

Retail Food Inspection Report


Floyd County Health Department
Telephone (812) 948-4726

Establishment Name ROOKIES COOKIES	Telephone Number Est 812-948-8858 Own 502-643-3439	Date of Inspection 11/14/2024	ID#	
Address 310 PEARL STREET, NEW ALBANY IN 47150	Purpose <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)	Follow Up	Released	
Owner SHARA AUGSBURGER		Menu Type 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>		
Owner's Address 6565 CHAPEL HILL RD BORDEN, IN 47106-				
Person in Charge SHARA AUGSBURGER				
Responsible Person's Email ROOKIESCOOKIESANDCAKES@GMAIL.COM				
Certified Food Handler				

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
324		X		Observed the faucet on the 3 compartment sink unable to be shut off and constantly running. Owner state she turns it off with the valve under the sink.	3 days
146		X	X	Observed packaged cookies without an ingredients list or quantity. Owner stated labels had been ordered.	2 weeks

Summary of Violations C 0 NC 2 R 1 **2**

Received by (name and title printed): SHARA AUGSBURGER	Inspected by (name and title printed): Thomas Snider CFS
Received by (signature):	Inspected by (signature): 
cc:	cc: