Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
YAMATO	Est 812-590-1380	03/27/2024	
Address 345 NEW ALBANY PLAZA, NEW ALBANY IN 47150	Own 646-591-2074		

Owner	Purpose	Follow Up	Released
DEQING CHEN	X Routine		04/06/2024
Owner's Address 7004 KNOB VALLEY WAY GEORGETOWN, IN 47122	___ Follow-up		
Person in Charge DEQING CHEN	___ Complaint		
Responsible Person's Email JAMIEYU1128@GMAIL.COM	___ Pre-Operational		
Certified Food Handler DEQING CHEN	___ Temporary	**Menu Type**	
	___ HACCP	1 __ 2 __ 3 X 4 __ 5 __	
	___ 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 #	C	NC	R	Narrative	To Be Corrected
297		X		Observed biofilm in the ice machine.	10 DAYS
310		X		Observed grease build-up in the hood.	2 WEEKS
404		X		Observed missing/damaged coving under the 3 compartment sink.	2 WEEKS
413		X		Observed a gap under the back door.	2 WEEKS
431		X	X	Observed food debris under the 3 compartment sink.	10 DAYS

Summary of Violations C 0 NC 5 R 1 5

Received by (name and title printed):	Inspected by (name and title printed):
DEQING CHEN	John Klem EHS
Received by (signature):	Inspected by (signature): John Klem

cc:	cc:	cc: