

Establishm	er Kir ent Addres Aenard s LLC ddress cted> Cted> cted> cted> cted> a Person's	E-ma	#1075 mber and street, city, state, zip code) Drive, Evansville, Indiana, 47715	(8) ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓	ephone Number 12-471-9730 redacted> rose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C_1	r) 1/2018 p Release 10/ v of Violation NC	
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	I ARK	ED "C"			
• VIOLATIO	ON(S) REPE	ATEI) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!	MMA	RY OF VIOLATIONS" AN	D IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
294	С	Chemical sanitizer concentration for wiping cloths too weak.						rrected
		1						
-	Received by (name and title printed):				ected by (name and title pr edacted>	rinted):	I	
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325 S	ent Addres	s (nu	t ^{mber and street, city, state, zip code)} / Ave, Evansville, Indiana, 47714	8 ⁾ (B12^E228 ^m 1 077) Owner		^{r)} 3/2018	ID# 13240
^{Owner} Shree	Maha	ade	ev inc		rrpose: Routine	Follow-u NO		se Date 28/2018
Owner's A					Follow-up	_	of Violation	
<reda< td=""><td>cted></td><td></td><td></td><td></td><td>Complaint</td><td>-</td><td></td><td></td></reda<>	cted>				Complaint	-		
Person in C					Pre-Operational		NC	l1
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Responsible	e Person's	E-ma	a da	i –	НАССР	Menu Ty	pe <i>(See addi</i>	tional page)
Certified F	ood Handle	er			Other (list)	$1\bigcirc 2$	$\bigcirc_3\bigcirc$	$)_4 \bigcirc 5 \bigcirc$
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• CRITICAI	L ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMA	ARY OF VIOLATIONS" AN	D IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
346	NC	R	Soap dispenser at hand si	nk	is broken.	09/1	18/2018	
Received by				-	ected by (name and title predacted>	rinted):		
Received by	(signature)):		Insp	ected by (signature):			
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Establishm 1641 Owner Gulsh Owner's Ad <reda Person in C <reda Responsible Certified F <redac< th=""><th>Side ent Addres S Ker an Go ddress cted> Charge cted> e Person's</th><th>ss (nu htu) Dra E-ma</th><th></th><th>(8) (~ Pu (~</th><th>Sephone Number 312-431-5373 <redacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted></th><th>Follow-u NO Summary C_1</th><th>p Releas 0/2018 p Releas 09/ of Violation NC</th><th></th></redac<></reda </reda 	Side ent Addres S Ker an Go ddress cted> Charge cted> e Person's	ss (nu htu) Dra E-ma		(8) (~ Pu (~	Sephone Number 312-431-5373 <redacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C_1	p Releas 0/2018 p Releas 09/ of Violation NC	
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
345	С			mr	sink			20/2018
	345 C Hand sink used as dump sink.							0/2010
Received by	acteo	<u> b</u>		-	redacted>	rinted):		
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Establishm 4300 Owner	sville ent Addres Hecke sville (ddress Cted> charge cted> e Person's	E-ma	ports Complex West mber and street, city, state, zip code) Rd, Evansville, IN, 47720 nvention Bureau		lephone Number 12-421-2200 (redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	p Releas 10/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
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			No noted violatio	าทร				- U
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Establishm 4300 Owner	sville ent Addres Hecke sville (ddress cted> Charge cted> e Person's	E-ma	ports Complex East mber and street, city, state, zip code) Rd, Evansville, IN, 47725 nvention Bureau		phone Number 12-401-1890 redacted> pose: coutine collow-up complaint re-Operational remporary IACCP Other (list)	Follow-u NO Summary C_1	p Releas 10/ of Violation NC	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
294	C	Λ		r win	ing clothe too w	vook		rrected
294	U		Chemical sanitizer concentration for	0	Tecleu			
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Establishm 2126 Owner	cted> cted cted> cted cted> cted cted cted cted cted cted cted cted	ss (nu ank rtie	eet Tavern mber and street, city, state, zip code) lin St, Evansville, IN, 47712 s LLC		lephone Number 312-401-1313 <redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Release 0/2018 P Release 09/	<u>R</u> <u>O</u> tional page)
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	NARRATIVE	BELOW AS "R"
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2220 N Owner	ent Address N Green N Orestr ddress Cted> Cted> Cted> cted> cted> cted> ood Handle	ss (nu E-ma	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715 nts, Inc.	Telephone Number (812-618-2050 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 1/2018 1p Releas	<u> </u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		ND IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
294	C	K	Chemical sanitizer concentration for	wining clothe too	wook		rrected
294		<u> </u>			weak.		Tecleu
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	s Gyr ent Addres entee SWAL ddress cted> cted> cted> e Person's	E-ma	mber and street, city, state, zip code) Ves Ct, Evansville, IN, 47715 DWS		lephone Number 12-471-9590 Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r) 7/2018 P Releas 09/ of Violation NC	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
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			No noted violation	ons				
