Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
COMMUNITY MONTESSORI	Est 812-948-1000	02/14/2023	
Address 4102 ST JOSEPH RD, NEW ALBANY IN 47150	Own 812-989-3823		

Owner	Purpose	Follow Up	Released
DIRECTOR BARBARA BURKE FONDREN	X Routine		02/24/2023
Owner's Address ,	___Follow-up		
Person in Charge HANNAH CRAIG	___Complaint		
Responsible Person's Email HCRAIG@SHININGMINDS.COM	___Pre-Operational		
Certified Food Handler -NEEDED BY 6/15/22 -	___Temporary	**Menu Type**	
	___HACCP	1 X 2 __ 3 __ 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
393		X		Observed a dumpster without a dumpster plug. CORRECTION: Drains in receptacles must have a plug in place.	2 WEEKS

Summary of Violations C 0 NC 1 R 0 1

Received by (name and title printed):	Inspected by (name and title printed): John Klem EHS
Received by (signature):	Inspected by (signature): John Klem

cc:	cc:	cc: