



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 #346		Telephone Number (812-401-7126)	Date of Inspection (mm/dd/yr) 09/19/2018	ID # 11439
Establishment Address (number and street, city, state, zip code) 401A S Boehne Camp Rd., Evansville, IN, 47712		() Owner <redacted>		
Owner SERVUS, Inc.	Purpose: <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 09/29/2018	
Owner's Address <redacted>		Summary of Violations: C 0 NC 0 R 0		
Person in Charge <redacted>		Menu Type (See additional page) 1 0 2 0 3 ● 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler <redacted>				

- 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
			Follow up from 9-13-2018.	
			All violations from the previous inspection were corrected.	

Received by (name and title printed): <redacted>	Inspected by (name and title printed): <redacted>
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Wendy's #326		Telephone Number (812-477-4522)	Date of Inspection (mm/dd/yr) 09/17/2018	ID # 11437
Establishment Address (number and street, city, state, zip code) 4610 Lincoln Ave., Evansville, IN, 47714		() Owner <redacted>		
Owner SERVUS, Inc.	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 09/27/2018	
Owner's Address <redacted>		Summary of Violations: C 0 NC 2 R 1		
Person in Charge <redacted>		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler <redacted>				

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Section#	C/NC	R	Narrative	To Be Corrected By
347	NC		Hand drying provisions not provided at hand sink.	Corrected
245	NC	R	Wiping clothes not stored in sanitizer buckets.	Corrected

Received by (name and title printed): <redacted>		Inspected by (name and title printed): <redacted>	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Schnucks #704		Telephone Number (812-464-3920)	Date of Inspection (mm/dd/yr) 09/18/2018	ID # 11305
Establishment Address (number and street, city, state, zip code) 3700 First Ave, EVANSVILLE, IN, 47710		() Owner <redacted>		
Owner Schnucks Markets Inc	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 09/28/2018	
Owner's Address <redacted>		Summary of Violations: C <u>0</u> NC <u>2</u> R <u>0</u>		
Person in Charge <redacted>		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler <redacted>				

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Section#	C/NC	R	Narrative	To Be Corrected By
218	NC		Ice accumulation in walk-in freezers.	09/18/2018
232	NC		Non-food contact surfaces in need of cleaning in chicken frying room.	09/18/2018

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Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name PIZZA HUT #316305		Telephone Number (812-424-4433)	Date of Inspection (mm/dd/yr) 09/20/2018	ID # 11262
Establishment Address (number and street, city, state, zip code) 310 N St. Joseph Ave, Evansville, IN, 47712		() Owner <redacted>		
Owner PIZZA HUT OF AMERICA LLC c/o DMA		Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up Yes	Release Date 09/30/2018
Owner's Address <redacted>			Summary of Violations: C 1 NC 1 R 0	
Person in Charge <redacted>			Menu Type (See additional page)	
Responsible Person's E-mail			1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler <redacted>				

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Section#	C/NC	R	Narrative	To Be Corrected By
294	C		Sanitizer concentration in dish washer is too low.	09/20/2018
218	NC		Dish washer is not functioning as designed.	09/20/2018
			Note: Instituted corrective actions. Will sanitize in 3 compartment sink until the dish washer is fixed.	

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Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Fazoli's #1756		Telephone Number (812-428-0084)	Date of Inspection (mm/dd/yr) 09/18/2018	ID # 10965
Establishment Address (number and street, city, state, zip code) 5232 Weston Rd., Evansville, IN, 47712		() Owner <redacted>		
Owner FAZOLI'S JOINT VENTURE, LTD		Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 09/28/2018
Owner's Address <redacted>			Summary of Violations: C 0 NC 2 R 2	
Person in Charge <redacted>			Menu Type (See additional page)	
Responsible Person's E-mail			1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler <redacted>				

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Section#	C/NC	R	Narrative	To Be Corrected By
256	NC	R	Cooler on front line lacking thermometer.	09/19/2018
295	NC	R	Ice maker walls are soiled.	09/18/2018

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cc:	cc:	cc:	



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Establishment Name Spudz-N-Stuff		Telephone Number (812-402-7783)	Date of Inspection (mm/dd/yr) 09/21/2018	ID # 13878
Establishment Address (number and street, city, state, zip code) 2403 Washington Ave, Evansville, IN, 47714		() Owner <redacted>		
Owner Jason Dicken	Purpose: <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up	Release Date 10/01/2018	
Owner's Address <redacted>		Summary of Violations: C 1 NC 0 R 1		
Person in Charge <redacted>		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler <redacted>				

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Section#	C/NC	R	Narrative	To Be Corrected By
324	C	R	Hand sink in need of repair.	09/21/2018
			All other violations from 9-19-18 inspection corrected. Continue pest control measures.	

Received by (name and title printed): <redacted>		Inspected by (name and title printed): <redacted>	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	