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Establishm 301 N Owner	et Stu ent Addres W 3rc valk E ddress cted> cted> cted> e Person's	ss (nu d S De\ E-ma	et Living mber and street, city, state, zip code) St, Evansville, IN, 47708 velopment LLC	Telephone Number (812-402-9955 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 0/2018 09/ 09/ of Violation NC	$\frac{ID \#}{12062}$ $\frac{29/2018}{29/2018}$ $\frac{D}{120} R = 0$ $\frac{100}{100} R = 0$ $\frac{100}{100} R = 0$
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		D IN THE N	ARRATIVE	BELOW AS "R"
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Establishm 1230 Owner JOShU Owner's Ad <redat Person in C <redat Responsible Certified Fe <redat< th=""><th>ua Ac ent Addres E IIIin a Aca ddress cted> cted> cted> cted> cted> cted> cted> cted> cted></th><th>ss (nu OIS ade E-ma</th><th>demy - Aramark mber and street, city, state, zip code) St, Evansville, IN, 47711 emy/Aramark il</th><th>) (v</th><th>Performe Number 312-401-6300 <redacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted></th><th>Follow-u NO Summary C</th><th>r) D/2018 P Releas 09/ of Violation NC</th><th>$\frac{ID \#}{11990}$ $\frac{29/2018}{R}$ $\frac{D}{R}$ $\frac{D}{R}$ $\frac{D}{R}$ $\frac{D}{1000}$ $\frac{1000}{1000}$</th></redat<></redat </redat 	ua Ac ent Addres E IIIin a Aca ddress cted> cted> cted> cted> cted> cted> cted> cted> cted>	ss (nu OIS ade E-ma	demy - Aramark mber and street, city, state, zip code) St, Evansville, IN, 47711 emy/Aramark il) (v	Performe Number 312-401-6300 <redacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C	r) D/2018 P Releas 09/ of Violation NC	$\frac{ID \#}{11990}$ $\frac{29/2018}{R}$ $\frac{D}{R}$ $\frac{D}{R}$ $\frac{D}{R}$ $\frac{D}{1000}$ $\frac{1000}{1000}$
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
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1356 N Owner Yun L Owner's Au <reda< th=""><th>d Buf ent Address N Gree in ddress cted></th><th>en en</th><th>mber and street, city, state, zip code) River Rd, Evansville, IN, 47715</th><th>Telephone Number (812-476-6666 (<redacted> Purpose: Routine Follow-up Complaint</redacted></th><th>Follow-u NO Summary</th><th>p Releas 09/2018 P Releas 09/</th><th></th></reda<>	d Buf ent Address N Gree in ddress cted>	en en	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	Telephone Number (812-476-6666 (<redacted> Purpose: Routine Follow-up Complaint</redacted>	Follow-u NO Summary	p Releas 09/2018 P Releas 09/		
Person in C				Pre-Operational				
Responsible			il	Temporary HACCP	Menu Type (See additional page)			
Certified F		er		Other (list)	1 <u>0</u> 2	<u>O</u> 3	$\underline{O}_4 \underline{O}_5 $	
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	.,		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N			
Section#	C/NC C	R R	Narrative	uired temperature		prrected By rrected		
295	C			Cold food not maintained at required temperature. Can opener in need of cleaning.				
324	C		· · · · ·	ar at drink prep area hand washing sink not reaching required temperature.				
				00	rrected			
Received by	(name and	titla	vrinted).	Inspected by (name and title p	rinted):			
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	ent Addres Cover B Tar ddress cted> Charge cted> e Person's	nar nar		(0) (Pu 	Hephone Number 12-473-7222 (redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r) 7/2018 P Releas 09/ of Violation NC	$\frac{ID \#}{11882}$ $\frac{27/2018}{R}$ $\frac{27/2018}{R}$ $\frac{27}{2018}$ $\frac{1}{20}$	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THF N	JARRATIVE	RFI OW AS "P"	
Section#	C/NC	R	Narrative	10110125	IN OF VIOLATIONS AN	DINTIE			
347	NC	Λ		To Be Corrected By ovided at hand sink. 09/17/2018					
-		Р	Hand drying provisions not pro				09/17/2018		
295	NC	R	Shelves inside walk in cooler in						
413	NC	R	R Back door in need of repair.					21/2018	
413 No K Dack door in fleed of lepail.									
Received by <red< b=""> Received by</red<>	acte	d>	vrinted):	<ľ	bected by (name and title proceeded by (name and title proceeded) bected by (signature):	inted):			
Keeliveu by	, (signature	<i>j</i> .		msp	in the signature).				
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Establishm 925 N Owner	A HU ent Address Gree A HUT ddress cted> Charge cted> e Person's	en F	#316308 mber and street, city, state, zip code) River Rd, Evansville, IN, 47715 F AMERICA LLC c/o DMA	Telephone Number (812-476-1666 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 09/ of Violation NC	ID # 11839 e Date 28/2018 is: \mathbf{R} 2 \mathbf{R} 2 \mathbf{R} 2 \mathbf{R} 2 \mathbf{R} 2 \mathbf{R} 2 \mathbf{R} 2 \mathbf{R} 2 2 \mathbf{R} 2 2 \mathbf{R} 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
		RE IDF	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
• VIOLATIO	DN(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				orrected By	
295	NC	R	Racks in walk-in cool	er soiled.		09/18/2018		
138 NC R Hair restraint not utilized				or facial hair.		09/1	8/2018	
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Establishme 3220 Owner DOLG Owner's Ac <reda Person in C <reda Responsible</reda </reda 	r Ger ent Addres Marin ENC ddress cted> harge cted> Person's	s (nun er OR E-mai	al #11697 nber and street, city, state, zip cod Dr, Evansville, IN, P LLC I	, 47711	Telephone Number (812-471-5783 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C))/2018 p Releas	29/2018
			FROM PREVIOUS INSPECTIONS A			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
295	NC		Milk o	ooler in need of	cleaning.			9/2018
200				Milk cooler in need of cleaning.				
Received by		-	rinted):		Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):				
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Establishm	UIS U	s (nu	ted Church of Christ mber and street, city, state, zip code) hiana Rd, Evansville, IN, 47720	(ephone Number) Establishment) Owner	Date of Ing (mm/dd/yr 09/19		ID# 11785
^{Owner} St Pau	uls Ur		ed Church of Christ	Pur	rpose: Routine	Follow-u Yes	09/	29/2018
Owner's Ad					Follow-up	Summary	of Violation	
Person in C	harge				Complaint Pre-Operational	$_{\rm C}$ ()	NC	1
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Responsible	Person's	E-mai	1	H	НАССР	Menu Typ	be (See addi	ional page)
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Section#	C/NC	R	Narrative				To Be Co	orrected By
218	NC	R	Dishwasher not functioning	j as	designed.		09/2	26/2018
Received by		-			ected by (name and title pr edacted>	inted):		
Received by	(signature)	12		Inspe	ected by (signature):			
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Establishm	UIS L	ss (nu	ted Church of Christ mber and street, city, state, zip code) hiana Rd, Evansville, IN, 47720	(elephone Number) Establishment) Owner	Date of In (mm/dd/yr 09/19		^{ID#} 11785	
Owner St Pau	uls Ur	nite	ed Church of Christ	Pu	irpose: Routine	Follow-u NO	No Release Date 09/29/2018		
Owner's A				~	Follow-up	Summary	of Violation	ns:	
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Person in C					Pre-Operational				
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Responsible	2 rerson's	с-ша	11		НАССР	Menu Ty	pe (see addi	lional page)	
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Section#	C/NC	R	Narrative				To Be Co	orrected By	
		<u> </u>	Follow up from 9-19	9-2	018.				
			All violations from the previous ir			d.			
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Establishm 1905 Owner HARB Owner's Au <reda< th=""><th>d HB ent Address W Fra BHJAN ddress cted></th><th>s (nu Ink I S</th><th>Corp-Marathon ^{mber and street, city, state, zip code)} lin St, Evansville, IN, 47712 INGH</th><th>(8 (Pu</th><th>lephone Number 12-421-1460 <redacted> rpose: Routine Follow-up Complaint</redacted></th><th>^{Follow-u} NO</th><th>p Releas 09/</th><th></th></reda<>	d HB ent Address W Fra BHJAN ddress cted>	s (nu Ink I S	Corp-Marathon ^{mber and street, city, state, zip code)} lin St, Evansville, IN, 47712 INGH	(8 (Pu	lephone Number 12-421-1460 <redacted> rpose: Routine Follow-up Complaint</redacted>	^{Follow-u} NO	p Releas 09/	
Person in C					Pre-Operational	с_ U	NC	R
Responsible			il		Temporary HACCP	Menu Ty	pe <i>(See addi</i>	tional page)
Certified F		er			Other (list)	1 <u>0</u> 2	<u></u> 3	<u>4</u> <u>0</u> 5 <u>0</u>
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			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative		of ropair			orrected By
218 NC R Walk in cooler latch in n					or repair.		09/2	28/2018
Received by	acteo	/>		<r< td=""><td>ected by (name and title pr edacted></td><td>rinted):</td><td></td><td></td></r<>	ected by (name and title pr edacted>	rinted):		
Received by	(signature)):		Insp	ected by (signature):			
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	OWN ent Addres Gree t IN L ddress Cted> Charge Cted> e Person's	E-ma		Telephone Number (812-473-3800 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) B/2018 P Releas 09/ of Violation NC_	
• CRITICAL	. ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	AARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by	(name and	title	printed):	Inspected by (name and title p	rinted):		
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Received by	(signature):		Inspected by (signature):			
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Establishm 5614 Owner	ts Na ent Addres E Virc rine E ddress cted> Charge cted> e Person's	ss (nu gini Elbe E-ma	ral Food Market Inc mber and street, city, state, zip code) a St, Evansville, IN, 47715 ert-Burkemper	Telephone Number (812-471-5071 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 7/2018 P Releas 09/2 of Violation NC De (See addit	27/2018
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	rrected By
	-		No noted violation	ons.			•
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	ots # ent Addres Diam ots Sto ddress cted> charge cted> e Person's	ss (nu 101 Dre	mber and street, city, state, zip code) od Ave, Evansville, IN, 47710 os Inc	Telephone Number (812-423-9315 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u No Summary C	r) D/2018 P Releas 09/ 0 of Violation _ NC_	· ·
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		D IN THE M	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violatic	one		20 00	 J
				JI15.			
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by				Inspected by (signature):			
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1321 Owner	Stuf ent Addres N Ful OOD ddress Cted> Charge Cted> e Person's	ss (nu ton & E-ma	inber and street, city, state, zip code) Ave, Evansville, IN, 47710 GAS LLC		Pelephone Number 312-422-8701 Complaint Pre-Operational Femporary HACCP Other (list)	10/ of Violation NC		
• CRITICAI	L ITEMS AF	RE ID	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARK	KED "C"			
• VIOLATIO	ON(S) REPE	ATEI	D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violation	ons				
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Received by	/ (signature):		Insp	bected by (signature):			
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Establishm	ay In ent Addres Highw	ss (nu 'Ay	Evansville Airport ^{mber and street, city, state, zip code)} 41 North, Evansville, IN, 47725 I LP	Telephone Number (812-867-7999 (<redacted> Purpose: Routine</redacted>	Date of In: (mm/dd/yr 09/17 Follow-u NO	r) 7/2018 p Releas	ID # 11477 e Date 27/2018
Owner's A				Follow-up	Summary	of Violation	15:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>2</td><td>ſ</td><td></td></reda<>				Complaint	2	ſ	
Person in C	0			Pre-Operational	с_ ∠		$\mathbf{D}_{\mathbf{R}}$
Responsible			1	- Temporary			tional page)
Responsion		L-ma		НАССР	Wienu Tyj		
Certified Fo		er		Other (list)	1 <u>02</u>	<u></u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
191	С		Ready to eat foods lacking	date marking.		7/2018	
229	С		Slicer soiled.			Co	rrected
	Ļ						
Received by	acteo	d>		Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
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	dy's # ent Address Boeh US, I Idress Cted> Cted> Cted> cted> cted> cted> cted> cted> cted>	nne nc.	mber and street, city, state, zip code) Camp Rd., Evansville, IN, 47712		Hephone Number 12-401-7126 Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r) D/2018 P Releas 09/ r of Violation NC	
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				To Be Co	orrected By
			Follow up from 9-13	3-20	018.			
			All violations from the previous insp	ec	tion were correc	cted.		
Received by		-		-	redacted>	rinted):		
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4610 Owner SERV Owner's Au <reda Person in C <reda Responsible Certified F <redac< th=""><th>dy's # ent Addres Lincol (US, I ddress cted> cted> cted> e Person's</th><th>E-mai</th><th>mber and street, city, state, zip code) Ave., Evansville, IN, 47714</th><th>Telephone Number (812-477-4522 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted></th><th>Follow-u No Summary C</th><th>r) 7/2018 P Releas 09/ v of Violation _ NC</th><th>$\frac{ID \#}{11437}$ se Date $\frac{27/2018}{27/2018}$ ns: $\frac{2}{R} \frac{1}{1}$ tional page) $\frac{1}{2} \sqrt{5} 0$</th></redac<></reda </reda 	dy's # ent Addres Lincol (US, I ddress cted> cted> cted> e Person's	E-mai	mber and street, city, state, zip code) Ave., Evansville, IN, 47714	Telephone Number (812-477-4522 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u No Summary C	r) 7/2018 P Releas 09/ v of Violation _ NC	$\frac{ID \#}{11437}$ se Date $\frac{27/2018}{27/2018}$ ns: $\frac{2}{R} \frac{1}{1}$ tional page) $\frac{1}{2} \sqrt{5} 0$
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		ND IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
347	NC	-`	Hand drying provisions not pro	vided at hand sink			rrected
245	NC	R	Wiping clothes not stored in s			Со	rrected
		$\left \right $					
Received by			printed):	Inspected by (name and title p	orinted):		
Received by	(signature)):		Inspected by (signature):			
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	ly's # ent Address St.JC US, II Idress Cted> harge Cted> ood Handle	s (nui)SE NC.	mber and street, city, state, zip code) ph Ave, Evansville, IN, 47712	Telephone Number (812-424-8737 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 10/ of Violatior NC	<u>R</u> <u>O</u> tional page)
			INTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THF N	ARRATIVE	BELOW AS "R"
				MUART OF VIOLATIONS AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violatic	ons.			
D : 11	(1		· · · 1\		I)		
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1500 (Owner	I Sch ent Addres Oak H oville \ ddress cted> Charge cted>	^{ss (nu} Hill √aı	mber and street, city, state, zip code) Rd., EVANSVILLE, IN, 47711 nderburgh School Corp.		Iephone Number 12-469-5087 Credacted> Irpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u NO Summary C	r) D/2018 P Releas 09/ of Violation NC	
Certified For		er		<u> </u> _	Other (list)	1 <u>U</u> 2	$\underline{\bigcirc}_3\underline{\bigcirc}$	<u>14050</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					
VIOLATIC Section#	DN(S) REPE C/NC	ATEI R) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI Narrative	MMA	RY OF VIOLATIONS" AN	D IN THE N		BELOW AS "R" orrected By
Section#	C/IIC	K	No noted violatic	วทร			TOBCCC	
				5110	•			
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Establishm 1403 W	y Lut ent Addres	ss (nu	ran School ^{mber and street, city, state, zip code)} w Harmony, EVANSVILLE, IN, 47725	8) (812-867-5279) Owner		^{r)} 9/2018	ID# 11412
^{Owner} Trinity	[,] Luth	era	an Church		irpose: Routine	Follow-u NO		e Date 29/2018
Owner's A					Follow-up		of Violation	
Person in C					Complaint Pre-Operational	$_{\rm c}$ 0		$)_{R}$
<reda< td=""><td>cted></td><td>•</td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>	cted>	•			Temporary			
Responsible	e Person's	E-ma	il		HACCP	Menu Ty	pe (See addi	tional page)
Certified F	ood Handl	er			Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUM			D IN THE N	JADDATIVE	DELOWAS "D"
				VIIVIA	ARY OF VIOLATIONS AN	D IN THE		
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violation	ons	S.			
Received by	·		· · · · · · · · · · · · · · · · · · ·	-	bected by (name and title pr redacted>	rinted):		
Received by					bected by (signature):			
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Establishm 1300 Owner	pkin ent Addres W Mil sville ddress cted> cted> cted> cted> cted> a Person's	^{iss (nu} I R √ai	School 6-8 ^{mber and street, city, state, zip code)} d., EVANSVILLE, IN, 47710 nderburgh School Corp.		lephone Number 12-435-8614 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	p Releas 09/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violation	ns				
				/13	•			
		-						
		-						-
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Establishm St Be		cts	School	Telephone N() Estab	umber lishment	Date of Ins (mm/dd/yr))	њ# 11342	
			mber and street, city, state, zip code) Ave., EVANSVILLE, IN, 47714	() Owne	er	09/19	/2018		
^{Owner} St Ber				Purpose:			Follow-upRelease DateYes09/29/2018		
Owner's A	ddress			Follow-up		-	of Violation		
Person in C				Complain) _R <u></u>	
Responsible			ม	Temporal HACCP	·y	Menu Typ	e (See addi	tional page)	
Certified F		er		Other (lis	t)	1 <u>0</u> 2	<u></u> 3	$)_4 \bigcirc 5 \bigcirc$	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M						
		r	D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUP	MMARY OF VIC	JLATIONS" AN	ID IN THE N			
Section# 294	C/NC C	R	Narrative	wining of	othe too	wook	To Be Corrected By 09/19/2018		
294			Chemical sanitizer concentration for	wiping ci		weak.	09/	9/2010	
		-							
Received by				Inspected by (r		rinted):			
Received by	/ (signature):		Inspected by (s	ignature):				
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Establishm	nedic ent Addres Harla nedict ddress	an <i>i</i>		Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u No Summary C_O	r) I/2018 P Releas 10/ v of Violation NC	ID # 11342 ie Date 01/2018 is: D R O tional page)
Certified Fo	cted>			Other (list)	1 <u>U</u> 2		<u>4050</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		ND IN THE M	NARRATIVE	RFLOW AS "P"
Section#	C/NC	R	Narrative	and or violations Af			orrected By
			Violation from 09/19/201	8 corrected.			
	Ļ						
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3700 ^{Owner}	ucks First A icks N iddress cted> cted> cted> cted> a Person's	ss (nu AVE Aai	mber and street, city, state, zip code) e, EVANSVILLE, IN, 47710 kets Inc	(<red Purpose: Purpose: Routine Follow-1 Compla</red 	64-3920 acted> int erational ary	Follow-u NO Summary C) B/2018 P Releas 09/ of Violation NC	28/2018	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					DELOW AS 4D*	
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MIMARY OF V	IULAHUNS" AN	D IN THE N			
Section#	C/NC	R	Narrative					orrected By	
218	NC		Ice accumulation in walk	-in freez	ers.		09/18/2018		
232	NC		Non-food contact surfaces in need of clea	ning in ch	nicken frying	room.	n. 09/18/2018		
Received by	·				(name and title pr	inted):			
Received by	(signature)):		Inspected by	(signature):				
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Establishm	rrect	ss (nu	BChOOL mber and street, city, state, zip code)	Telephone NumberDate of Inspection (mm/dd/yr)ID #(812-963-555609/17/201811282() Owner09/17/201811282					
5301 N Owner		am	nony Rd., EVANSVILLE, IN, 47720		irpose:	Follow-u	n Releas	e Date	
Resur	rectio	n F	Parish		Routine	No		27/2018	
Owner's A	ddress			ľ	Follow-up	Summary	of Violation	15:	
	1				Complaint	\cap	(
Person in C		ı.			Pre-Operational	с_ U		$\underline{)}_{R} \underline{0}$	
Responsible			il	╘	Temporary HACCP	Menu Ty	pe <i>(See addi</i>	tional page)	
Certified For Certified For Certified For Certified For Certain Certain Certain Certain Certain Certified For Cert		er			Other (list)	$1 \underline{\bigcup} 2$		<u>405</u>	
• CRITICAL	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"				
• VIOLATIO	ON(S) REPE	ATEI	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N	NARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative	_			To Be Co	orrected By	
			No noted violation	วทร	6.				
Received by					redacted by (name and title pr	rinted):			
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Establishm 310 N Owner	A HU ent Addres St.JC	^{s (nu} Se	#316305 ^{mber and street, city, state, zi ph Ave, Evans F AMERICA LI}	ville, IN, 47712	Telephone Number (812-424-4433 (<redacted> Purpose:</redacted>	Date of Inspection (mm/dd/yr) 09/20/2018 Follow-up Releas Yes 09/2			
Owner's Ac	^{Idress}				Routine Follow-up Complaint		of Violation		
Person in C					Pre-Operational	C	NC_1		
Responsible		E-ma	il		Temporary	Menu Tyj	pe (See addit		
Certified Fo		er			HACCP Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$	
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST	F AND NARRATIVE COLUMNS M	IARKED "C"				
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTION	ONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R		Narrative				orrected By	
294	С		Sanitizer co	oncentration in dish	washer is too low.			20/2018	
218	NC		Dish was	sher is not functionin	ng as designed.		09/2	20/2018	
			Note: Instituted corrective ac	te: Instituted corrective actions. Will sanitize in 3 compartment sink until the dish washer is fixed.					
		<u> </u>							
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Establishme Motor		#3	206		Telephone Number (812-477-5036	Date of Ins (mm/dd/yr)	™# 11219
				• • •	- 012-477-5050	09/18	/2018	11210
			nber and street, city, state, zi Dr., Evansville,		(<redacted></redacted>			
Owner					Purpose:	Follow-u		e Date
FKG (Dil Co				✔ Routine	No	09/	28/2018
Owner's Ad					Follow-up	Summarv	of Violation	ns:
<reda< td=""><td>cted></td><td></td><td></td><td></td><td>Complaint</td><td></td><td></td><td></td></reda<>	cted>				Complaint			
Person in C					Pre-Operational	$_{\rm C}$ U	() .0
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Responsible			il		Temporary	Menu Typ	e (See addi	tional page)
					HACCP		\sim	\sim
Certified Fo	od Handle	er			Other (list)	$_{1}\bigcirc_{2}$	(●) ₃ (_	$_4 \bigcirc_5 \bigcirc$
						- <u> </u>	<u> </u>	<u></u>
• CRITICAL	ITEMS AD	F IDF	NTIFIED IN THE CHECKI IST	T AND NARRATIVE COLUMNS	MARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIO	ONS ARE DENOTED IN THE "S	UMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
				No noted violat	ions.			
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Establishm 7225 Owner	nia He ent Addres Cynth odress cted> Cted> Cted>	var	hts School K-5 mber and street, city, state, zip code) na Rd, EVANSVILLE, IN, 47720 nderburgh School Corp.	Telephone Number ⁽⁸¹²⁻⁴³⁵⁻⁸⁷⁴⁸⁾ ⁽ <redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-u NO Summary C	r) 7/2018 P Releas 09/ of Violation NC	
Certified Fo	cted>		NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	Other (list)	1 <u>0</u> 2	<u>()</u> 3	<u>4</u> <u>0</u> 5 <u>0</u>
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
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Received by		-	printed):	Inspected by (name and title pr <redacted></redacted>	rinted):		
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Establishm China Establishm 1505 Owner Quan Owner's Ad <reda Person in C <reda Responsible Certified F <reda< th=""><th>a Exp ent Addres S Gov Tran ddress cted> Charge cted> e Person's</th><th>ss (nu /er E-ma</th><th>mber and street, city, state, zip code) NOT St., Evansville, IN, 47713</th><th></th><th>Alephone Number 12-428-3838 Credacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u NO Summary C Menu Ty</th><th>r) B/2018 P Releas 09/ of Violation NC_</th><th>) R 0</th></reda<></reda </reda 	a Exp ent Addres S Gov Tran ddress cted> Charge cted> e Person's	ss (nu / er E-ma	mber and street, city, state, zip code) NOT St., Evansville, IN, 47713		Alephone Number 12-428-3838 Credacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C Menu Ty	r) B/2018 P Releas 09/ of Violation NC_) R 0
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	IARk	KED "C"			
• VIOLATIO	DN(S) REPE	ATEI	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
	No noted violations.							
Received by				-	redacted>	rinted):		
Received by				Insp	bected by (signature):			
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Establishm 1900 (Owner	y's C ent Addres Oak F Y'S N ddress cted> Cted> cted> cted> cted> cted> od Handle	ss (nu Hill MA E-ma	neral Store #222 mber and street, city, state, zip code Rd., Evansville, IN RKETING CO	e)	Telephone Number (812=473=3523 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C	p Releas 09/ of Violation NC_	
			NTIFIED IN THE CHECKLIST AND FROM PREVIOUS INSPECTIONS A			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
				No noted violation	ons.			
	Received by (name and title printed): <redacted></redacted>				Inspected by (name and title pr <redacted></redacted>	rinted):		
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Establishm 320 N Owner Rare I Owner's Ad <reda Person in C <reda Responsible Certified F <redac< th=""><th>horn ent Addres Gree Hospi ddress cted> cted> cted> e Person's</th><th>er (nu en f tali</th><th>eakhouse 5221 mber and street, city, state, zip code) River Rd, Evansville, IN, 47715 ity International Inc it</th><th>Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u NO Summary C_1</th><th>p Releas 09/ of Violation NC_</th><th></th></redac<></reda </reda 	horn ent Addres Gree Hospi ddress cted> cted> cted> e Person's	er (nu en f tali	eakhouse 5221 mber and street, city, state, zip code) River Rd, Evansville, IN, 47715 ity International Inc it	Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C_1	p Releas 09/ of Violation NC_	
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
345 C Hand sink used for other purpose							rrected
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
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Establishm 2350 Owner	Johr ent Address Morga DPCO ddress Cted> Cted> Cted> cted> cted> cted> ood Handle		ilver's ^{mber and street, city, state, zip code)} Ave, Evansville, IN, 47711 NE, LLC	Telephone Number (812-476-2982 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) D/2018 P Releas 09/ of Violation NC	ID # 11097 $ID = Date 29/2018$ $IR = 0$ $Itional page (Constraints)$
1		RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
174	NC		Bulk food storage containe	er not labeled.	09/19/2018		
Received by		-		Inspected by (name and title pr <redacted></redacted>	rinted):		
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	Ice C ent Addres W Vir amith ddress cted> cted> cted> cted> a Person's	ss (nu gin E-ma	mber and street, city, state, zip code) ia St., Evansville, IN, 47712	8 V P U U U	lephone Number 12-423-4173 (redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C_	r) 7/2018 P Releas 09/ of Violation NC	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
Section	Cine		No noted violatic	<u></u>			10 20 00	
				<u>лт</u> .				
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	#C11 ent Address Cover adiana ddress cted> Charge cted> e Person's	ss (nu rt A a Ll	mber and street, city, state, zip code) Ave, Evansville, IN, 47714 LC		lephone Number 312-477-4711 <redacted> irpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_	p Releas 0/2018 P Releas 09/	30/2018
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
295	NC	R	Drink dispenser nozzl	<u></u>	soiled			20/2018
200				03	301160.		03/2	.0/2010
		1						
Received by	acteo	d>		<	rected by (name and title proceeded)	rinted):		
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Establishm	Rede	ss (nu	ner School ^{mber and} street, city, state, zip code) ., EVANSVILLE, IN, 47710		Biphone Number 312 ⁻⁴ 422-3688) Owner	Date of Inspection (mm/dd/yr) 09/18/2018		ID# 11037
^{Owner} Holy F	Redee	eme	er Parish		rrpose: Routine	Follow-upRelease DateNO09/28/201		
Owner's A	ddress				Follow-up Complaint		of Violation	· ·
Person in C		1			Pre-Operational	с_ О	($\int_{R} 0$
Responsible	e Person's	E-ma	il		Temporary HACCP	Menu Ty	pe <i>(See addi</i>	tional page)
Certified Fo		er			Other (list)	1 <u>0</u> 2	<u></u> 3	<u>)4</u> 050
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	JARRATIVE	BELOW AS "R"
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Section	ente	n	No noted violatic	ne			10 20 00	miecteu Dy
				113	•			
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	p Inn ent Addres Harm Holle ddress cted> Charge cted> e Person's	ss (nui ON E-ma	mber and street, city, state, zip code) y Way, Evansville, IN, 47720	(8) (V Pu V	lephone Number 312-422-1757 <redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_1	p Releas 09/ of Violation NC	ID # 11029 $ID = 27/2018$ $R = 1$ $I = R = 1$ $I = 1$ $I = 1$ $I = 1$ $I = 1$
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THF N	JARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative	1011012	INT OF VIOLATIONS AN	DINTIE		orrected By
173	C	ĸ		rea	dy to eat produc	rte		i
173						Corrected Corrected		
Received by				-	ected by (name and title pr edacted>	rinted):		
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Establishm 211 Fi Owner	son H ent Address elding ddress cted> cted> cted> cted> a Person's	ss (nu g F √ai	h School mber and street, city, state, zip code) Rd., EVANSVILLE, IN, 47715 nderburgh School Corp.	(8) (V Pi V)	lephone Number 12-477-2496 credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u Summary C	p Releas 09/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
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4320 ^{Owner}	Ritzy ent Addres First A Grunov ddress Cted> Cted> Cted> cted> cted> a Person's	ss (nu AVE W/C	mber and street, city, state, zip code) e, EVANSVILLE, IN, 47711 Chad Grunow		lephone Number 12-421-1300 Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	p Releas 09/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	ARRATIVE	BELOW AS "R"
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			No noted violation	ons				
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5232 Owner FAZO Owner's Ad <redae Person in C <redae Responsible</redae </redae 	i's #' ent Addres Westo LI'S J Idress Cted> harge Cted> e Person's	s (nur DN JOI	mber and street, city, state, zip code) Rd., Evansville, IN, 47712 NT VENTURE, LTD	Telephone Number (812-428-0084 (<tecacteca> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</tecacteca>	Follow-u NO Summary C_) p Release 09/ of Violation	28/2018	
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			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
256	NC	R	Cooler on front line lacking	thermometer			9/2018	
295	NC	R	Ice maker walls are			09/18/2018		
295	INC	Γ		Solieu.		09/	0/2010	
Received by		-		Inspected by (name and title pr <redacted></redacted>	rinted):			
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Establishm	A KIR A KIR A KIR Idress Cted> harge Cted> or Person's	ss (nu hkli KK E-ma	STREET DAIRY QUEEN mber and street, city, state, zip code) n St, Evansville, IN, 47710		Telephone Number (812-424-5821 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C	r) D/2018 P Releas 09/) _R _0
• 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							ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrat	tive			To Be Co	orrected By
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		D IN THE N	JARRATIVE	BELOW AS "R"
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				5115.			
