Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
WAFFLE HOUSE #2122	Est 812 944 8499	03/14/2025	
Address 3018 ST. JOSEPH RD, NEW ALBANY IN 47150	Own 770-729-5742		

Owner	Purpose	Follow Up	Released
MIDWEST WAFFLES	X Routine	03/21/2025	03/14/2025
Owner's Address P.O. BOX 6450 NORCROSS, GA 30091	___Follow-up		
Person in Charge ANDREW TERWILLIGER	___Complaint		
Responsible Person's Email QUINYERA@YAHOO.COM	___Pre-Operational		
Certified Food Handler JAMOYIA TAYOR	___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 container of sausage gravy to be 64F in refrigerator. Person in charge (PIC) stated that it was made that morning at 4:00am, more than 6 hours before, and had been put in an ice bath before being put in the refrigerator. PIC discarded the sausage gravy.	Corrected
443	X			Observed container of bleach sanitizer for cleaning surfaces to be 0ppm. PIC had bleach added to correct concentration.	Corrected
217		X		Observed rust from screw in ice machine.	3 days
291		X		Observed expired test strips for checking sanitizer concentration.	3 days
295		X		Observed build-up of biofilm in ice machine.	3/21/25

Summary of Violations C 2 NC 3 R 0 — 5

Received by (name and title printed):	Inspected by (name and title printed):
ANDREW TERWILLIGER	Carrie Fischer EHS
Received by (signature):	Inspected by (signature): Carrie Fischer

cc:	cc:	cc: