

# Retail Food Inspection Report

Floyd County Health Department

Telephone (812) 948-4726

<b>Establishment Name</b> BOIL AND CO. LLC - DBA: SHELL YEAH		<b>Telephone Number</b> Est 502-471-6510 Own	<b>Date of Inspection</b> 06/07/2025	<b>ID#</b>	
<b>Address</b> 8431 ABERDEEN LN., CHARLESTOWN IN 47111					
<b>Owner</b> GABRIELLE WIXON		<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> Released 06/17/2025	<b>Menu Type</b> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
<b>Owner's Address</b> 8431 ABERDEEN LN CHARLESTOWN, IN 47111					
<b>Person in Charge</b> GABRIELL WIXON					
<b>Responsible Person's Email</b> BOILANDCO.LLC@GMAIL.COM					
<b>Certified Food Handler</b> GABIRILEED WIXON					
<small>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"</small>					
Section #	C	NC	R	Narrative	To Be Corrected
342	X			Observed no free flowing valve on the handwashing water tank.	next event
<b>Summary of Violations</b> C <u>0</u> NC <u>1</u> R <u>0</u> 1					
Received by (name and title printed): GABRIELL WIXON			Inspected by (name and title printed): Thomas Snider CFS		
Received by (signature):			Inspected by (signature): 		
CC:		CC:		CC:	