1 X 2 __ 3 __ 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
256		X	X	Observed no thermometer in the refigerator.	3 days
294	X		X	Observed no method of sanitizing utensils.	2 days
291		X		Observed no sanitizer test strips.	3 days

Summary of Violations C 1 NC 2 R 2 3

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

cc:	cc:	cc: