Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
HAMTASTIC INCORPORATED	Est 812-941-9428	04/14/2023	
Address 3602 NORTHGATE COURT SUITE 23, NEW ALBANY IN	Own 812-941-9426		

Owner	Purpose	Follow Up	Released
KERRY KEMMER	___Routine		04/24/2023
Owner's Address 5606 HAMBURG PIKE JEFFERSONVILLE, IN 47130	___Follow-up		
Person in Charge DEBRA DENNISON	X Complaint		
Responsible Person's Email HBHAMNEWALBANY@AOL.COM	___Pre-Operational		
Certified Food Handler DEBRA DENISON	___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
138		X	X	Observed 3 kitchen staff members preparing food without hair restraints. PIC stated they should have hats. Consider purchasing hairnets if hats are forgotten.	1 day
346		X		Observed no handsoap at kitchen's handwashing sink.	1 day
347		X		Observed no disposable hand towels at either of the handwashing sinks. If cloth towels are used they can only be used once.	1 day
239		X		Observed bulk boxes of single use items stored on the floor.	3 days
324		X	X	Observed a leak in the cabinet under the soda machine in front of house. Clean area and make any necissary repairs.	3 days

FCHD's INSPECTION WAS IN RESPONSE TO A COMPLAINT THAT WAS MADE ABOUT THE ESTABLISHMENT.

Summary of Violations C 0 NC 5 R 2 5

Received by (name and title printed):	Inspected by (name and title printed):
DEBRA DENNISON	Thomas Snider CFS
Received by (signature):	Inspected by (signature): Thomas Snider

cc:	cc:	cc: