



Retail Food Establishment Inspection Report

Floyd County Health Department  
Telephone: 812-948-4726

X 6600

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name <b>Skyline Chili</b>	Telephone Number <b>812 920 043</b>	Date of Inspection (mm/dd/yr) <b>11/21/2019</b>	PERMIT # <b>19-281</b>
Establishment Address (number and street, city, state, zip code) <b>3505 Grantline Rd New Albany, IN 47150</b>	<b>561 603 2191</b>	Follow-up <b>NO</b>	Release Date <b>10 days</b>
Owner <b>Mike Marlow + Will Jacobs</b>	Purpose: <b>Routine</b>	Summary of Violations: <b>C <input checked="" type="checkbox"/> NC <input checked="" type="checkbox"/> R <input checked="" type="checkbox"/></b>	
Owner's Address	2. Follow-up	Menu Type (See back of page)	
Person in Charge <b>Mike Marlow</b>	3. Complaint	<b>1 2X 3 4 5</b>	
Responsible Person's E-mail	4. Pre-Operational		
Certified Food Manager <b>Kim Swartz (2/11/20)</b>	5. Temporary		
	6. HACCP		
	7. 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 NARRATIVE BELOW AS "R"

Section#	C/NC	R	Narrative	To Be Corrected By
			No violations.	

Received by (name and title printed): <b>Kim Clare GM</b>	Inspected by (name and title printed): <b>A.J. Ingram (EHS)</b>
Received by (signature): <i>Kim Clare</i>	Inspected by (signature): <i>aj</i>
cc:	cc: