

# Retail Food Inspection Report

Floyd County Health Department  
Telephone (812) 948-4726

<b>Establishment Name</b> FAIRMONT ELEMENTARY	<b>Telephone Number</b> Est 812-981-7439 Own 812-542-4703	<b>Date of Inspection</b> 10/22/2021	<b>ID#</b>
<b>Address</b> 1725 ABBIE DELL AVENUE, NEW ALBANY IN 47150	<b>Purpose</b> <input checked="" type="checkbox"/> Routine <input 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> 11/01/2021
<b>Owner</b> NAFCS FOOD & NUTRITION SERVICES		<b>Menu Type</b> 1 __ 2 __ 3 <u>X</u> 4 __ 5 __	
<b>Owner's Address</b> 2801 GRANTLINE RD NEW ALBANY, IN 47150-			
<b>Person in Charge</b> MARGIE PLUMMER			
<b>Responsible Person's Email</b> MPLUMMER@NAFCS.ORG			
<b>Certified Food Handler</b> MARGIE PLUMMER			

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
324		X		Observed a leak at kitchen handwashing sink. Observed pipe from hot water booster discharging water directly onto tile floor. Extend to nearby floor drain.	2 weeks

**Summary of Violations**      C   0      NC   1      R   0  

Received by (name and title printed):	Inspected by (name and title printed): Thomas Snider CFS
Received by (signature):	Inspected by (signature): <i>Thomas Snider</i>
cc:	cc: