

# Retail Food Inspection Report

Floyd County Health Department  
Telephone (812) 948-4726

<b>Establishment Name</b> GRANTLINE ELEMENTARY	<b>Telephone Number</b> Est 812-542-5502 Own 812-542-4703	<b>Date of Inspection</b> 03/23/2021	<b>ID#</b>
<b>Address</b> 4711 GRANTLINE RD, 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> 04/01/2021
<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> NANCY SPAINHOUR			
<b>Responsible Person's Email</b> CCOMBS@NAFCS.ORG			
<b>Certified Food Handler</b> CHRISTINE COMBS			

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

<b>Summary of Violations</b> C <u>    </u> NC <u>    </u> R <u>    </u>		
Received by (name and title printed):	Inspected by (name and title printed): Thomas Snider EHS	
Received by (signature):	Inspected by (signature): <i>Thomas Snider</i>	
cc:	cc:	cc: