Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

| Establishment Na LIT CIGAR BAR | | БЕ | | | Est | Telephone Number 502-592-9971 | Date of Inspection | ID# | |
|---|--------------------------|----|-------------------|--|--------------|--|-----------------------|------------------------|--|
| Address 330 VINCENNES STREET, NEW ALBANY IN 47150 | | | | | | 502-592-9971;502-939-1 | 12/30/2024 | | |
| Owner DARREN & ROBERTA JEFFERS | | | | | | Purpose X Routine | Follow Up | Released 12/30/2024 | |
| Owner's Address P.O. BOX 514 JEFFERSONVILLE, IN 47131 | | | | | | Follow-up Complaint | | | |
| Person in Charge RITA MORGAN | | | | | | Pre-Operational | | | |
| Responsible Person's Email DJEFFE24@TWC.COM | | | | | | Temporary | | | |
| Certified Food Handler NOT REQUIRED | | | | | | 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 # | ction # C NC R Narrative | | | | | To Be Corrected | | | |
| 191 | X | | taco meat, sliced | tomatoes, sliced of the ces. If a sauce is m | onions, sang | iding; chili, burgers, chicker ria (or other beverage with e it should be datemarked | n 12/31/24 | | |
| Summary of Violations C <u>1</u> NC <u>1</u> R <u>0</u> | | | | | | 2 | | | |
| Received by (name and title printed): DARREN JEFFERS | | | | | | Inspected by (name and title printed): Thomas Snider CFS | | | |
| Received by (signature): | | | | | Iı | Inspected by (signature): | | | |
| cc: | | | | cc: | | | cc: | | |