Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
HAZELWOOD MIDDLE SCHOOL	Est 812-542-3310	03/07/2024	
Address 1021 HAZELWOOD AVE, NEW ALBANY IN 47150	Own 812-542-4703		

Owner	Purpose	Follow Up	Released
NAFCS FOOD & NUTRITION SERVICES	X Routine		03/07/2024
Owner's Address 2801 GRANTLINE RD NEW ALBANY, IN 47150-	___ Follow-up		
Person in Charge MARA OLIVER	___ Complaint		
Responsible Person's Email MEOLIVER@NAFCS.ORG	___ Pre-Operational		
Certified Food Handler MARA OLIVER CHARLENE BARNES	___ Temporary	**Menu Type**	
	___ HACCP	1 __ 2 __ 3 __ 4 X 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
322	X			Observed a mop sink faucet with an atmospheric vacuum breaker (ABV) in the laundry room, connected to a chemical dispenser. There may not be downstream valves or elevated lines after an ABV.	10 DAYS
430		X		Observed a 2 in diameter hole in the wall of the kitchen.	2 WEEKS

Summary of Violations C 1 NC 1 R 0 2

Received by (name and title printed):	Inspected by (name and title printed):
MARA OLIVER	John Klem EHS
Received by (signature):	Inspected by (signature): John Klem

cc:	cc:	cc: