

# Retail Food Inspection Report

Floyd County Health Department  
Telephone (812) 948-4726

<b>Establishment Name</b> TACO BELL NO. 33583	<b>Telephone Number</b> Est 812-748-2248 Own (812) 945-9810	<b>Date of Inspection</b> 01/29/2024	<b>ID#</b>
<b>Address</b> 100 DAISY SUMMIT DR, NEW ALBANY IN 47150	<b>Purpose</b> <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)	<b>Follow Up</b>	<b>Released</b> 02/08/2024
<b>Owner</b> C&M SMITH RESTAURANTS, INC		<b>Menu Type</b> 1 __ 2 <u>X</u> 3 __ 4 __ 5 __	
<b>Owner's Address</b> 5140 CHARLESTOWN RD., SUITE 4 NEW ALBANY, IN 47150			
<b>Person in Charge</b> STEVEN EDWARDS			
<b>Responsible Person's Email</b> RS033583@TACOBELL.COM			
<b>Certified Food Handler</b> BRANDON BOWLES			

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
				No Violations	

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

Received by (name and title printed):	Inspected by (name and title printed): Carrie Fischer EHS
Received by (signature):	Inspected by (signature):
cc:	cc: