Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
SDH Form 51-0001

Vanderburgh County Department of Health
Telephone 812-435-5695
Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Ben's Soft Pretzels	**Telephone Number** ( ) Establishment 574-970-2188 ( ) Owner 270-313-2005	**Date of Inspection (mm/dd/yr)** 07/26/2017	**ID #** 13056
Establishment Address (number and street, city, state, zip code) 2622 Menards Dr, Evansville, Indiana, 47715			
Owner Ronald Williams	**Purpose:** ☐ Routine ☐ Follow-up ☐ Complaint ☐ Pre-Operational ☐ Temporary ☐ HACCP ☐ Other (list) _____	**Follow-up**	Release Date 08/05/2017
Owner's Address 2421 Allen Street , Owensboro, KY, 42303		Summary of Violations: C 0 NC 0 R 0	
Person in Charge Ronald Williams			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 2 3 4 5	
Certified Food Handler			

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By

Received by (name and title printed):	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Meijer Gas Station #287	**Telephone Number** ( ) Establishment 812-647-2229 ( ) Owner 616-791-5602	**Date of Inspection (mm/dd/yr)** 07/25/2017	**ID #** 13011
Establishment Address (number and street, city, state, zip code) 2611 Menards Dr, Evansville, Indiana, 47715			
Owner Meijer Stores Limited Partnership	**Purpose:** ✔ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) _____	**Follow-up** No	Release Date 08/04/2017
Owner's Address 2929 Walker Ave NW, Grand Rapids, MI, 49544		Summary of Violations: C 0 NC 0 R 0	
Person in Charge Meijer Stores Limited Partnership			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 2 3 4 5	
Certified Food Handler Norma Belt			

- **CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"**
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Section#	C/NC	R	Narrative	To Be Corrected By
			No Violations.	

Received by (name and title printed): Norma Belt	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Perfectly Fresh	**Telephone Number** ( ) Establishment 812-760-2627 ( ) Owner 812-760-2627	**Date of Inspection (mm/dd/yr)** 07/24/2017	**ID #** 12158
Establishment Address (number and street, city, state, zip code) 120 N Rosenberger Ave, Evansville, IN, 47712			
Owner Apple A Day, LLC	**Purpose:** ✔ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) _____	**Follow-up** No	Release Date 08/03/2017
Owner's Address 120 N Rosenberger Ave, Evansville, IN, 47712		Summary of Violations: C 0 NC 0 R 0	
Person in Charge Apple A Day, LLC			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	
Certified Food Handler Elizabeth Parmemter			

- **CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"**
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Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): Elizabeth Parmemter	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name GaylaCake LLC	**Telephone Number** ( ) Est. Estimate 812-454-9791 ( ) Owner 812-893-0341	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 12130
Establishment Address (number and street, city, state, zip code) 422 N Main St, Evansville, IN, 47711			
Owner Gayla Bell	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/06/2017
Owner's Address 11501 Tere Lane, Evansville, IN, 47712	☐ Follow-up ☐ Complaint	Summary of Violations:	
Person in Charge Gayla Bell	☐ Pre-Operational ☐ Temporary	C 0 NC 0 R 0	
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)*	
Certified Food Handler Gayla Bell		1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

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Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): Gayla Bell	Inspected by (name and title printed): David Horning
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Courtyard Evansville East	**Telephone Number** ( ) Establishment 812-424-4242 ( ) Owner 716-839-4000	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 12090
Establishment Address (number and street, city, state, zip code) 8105 E Walnut, Evansville, IN, 47715			
Owner Hamister Hospitality Fund II, LP	**Purpose:** ✔ Routine ☐ Follow-up ☐ Complaint ☐ Pre-Operational ☐ Temporary ☐ HACCP ☐ Other (list)	**Follow-up** No	Release Date 08/06/2017
Owner's Address 10 Lafayette Sq Ste 1900, Buffalo, NY, 14203		Summary of Violations: C 0 NC 0 R 0	
Person in Charge Hamister Hospitality Fund II, LP			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	
Certified Food Handler Sarah Keown			

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Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): Curt Baker	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Miller Family Stand	**Telephone Number** ( ) Establishment 270-635-1356 ( ) Owner 270-635-1356	**Date of Inspection (mm/dd/yr)** 07/24/2017	**ID #** 12089
Establishment Address (number and street, city, state, zip code) 1309 N Green River Rd, Evansville, IN, 47715			
Owner Pat Miller	**Purpose:** ✔ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	**Follow-up** No	Release Date 08/03/2017
Owner's Address 13668 ST RTE 120 EAST, Slaughters, KY, 42456		Summary of Violations: C 0 NC 0 R 0	
Person in Charge Pat Miller			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 2 3 4 5	
Certified Food Handler n/a			

- **CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"**
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Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): Vanessa Castellanos	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Hucks #383	**Telephone Number** (812) Establishment 812-867-3811	**Date of Inspection (mm/dd/yr)** 07/24/2017	**ID #** 12028
Establishment Address (number and street, city, state, zip code) 3131 Kansas Rd, Evansville, IN, 47720	( ) Owner 618-382-2334		
Owner MARTIN & BAYLEY INC	**Purpose:**	**Follow-up**	Release Date 08/03/2017
Owner's Address 1311 A West Main, Carmi, IL, 62821	☐ Routine ☑ Follow-up ☐ Complaint	Summary of Violations:	
Person in Charge MARTIN & BAYLEY INC	☐ Pre-Operational ☐ Temporary	C 0 NC 0 R 0	
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)*	
Certified Food Handler	_____	1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

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Section#	C/NC	R	Narrative	To Be Corrected By
			All violations from 07/03/2017 corrected.	

Received by (name and title printed): Mike Wasson	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Los Tres Caminos	**Telephone Number** ( ) Establishment 812-868-8550 ( ) Owner 812-868-8550	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 11907
Establishment Address (number and street, city, state, zip code) 12100 N Highway 41 Suite 9, Evansville, IN, 47725			
Owner Francisco H Lomeli	**Purpose:** ✔ Routine ☐ Follow-up ☐ Complaint ☐ Pre-Operational ☐ Temporary ☐ HACCP ☐ Other (list)	**Follow-up** Yes	Release Date 08/06/2017
Owner's Address 12100 Highway 41 N #9, Evansville, IN, 47725		Summary of Violations: C 5 NC 2 R 5	
Person in Charge Francisco H Lomeli			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 ○ 2 ○ 3 ○ 4 ◉ 5 ○	
Certified Food Handler jose guadalupe g eligio cruz			

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Section#	C/NC	R	Narrative	To Be Corrected By
415	C		Flies present.	07/27/2017
412	NC	R	Improper use of fly paper.	07/27/2017
187	C	R	Potentially hazardous foods not maintained at 41f or less.	Corrected
191	C	R	Foods held more than 24hrs not date marked.	Corrected
173	C	R	Improper storage of raw meat to prevent cross contamination.	Corrected
177	C	R	Items in walk in not covered or lacking lids.	Corrected
431	NC		Storage shed in need of cleaning.	07/27/2017

Received by (name and title printed): alex alcala	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Residence Inn	**Telephone Number** ( ) Establishment 812-471-7191 ( ) Owner 972-778-9316	**Date of Inspection (mm/dd/yr)** 07/25/2017	**ID #** 11831
Establishment Address (number and street, city, state, zip code) 8283 E Walnut, Evansville, IN, 47715			
Owner ASHFORD TRS EVANSVILLE III LLC	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/04/2017
Owner's Address 14185 Dallas Pkwy Ste 1150, DALLAS, TX, 75254	☐ Follow-up ☐ Complaint	Summary of Violations:	
Person in Charge ASHFORD TRS EVANSVILLE III LLC	☐ Pre-Operational ☐ Temporary	C 0 NC 1 R 0	
Responsible Person's E-mail	☐ HACCP	Menu Type *(See additional page)*	
Certified Food Handler	☐ Other (list) _____	1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

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Section#	C/NC	R	Narrative	To Be Corrected By
177	NC		Produce in kitchen area not stored at least 6 inches off of floor.	07/25/2017

Received by (name and title printed): Stacey Kauffman	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Wok N Roll	**Telephone Number** (812) Establishment 812-479-3118	**Date of Inspection (mm/dd/yr)** 07/24/2017	**ID #** 11804
Establishment Address (number and street, city, state, zip code) 311 S Green River Rd, Evansville, IN, 47715	( ) Owner 812-306-1661		
Owner Jane Tang	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/03/2017
Owner's Address 311 S GREEN RIVER RD, Evansville, IN, 47715	☐ Follow-up ☐ Complaint	Summary of Violations:	
Person in Charge Jane Tang	☐ Pre-Operational ☐ Temporary	C 1 NC 1 R 2	
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)*	
Certified Food Handler Stephanie L. Williamson		1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

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Section#	C/NC	R	Narrative	To Be Corrected By
294	C	R	Chemical sanitizer not dispensing in dish machine.	Corrected
218	NC	R	Dish machine not functioning as designed. Has contacted repair service.	Corrected

Received by (name and title printed): Jane Tang	Inspected by (name and title printed): Claire Will
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Bonefish Grill #7505	**Telephone Number** (812) Establishment 812-401-3474	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 11707
Establishment Address (number and street, city, state, zip code) 6401 E Lloyd Expressway, Evansville, IN, 47715	(812) Owner 812-282-1225		
Owner Bonefish Grill LLC	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/06/2017
Owner's Address 2202 N West Shore Blvd 5th Flr, Tampa, FL, 33607	☐ Follow-up ☐ Complaint	Summary of Violations:	
Person in Charge Bonefish Grill LLC	☐ Pre-Operational ☐ Temporary	C 1 NC 1 R 0	
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)*	
Certified Food Handler Scott West		1 ○ 2 ○ 3 ○ 4 ◉ 5 ○	

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Section#	C/NC	R	Narrative	To Be Corrected By
187	C		Hot food items not being held at correct temperature of 135 degrees Fahrenheit or greater.	Corrected
218	NC		Walk in cooler seal in need of repair.	08/03/2017

Received by (name and title printed): Scott West	Inspected by (name and title printed): Claire Will
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Roy Boy Shaved Ice	**Telephone Number** ( ) Establishment 812-319-4100 ( ) Owner 812-319-4100	**Date of Inspection (mm/dd/yr)** 07/24/2017	**ID #** 11610
Establishment Address (number and street, city, state, zip code) 1620 N Green River Rd, Evansville, IN, 47715			
Owner ROY WHETSTINE II	**Purpose:** ✔ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	**Follow-up** No	Release Date 08/03/2017
Owner's Address 4744 Woods Tower Dr, Newburgh, IN, 47630		Summary of Violations: C 1 NC 0 R 0	
Person in Charge ROY WHETSTINE II			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 2 3 4 5	
Certified Food Handler			

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Section#	C/NC	R	Narrative	To Be Corrected By
294	C		Sanitizer concentration for wiping food contact surfaces too strong.	Corrected

Received by (name and title printed): Brandon Pineda	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Taco Tierra	**Telephone Number** (812) Establishment 812-402-8226	**Date of Inspection (mm/dd/yr)** 07/24/2017	**ID #** 11554
Establishment Address (number and street, city, state, zip code) 420 S Green River Rd, Evansville, IN, 47715	(618) Owner 618-262-5441		
Owner Mike Blake	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/03/2017
Owner's Address 725 N Market, MT CARMEL, IL, 62863	☐ Follow-up ☐ Complaint	Summary of Violations:	
Person in Charge Mike Blake	☐ Pre-Operational ☐ Temporary	C 1 NC 1 R 1	
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)*	
Certified Food Handler Hannah Lee		1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

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Section#	C/NC	R	Narrative	To Be Corrected By
324	C	R	Hand washing sinks in facility not maintaining 100 degrees. Has contacted plumbing service to check mixing valve.	Corrected
410	NC		Light shielding lacking on light in southeast area of kitchen.	Corrected

Received by (name and title printed): Hannah Lee	Inspected by (name and title printed): Claire Will	
Received by (signature):	Inspected by (signature):	
cc:	cc:	cc:

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Establishment Name Bob´s Gym	**Telephone Number** ( ) Establishment 812-402-4775 ( ) Owner 812-424-2627	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 11466
Establishment Address (number and street, city, state, zip code) 8700 N Kentucky Ave, Evansville, IN, 47725			
Owner BOB SWALLOWS	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/06/2017
Owner's Address 200 N Rosenberger Ave, Evansville, IN, 47712	☐ Follow-up	Summary of Violations:	
Person in Charge BOB SWALLOWS	☐ Complaint	C 1 NC 1 R 0	
Responsible Person's E-mail	☐ Pre-Operational		
	☐ Temporary	Menu Type *(See additional page)*	
Certified Food Handler	☐ HACCP		
	☐ Other (list) _____	1 ○ 2 ● 3 ○ 4 ○ 5 ○	

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Section#	C/NC	R	Narrative	To Be Corrected By
303	C		Sanitizer below required concentration in 3 compartment sink.	Corrected
291	NC		Chemical sanitizer test strips not available.	07/27/2017

Received by (name and title printed): Jeremy Hawkins	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

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Establishment Name Wendy´s #346	**Telephone Number** (812-401-7126 Establishment) (812-482-3212 Owner)	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 11439
Establishment Address (number and street, city, state, zip code) 401A S Boehne Camp Rd., Evansville, IN, 47712			
Owner SERVUS, Inc.	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/06/2017
Owner's Address 4201 Mannheim Rd Suite A, Jasper, IN, 47546	☐ Follow-up	Summary of Violations:	
Person in Charge SERVUS, Inc.	☐ Complaint	C 0 NC 0 R 0	
Responsible Person's E-mail	☐ Pre-Operational		
	☐ Temporary	Menu Type *(See additional page)*	
Certified Food Handler MACKENZIE MATTINGLY	☐ HACCP	1 ○ 2 ○ 3 ◉ 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 NARRATIVE BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): David Ennulat	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
SDH Form 51-0001

Vanderburgh County Department of Health
Telephone 812-435-5695
Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Wendy´s #326	**Telephone Number** (812) Establishment 812-477-4522	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 11437
Establishment Address (number and street, city, state, zip code) 4610 Lincoln Ave., Evansville, IN, 47714	(812) Owner 812-482-3212		
Owner SERVUS, Inc.	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/06/2017
Owner's Address 4201 Mannheim Rd Suite A, Jasper, IN, 47546	☐ Follow-up	Summary of Violations:	
Person in Charge SERVUS, Inc.	☐ Complaint ☐ Pre-Operational	C 0 NC 3 R 0	
Responsible Person's E-mail	☐ Temporary ☐ HACCP	Menu Type *(See additional page)*	
Certified Food Handler Nichole Jones	☐ Other (list) _____	1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
431	NC		Physical facility in need of cleaning.	07/27/2017
346	NC		Soap not provided at serving area hand sink.	Corrected
218	NC		Soda machine in need of service.	08/10/2017

Received by (name and title printed): Lachelle Hernandez	Inspected by (name and title printed): Claire Will
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
SDH Form 51-0001

Vanderburgh County Department of Health
Telephone 812-435-5695
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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name United Caring Shelter	**Telephone Number** ( ) Establishment 812-426-9960 ( ) Owner 812-422-0297	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 11419
Establishment Address (number and street, city, state, zip code) 324 NW Sixth St., EVANSVILLE, IN, 47708			
Owner UNITED CARING SERVICES	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/06/2017
Owner's Address 324 NW 6th St, Evansville, IN, 47708	☐ Follow-up ☐ Complaint	Summary of Violations: C 0 NC 1 R 0	
Person in Charge UNITED CARING SERVICES	☐ Pre-Operational ☐ Temporary		
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)* 1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	
Certified Food Handler Phyllis Ogburn			

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
232	NC		Wire shelving inside kitchen walk-in cooler in need of cleaning	08/03/2017

Received by (name and title printed): Phyllis Ogburn	Inspected by (name and title printed): David Horning
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
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Vanderburgh County Department of Health
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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Subway #12340	**Telephone Number** ( ) Establishment 812-473-5255 ( ) Owner 812-473-5255	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 11365
Establishment Address (number and street, city, state, zip code) 1401 Covert Ave, Evansville, IN, 47714			
Owner Shantee, Inc.	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/06/2017
Owner's Address 1401 Covert Ave, Evansville, IN, 47714	☐ Follow-up ☐ Complaint	Summary of Violations: C 0 NC 0 R 0	
Person in Charge Shantee, Inc.	☐ Pre-Operational ☐ Temporary		
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)* 1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	
Certified Food Handler Casey Johnston			

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations	

Received by (name and title printed): Casey Johnston	Inspected by (name and title printed): Claire Will
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
SDH Form 51-0001

Vanderburgh County Department of Health
Telephone 812-435-5695
Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Howard Johnson	**Telephone Number** ( ) Establishment 812-476-9626 ( ) Owner 812-476-9626	**Date of Inspection (mm/dd/yr)** 07/24/2017	**ID #** 11318
Establishment Address (number and street, city, state, zip code) 1101 N Green River Rd, Evansville, IN, 47715			
Owner Jasmin Kumat Patel	**Purpose:** ☐ Routine ☐ Follow-up ☐ Complaint ☐ Pre-Operational ☐ Temporary ☐ HACCP ☐ Other (list)	**Follow-up**	Release Date 08/03/2017
Owner's Address 1101 N Green River Rd, Evansville, IN, 47715		Summary of Violations: C 0 NC 0 R 0	
Person in Charge Jasmin Kumat Patel			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 2 3 4 5	
Certified Food Handler n/a			

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): jk patel	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
SDH Form 51-0001

Vanderburgh County Department of Health
Telephone 812-435-5695
Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Penny Lane Coffeehouse	**Telephone Number** ( ) Establishment 812-421-8741 ( ) Owner 812-421-8741	**Date of Inspection (mm/dd/yr)** 07/25/2017	**ID #** 11253
Establishment Address (number and street, city, state, zip code) 600 SE Second St., Evansville, IN, 47713			
Owner WGB Coffee LLC	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/04/2017
Owner's Address 3113 E Cherry St, Evansville, IN, 47714	☐ Follow-up ☐ Complaint	Summary of Violations: C 1 NC 0 R 0	
Person in Charge WGB Coffee LLC	☐ Pre-Operational ☐ Temporary		
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)* 1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	
Certified Food Handler Allyson Woods			

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
294	C		Sanitizer lacking for wipe rags and ware washing.	Corrected

Received by (name and title printed): Sierra King	Inspected by (name and title printed): David Horning
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
SDH Form 51-0001

Vanderburgh County Department of Health
Telephone 812-435-5695
Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Motomart #4202	**Telephone Number** ( ) Establishment 812-473-0028 ( ) Owner 618-233-6754	**Date of Inspection (mm/dd/yr)** 07/24/2017	**ID #** 11218
Establishment Address (number and street, city, state, zip code) 1900 N Green River Rd, Evansville, IN, 47715			
Owner FKG Oil Co	**Purpose:** ☐ Routine ☑ Follow-up ☐ Complaint ☐ Pre-Operational ☐ Temporary ☐ HACCP ☐ Other (list) _____	**Follow-up** No	Release Date 08/03/2017
Owner's Address 721 W Main Street PO Box 122, Belleville, IL, 62222		Summary of Violations: C 0 NC 0 R 0	
Person in Charge FKG Oil Co			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 ○ 2 ● 3 ○ 4 ○ 5 ○	
Certified Food Handler			

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
			Violation from 05/15/2017 corrected.	

Received by (name and title printed): Shelley Wilson	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
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Telephone 812-435-5695
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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name McDonalds	**Telephone Number** ( ) Establishment 812-425-1712 ( ) Owner 812-477-1602	**Date of Inspection (mm/dd/yr)** 07/24/2017	**ID #** 11202
Establishment Address (number and street, city, state, zip code) 1148 Washington Ave., EVANSVILLE, IN, 47714			
Owner MCDONALDS/DBK VISION	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/03/2017
Owner's Address PO Box 5708, Evansville, IN, 47716	☐ Follow-up	Summary of Violations:	
Person in Charge MCDONALDS/DBK VISION	☐ Complaint ☐ Pre-Operational	C 0 NC 2 R 1	
Responsible Person's E-mail	☐ Temporary ☐ HACCP	Menu Type *(See additional page)*	
Certified Food Handler Marcella Wisdom	☐ Other (list) _____	1 ○ 2 ● 3 ○ 4 ○ 5 ○	

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
347	NC		No drying towels at hand washing sink.	07/24/2017
433	NC	R	Mop not correctly stored for drying.	Corrected

Received by (name and title printed): diamond	Inspected by (name and title printed): David Horning
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Comfort Inn East	**Telephone Number** ( ) Establishment 812-476-3600 ( ) Owner 812-476-3600	**Date of Inspection (mm/dd/yr)** 07/25/2017	**ID #** 11165
Establishment Address (number and street, city, state, zip code) 8331 Walnut St, Evansville, IN, 47714			
Owner Lotus Hotel Group	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/04/2017
Owner's Address 8331 Walnut St, Evansville, IN, 47714	☐ Follow-up ☐ Complaint	Summary of Violations:	
Person in Charge Lotus Hotel Group	☐ Pre-Operational ☐ Temporary	C 0 NC 0 R 0	
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)*	
Certified Food Handler Justin Morris		1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): Omkar Bhatt	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
SDH Form 51-0001

Vanderburgh County Department of Health
Telephone 812-435-5695
Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Charles Denby Post #2953	**Telephone Number** ( ) Establishment 812-477-3141 ( ) Owner 812-477-3141	**Date of Inspection (mm/dd/yr)** 07/28/2017	**ID #** 11138
Establishment Address (number and street, city, state, zip code) 1800 Pollack Ave., Evansville, IN, 47714			
Owner Charles Denby Post #2953	**Purpose:** ✔ Routine ☐ Follow-up ☐ Complaint ☐ Pre-Operational ☐ Temporary ☐ HACCP ☐ Other (list) _____	**Follow-up** No	Release Date 08/07/2017
Owner's Address 1800 POLLACK AVE, Evansville, IN, 47714		Summary of Violations: C 0 NC 0 R 0	
Person in Charge Charles Denby Post #2953			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 ◉ 2 ○ 3 ○ 4 ○ 5 ○	
Certified Food Handler			

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): Donna Townsend	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
SDH Form 51-0001

Vanderburgh County Department of Health
Telephone 812-435-5695
Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Burdette Concessions	**Telephone Number** ( ) Establishment 812-435-5602 ( ) Owner	**Date of Inspection (mm/dd/yr)** 07/26/2017	**ID #** 11115
Establishment Address (number and street, city, state, zip code) 5301 Nurrenbern Rd., EVANSVILLE, IN, 47712			
Owner BURDETTE POOL	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/05/2017
Owner's Address	☐ Follow-up ☐ Complaint	Summary of Violations: C 2 NC 0 R 0	
Person in Charge BURDETTE POOL	☐ Pre-Operational ☐ Temporary		
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)* 1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	
Certified Food Handler Terry Travis			

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
438	C		Spray bottles with cleaning chemicals need relabel.	Corrected
432	C		Mop water/liquid waste disposed improperly.	Corrected

Received by (name and title printed): Deonte Turnley	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Vanderburgh County Department of Health
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Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Logans Roadhouse #381	**Telephone Number** ( ) Establishment 812-421-0908 ( ) Owner 615-885-9056	**Date of Inspection (mm/dd/yr)** 07/28/2017	**ID #** 11091
Establishment Address (number and street, city, state, zip code) 5645 Pearl Dr, Evansville, IN, 47712			
Owner LOGANS ROADHOUSE INC	**Purpose:** ☐ Routine ☑ Follow-up ☐ Complaint ☐ Pre-Operational ☐ Temporary ☐ HACCP ☐ Other (list)	**Follow-up** No	Release Date 08/07/2017
Owner's Address 3011 Armory Dr Suite 300, Nashville, TN, 37204		Summary of Violations: C 0 NC 0 R 0	
Person in Charge LOGANS ROADHOUSE INC			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	
Certified Food Handler Joseph S Risley			

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
			Violations from 7-21-17 corrected.	

Received by (name and title printed): Shannon Shiery	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Lic´s Ice Cream	**Telephone Number** ( ) Establishment 812-473-0569 ( ) Owner 812-424-3066	**Date of Inspection (mm/dd/yr)** 07/24/2017	**ID #** 11084
Establishment Address (number and street, city, state, zip code) 4501 Lincoln Ave., Evansville, IN, 47714			
Owner Don Smith	**Purpose:** ✔ Routine	**Follow-up** Yes	Release Date 08/03/2017
Owner's Address 11 N 5th Street, Evansville, IN, 47708	☐ Follow-up	Summary of Violations:	
Person in Charge Don Smith	☐ Complaint ☐ Pre-Operational	C 2 NC 1 R 0	
Responsible Person's E-mail	☐ Temporary ☐ HACCP	Menu Type *(See additional page)*	
Certified Food Handler Jamia Brown	☐ Other (list) _____	1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
415	C		Live pest activity present. Pest control contacted.	07/27/2017
294	C		Chemical sanitizer strength for wiping cloths too weak.	Corrected
430	NC		Rubber base coving needs replacing in various areas.	08/14/2017

Received by (name and title printed): Ashley Matte	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Lic´s Ice Cream	**Telephone Number** ( ) Establishment 812-473-0569 ( ) Owner 812-424-3066	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 11084
Establishment Address (number and street, city, state, zip code) 4501 Lincoln Ave., Evansville, IN, 47714			
Owner Don Smith	**Purpose:** ☐ Routine	**Follow-up**	Release Date 08/06/2017
Owner's Address 11 N 5th Street, Evansville, IN, 47708	☑ Follow-up	Summary of Violations:	
Person in Charge Don Smith	☐ Complaint ☐ Pre-Operational	C 0 NC 0 R 0	
Responsible Person's E-mail	☐ Temporary ☐ HACCP	Menu Type *(See additional page)*	
Certified Food Handler Jamia Brown	☐ Other (list) _____	1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
			Critical violations from previous inspection corrected.	

Received by (name and title printed): Becky Hodges	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Culver's West	**Telephone Number** (812) Establishment 812-492-8000	**Date of Inspection (mm/dd/yr)** 07/24/2017	**ID #** 13753
Establishment Address (number and street, city, state, zip code) 4850 W Lloyd Expressway, Evansville, IN, 47712	(812) Owner 812-492-8000		
Owner Collette Crow	**Purpose:**	**Follow-up** No	Release Date 08/03/2017
Owner's Address PO Box 6366, Evansville, IN, 47719	☐ Routine ☐ Follow-up ☐ Complaint	Summary of Violations:	
Person in Charge Collette Crow	☐ Pre-Operational ☐ Temporary	C 0 NC 0 R 0	
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)*	
Certified Food Handler Collette Crow	Final	1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

- **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 BELOW AS "R"**

Section#	C/NC	R	Narrative	To Be Corrected By
			OK to open!	
			Congratulations!	

Received by (name and title printed): Collette Crow	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Vanderburgh County Department of Health
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Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Hilltop Inn	**Telephone Number** (812) Establishment 812-422-1757 (812) Owner 812-483-0432	**Date of Inspection (mm/dd/yr)** 07/28/2017	**ID #** 11029
Establishment Address (number and street, city, state, zip code) 1100 Harmony Way, Evansville, IN, 47720			
Owner Marta Hollen	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/07/2017
Owner's Address 3005 Winternheimer Dr, Evansville, IN, 47720	☐ Follow-up ☐ Complaint	Summary of Violations:	
Person in Charge Marta Hollen	☐ Pre-Operational ☐ Temporary	C 0 NC 3 R 0	
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)*	
Certified Food Handler Randall Graves		1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

- **CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"**
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Section#	C/NC	R	Narrative	To Be Corrected By
438	NC		Spray bottles with cleaning chemicals need relabel.	Corrected
234	NC		Bulk container scoop lacking proper handle.	Corrected
204	NC		Using improper utensil for ice serving. Use ice scoop.	Corrected

Received by (name and title printed): Robert Gibbs	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
SDH Form 51-0001

Vanderburgh County Department of Health
Telephone 812-435-5695
Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Hickory Pit Stop	**Telephone Number** ( ) Establishment 812-422-6919 ( ) Owner 812-422-6919	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 11026
Establishment Address (number and street, city, state, zip code) 1521 N Main St, Evansville, IN, 47711			
Owner Hickory Pit Stop Inc	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/06/2017
Owner's Address 1513 N Main St, Evansville, IN, 47711	☐ Follow-up ☐ Complaint	Summary of Violations:	
Person in Charge Hickory Pit Stop Inc	☐ Pre-Operational ☐ Temporary	C 0 NC 1 R 0	
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)*	
Certified Food Handler Brandy Jones		1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

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Section#	C/NC	R	Narrative	To Be Corrected By
232	NC		Ice machine guard in need of cleaning.	08/03/2017

Received by (name and title printed): Jeff Ellison	Inspected by (name and title printed): David Horning
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Establishment Name Hardees	**Telephone Number** ( ) Establishment 812-422-0151 ( ) Owner 812-477-5569	**Date of Inspection (mm/dd/yr)** 07/25/2017	**ID #** 11011
Establishment Address (number and street, city, state, zip code) 2315 W Illinois St, Evansville, IN, 47712			
Owner Sandy´s Associates Inc	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/04/2017
Owner's Address 1503 N Boeke Rd, Evansville, IN, 47711	☐ Follow-up ☐ Complaint	Summary of Violations:	
Person in Charge Sandy´s Associates Inc	☐ Pre-Operational ☐ Temporary	C 0 NC 0 R 0	
Responsible Person's E-mail	☐ HACCP	Menu Type *(See additional page)*	
Certified Food Handler Shawn Cutsinger	☐ Other (list) _____	1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

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Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): Shawn Cutsinger	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Establishment Name G.D. Ritzy´s	**Telephone Number** (812) Establishment 812-425-8700	**Date of Inspection (mm/dd/yr)** 07/26/2017	**ID #** 10978
Establishment Address (number and street, city, state, zip code) 4810 University Dr., EVANSVILLE, IN, 47712	(812) Owner 812-474-6256		
Owner Dan Grunow/Andy Guagenti	**Purpose:** ✔ Routine	**Follow-up** Yes	Release Date 08/05/2017
Owner's Address 2641 N Cullen Ave, Evansville, IN, 47715	☐ Follow-up ☐ Complaint	Summary of Violations: C 0 NC 1 R 1	
Person in Charge Dan Grunow/Andy Guagenti	☐ Pre-Operational ☐ Temporary		
Responsible Person's E-mail	☐ HACCP ☐ Other (list)	Menu Type *(See additional page)* 1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	
Certified Food Handler Carol Ray			

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Section#	C/NC	R	Narrative	To Be Corrected By
218	NC	R	Reach in cooler in kitchen area, door seal in need of repair.	08/02/2017

Received by (name and title printed): Kerri Durbin	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Establishment Name Fairfield Inn Evansville East	**Telephone Number** ( ) Establishment 812-471-7000 ( ) Owner 210-571-0333	**Date of Inspection (mm/dd/yr)** 07/25/2017	**ID #** 10960
Establishment Address (number and street, city, state, zip code) 7879 Eagle Crest Blvd., Evansville, IN, 47715			
Owner CIP II BCL Tenant LLC	**Purpose:** ✔ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) _____	**Follow-up** No	Release Date 08/04/2017
Owner's Address 420 Baltimore Ave, San Antonio, TX, 782145		Summary of Violations: C 0 NC 0 R 0	
Person in Charge CIP II BCL Tenant LLC			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 2 3 4 5	
Certified Food Handler			

- **CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"**
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Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): Ben Leavitt	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Establishment Name Drury Inn & Suites - Evansville East	**Telephone Number** ( ) Establishment 812-471-3400 ( ) Owner 573-334-8281	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 10934
Establishment Address (number and street, city, state, zip code) 100 Cross Point Blvd., EVANSVILLE, IN, 47715			
Owner Drury Development Corp	**Purpose:** ✔ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) _____	**Follow-up** No	Release Date 08/06/2017
Owner's Address PO Box 910, Cape Girardeau, MO, 63702		Summary of Violations: C 0 NC 0 R 0	
Person in Charge Drury Development Corp			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 ○ 2 ● 3 ○ 4 ○ 5 ○	
Certified Food Handler John Noback			

- **CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"**
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Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): Lucas Pickelheimer	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Establishment Name Donut Bank	**Telephone Number** (812) Estab Name 812-426-1011	**Date of Inspection (mm/dd/yr)** 07/25/2017	**ID #** 10927
Establishment Address (number and street, city, state, zip code) 210 N St.Joseph Ave, Evansville, IN, 47712	(812) Owner 812-426-0011		
Owner CHRIS KEMPF	**Purpose:** ✔ Routine	**Follow-up** No	Release Date 08/04/2017
Owner's Address 1031 Diamond Ave, Evansville, IN, 47711	☐ Follow-up	Summary of Violations:	
Person in Charge CHRIS KEMPF	☐ Complaint	C 0 NC 0 R 0	
Responsible Person's E-mail	☐ Pre-Operational		
	☐ Temporary	Menu Type *(See additional page)*	
Certified Food Handler	☐ HACCP		
	☐ Other (list) _____	1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	

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Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): Debbie Baker	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Establishment Name Arby´s #5754	**Telephone Number** ( ) Establishment 812-421-1200 ( ) Owner 678-514-4377	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 10847
Establishment Address (number and street, city, state, zip code) 4650 University Dr., Evansville, IN, 47712			
Owner Arby´s Restaurant Group	**Purpose:** ✔ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) _____	**Follow-up** No	Release Date 08/06/2017
Owner's Address 1155 Perimeter Center West, Atlanta, GA, 30338		Summary of Violations: C 0 NC 0 R 0	
Person in Charge Arby´s Restaurant Group			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 2 3 4 5	
Certified Food Handler Kathy Grossheart			

- **CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"**
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Section#	C/NC	R	Narrative	To Be Corrected By
			No noted violations.	

Received by (name and title printed): Lori Hayes	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:

Retail Food Establishment Inspection Report

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Establishment Name MOD Pizza	**Telephone Number** ( ) Establishment 812-602-5525 ( ) Owner 859-225-3680	**Date of Inspection (mm/dd/yr)** 07/27/2017	**ID #** 13762
Establishment Address (number and street, city, state, zip code) 6401 E. Lloyd Expressway, Evansville, IN, 47715			
Owner Garyen Denning	**Purpose:** ☐ Routine ☐ Follow-up ☐ Complaint ☐ Pre-Operational ☐ Temporary ☐ HACCP ☑ Other (list) Final	**Follow-up** No	Release Date 08/06/2017
Owner's Address 145 Rose St., Lexington, Kentucky, 40507		Summary of Violations: C 0 NC 0 R 0	
Person in Charge Garyen Denning			
Responsible Person's E-mail		Menu Type *(See additional page)* 1 ○ 2 ○ 3 ◉ 4 ○ 5 ○	
Certified Food Handler Veronica Islas			

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Section#	C/NC	R	Narrative	To Be Corrected By
			Approved for operation.	

Received by (name and title printed): Veronica Islas	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):

cc:	cc:	cc: