

# Retail Food Inspection Report

Floyd County Health Department  
Telephone (812) 948-4726

<b>Establishment Name</b> NEW ALBANY SPRINGS GOLF COURSE	<b>Telephone Number</b> Est 812-946-2392 Own 812-946-2392	<b>Date of Inspection</b> 05/03/2023	<b>ID#</b>
<b>Address</b> 1706 GRAYBROOK LANE, 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> 05/13/2023
<b>Owner</b> NEW ALBANY GOLF, INC		<b>Menu Type</b> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
<b>Owner's Address</b> 205 S. WESLEY ST ORLEANS, IN 47452			
<b>Person in Charge</b> PAT RUDY			
<b>Responsible Person's Email</b> CARYWHAMMOND@YAHOO.COM			
<b>Certified Food Handler</b>			

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
				No violations	

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

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