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	y Joh ent Addres Gutler, ddress cted> Charge cted>	ss (nu ∩ri∨ ∐	mber and street, city, state, zip code) er Road, Evansville, Indiana, 47715	Telephone Number (812-402-5747 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-u NO Summary C_1	r) 7/2018 P Releas 09/ of Violation NC		
Certified F	cted>	-		Other (list)	$1 \underline{\bigcirc} 2 \underline{\bigcirc} 3 \underline{\bigcirc} 4 \underline{\bigcirc} 5 \underline{\bigcirc}$			
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					
VIOLATIC Section#			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU! Narrative	MMARY OF VIOLATIONS" AN	D IN THE N			
295	C/NC C	R R	Soiled vegetable slicer stored of	on clean dish rack		prrected By		
235						00	Tecleu	
			Inspected by (name and title pr <redacted></redacted>	rinted):				
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	z-N-S ent Addres Wash Dicke ddress cted> Charge cted>	ing en	mber and street, city, state, zip code) ton Ave, Evansville, IN, 47714	(8) (< Pu	Hephone Number 12-402-7783 Complaint Pre-Operational Temporary HACCP	Follow-u Summary C_4	r) 9/2018 p Releas	29/2018 Is: R
Certified F <redac< td=""><td></td><td>er</td><td></td><td></td><td>Other (list)</td><td>1<u>U</u>2</td><td><u>U</u>3<u></u></td><td><u>¹4050</u></td></redac<>		er			Other (list)	1 <u>U</u> 2	<u>U</u> 3 <u></u>	<u>¹4050</u>
• CRITICAI	LITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"			
		_	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative		-1			orrected By
415	C		Insect activity pre					9/2018
412	NC		Improper use of fly		•			9/2018
438	C		Spray bottles not marked with contents. 09/19/201					
324	C			and washing sink plumbing in need of repair. 09/19/20				
177	С		Food must be stored off the floor & in covered containers. 09/19/				9/2018	
D 11						1		
			<ľ	redacted by (name and title proceeded by (name and title proceeded)	rinted):			
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2403 Owner Jason Owner's Ad <redation Person in C <redation Responsible Certified Fe <redation< th=""><th>z-N- ent Addres Wash Dicko ddress cted> cted> cted> e Person's</th><th>ss (nu inc en E-ma</th><th>mber and street, city, state, zip code) Jton Ave, Evansville, IN, 47714</th><th>(8 (< Pu</th><th>Alephone Number 312-402-7783 Complaint Pre-Operational Temporary HACCP Other (list) TED %C²</th><th>(mm/dd/yı 09/21 Follow-u Summary C1</th><th colspan="2">Date of Inspection (mm/dd/yr) ID if (mm/dd/yr) 09/21/2018 1 Follow-up Release Dat 10/01/2 Summary of Violations: C_1 C_1 NC_2 Menu Type (See additional 1) 1_2 0_2 0_3</th></redation<></redation </redation 	z-N- ent Addres Wash Dicko ddress cted> cted> cted> e Person's	ss (nu inc en E-ma	mber and street, city, state, zip code) Jton Ave, Evansville, IN, 47714	(8 (< Pu	Alephone Number 312-402-7783 Complaint Pre-Operational Temporary HACCP Other (list) TED %C ²	(mm/dd/yı 09/21 Follow-u Summary C1	Date of Inspection (mm/dd/yr) ID if (mm/dd/yr) 09/21/2018 1 Follow-up Release Dat 10/01/2 Summary of Violations: C_1 C_1 NC_2 Menu Type (See additional 1) 1_2 0_2 0_3	
			PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
324	С	R	Hand sink in need o	f re	nair		21/2018	
021	- U							1/2010
	All other violations from 9-19-18 inspection corrected. Continue p					easures.		
			Inspected by (name and title printed): <redacted></redacted>					
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Establishm	ent Name			Telephone Number	Date of In	spection	ID #
Mr. B		эT	ea	(812-550-3166	(mm/dd/y	r)	13988
Establishm	ent Addres	ss (nu	mber and street, city, state, zip code)	() Owner	03/20)/2018	
503 N	. Gree	en l	River Rd., Evansville, IN, 47715	(<redacted></redacted>			
Owner				Purpose:	Follow-u		se Date
Yao C				Routine	No	09/	30/2018
Owner's A				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	с_ U	(J_{R}
Responsible			1	Temporary	Monu Tu	na (Saa addi	tional page)
Responsible	2 rerson's	e-ma	11	НАССР	wienu i y	pe (see addi	llonal page)
Certified F	ood Handl	er		Other (list)	$1 \bigcirc 2$	$(\bullet)_3 ($	$)_4 \bigcirc 5 \bigcirc$
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