

Retail Food Inspection Report


Floyd County Health Department
Telephone (812) 948-4726

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|---|--|---|-------------------------------|
| Establishment Name HIGHLAND HILLS MIDDLE SCHOOL | Telephone Number Est 812-542-3110 Own 812-542-4703 | Date of Inspection 03/07/2024 | ID# |
| Address 3492 EDWARDSVILLE GALENA RD, GEORGETOWN I | 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 03/17/2024 |
| Owner NAFCS FOOD & NUTRITION SERVICES | | Menu Type 1 _ 2 _ 3 _ 4 <input checked="" type="checkbox"/> 5 _ | |
| Owner's Address 2801 GRANTLINE RD NEW ALBANY, IN 47150- | | | |
| Person in Charge SARA LEUTHOLD | | | |
| Responsible Person's Email SLEUTHOLD@NAFCS.ORG | | | |
| Certified Food Handler ROSE TYLER | | | |

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): SARA LEUTHOLD | Inspected by (name and title printed): Carrie Fischer EHS |
| Received by (signature): | Inspected by (signature):  |

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|-----|-----|-----|
| cc: | cc: | cc: |
|-----|-----|-----|