Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name COFFEE CROSSING Address 140 E MAIN ST, NEW ALBANY IN 47150 Owner						Telephone Number 812-946-9410 502-214-0196 Purpose X Routine	Date of Inspection 04/05/2024 Follow Up	ID# Released 04/15/2024	
ALAN BUTTS Owner's Address 208 ROSEWOOD DRIVE CLARKSVILLE, IN 47129 Person in Charge AUTUMN HEACOCK Responsible Person's Email BAKERY@COFFEECROSSING.COM Certified Food Handler						Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Menu Type 1 2 _X 3 4 5		
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 #						m door	To Be Corrected oor. 10 DAYS		
Summary of Vio				<u>1</u> R <u>0</u>	Ir	nspected by (name and title	nrinted):		
Received by (name and title printed): VALERIE WEBB						John Klem EHS			
Received by (signature):					Ir	Inspected by (signature):			
cc:				cc:			cc:		