Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name ISRAEL'S DELICIAS DE MEXICO Address 604 E SPRING ST, NEW ALBANY IN 47150 Owner ISRAEL LANDIN Owner's Address 604 E SPRING ST NEW ALBANY, IN 47150 Person in Charge ISRAEL LANDIN Responsible Person's Email						Purpose X Routine Complaint Pre-Operational Temporary HACCP Other (list)	Date of Inspection 05/22/2024		
ISRAEL.LANDIN@YAHOO.COM Certified Food Handler ISRAEL LANDIN 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 #	С	NC		Narrative		.1.1 1 1 1 1 20	To Be C	orrected	
291 294	Х	Х	x	Observed no sanitizer test strips. Strips must match the chemical used. If both quat and chlorine are used both test strips are needed. Measured sanitzer concentration at 0ppm at the sani bucket and the dish machine. Person in charge must demonstrate how to test sanitizer on follow-up inspection. Chlorine bleach or quat should be manually added to					
415	Х			the dish machine and sani buckets until dispensing equiptment is adjusted. Observed 2 live cockroaches near the dish machine. Person in charge 5-29-24 should have pest control receipts available for follow-up inspection.					
342		Χ		Observed the hot water line turned off at	corrected	d			
				ALL VIOLATION MUST BE CORRECTED. A EXTENSION MAY BE REQUE			SPECTION TO AVOI	D A	
Summary of Violations C 2 NC 2 R 2 4									
Received by (n ISRAEL LAN		itle prii	nted):		Inspected by (name and title printed): Thomas Snider CFS				
Received by (signature):						Inspected by (signature):			
cc:				cc:			cc:		