

# Retail Food Inspection Report


Floyd County Health Department  
Telephone (812) 948-4726

<b>Establishment Name</b> THE WINE SHOP, LLC	<b>Telephone Number</b> Est 812-590-6952 Own 502-551-4994	<b>Date of Inspection</b> 06/15/2023	<b>ID#</b>
<b>Address</b> 410 PEARL ST, 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> 06/25/2023
<b>Owner</b> LAUREN VANCLEAVE		<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> 2708 KLERNER CT NEW ALBANY, IN 47150			
<b>Person in Charge</b> JASON SEARBY			
<b>Responsible Person's Email</b> DRINK@WINESHOPNEWALBANY.COM			
<b>Certified Food Handler</b> N/A			

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

cc:	cc:	cc:
-----	-----	-----