Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
ZAXBY'S (UNBRIDLED CHICKEN LLC)	Est 812-725-7484	10/24/2023	
Address 2870 TECHNOLOGY BLVD, NEW ALBANY IN 47150	Own 502-648-0099		

Owner	Purpose	Follow Up	Released
UNBRIDLED CHICKEN, LLC	X Routine		10/24/2023
Owner's Address 12407 REHL RD LOUISVILLE, KY 40299	___Follow-up		
Person in Charge JACKIE CLEMONS	___Complaint		
Responsible Person's Email ZAXBYS44001@UNBRIDLEDCHICKEN.COM	___Pre-Operational		
Certified Food Handler JACKIE CLEMONS	___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
294	X			Measured the Quat sanitizer solution over 400ppm. Quat is dispensed from a chemical dispenser that needs to be adjusted. Until it can be adjusted, solution should be diluted.	today
218		X		Observed a prep cooler not working. Person in charge (PIC) stated a new one is ordered and should arrive in 2 weeks. In the mean time food containers are stored in ice and foods are all sold with in 4 hours.	2 weeks
256		X		Observed the first prep cooler on the line and the raw chicken cooler to be missing ambient temperature thermometers.	Corrected
295		X		Observed a line of grease running down the inner sides of the fumehood on both sides. Clean area. An adjustment may be needed on the fume hood so the grease is diverted into the drip tray.	2 days
415		X		Observed at least 4 dead insects on the floor in the back storage room. No live insect issue was observed. Area should be swept.	2 days
				Establishment recently had a remodel. Sink stoppers were at each of the handwashing sinks. Stoppers should be removed since the sinks are only for handwashing only.	

Summary of Violations C 1 NC 4 R 0 5

Received by (name and title printed):	Inspected by (name and title printed):
JACKIE CLEMONS	Thomas Snider CFS
Received by (signature):	Inspected by (signature):

cc:	cc:	cc: