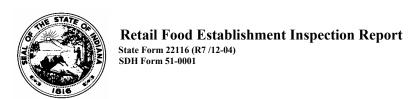
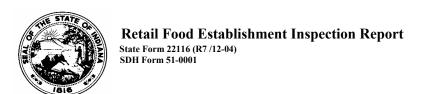


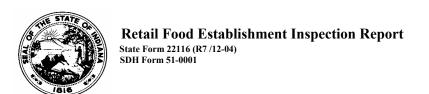
Establishm				Telephone Number	Date of Ins (mm/dd/yr)		ID#
Cafe	Araz	u		812-401-1768	12/27		13267
			mber and street, city, state, zip code)	<pre></pre>	12/21	2010	
	lain S	t.,	Evansville, Indiana, 47713	<re><redacted></redacted></re>			
Owner				Purpose:	Follow-up		se Date
Ben N				Routine	No	01/	06/2019
Owner's Ac				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>1</td><td>1 1</td></reda<>				Complaint	$\cap$	1	1 1
Person in C				Pre-Operational	$_{\rm C}$	NC_	R
Responsible			:1	<b>Temporary</b>	Monu Tym	2 (Saa addi	tional page)
Kesponsible	e reison s	L-IIIa	11	HACCP	Menu Typ	e (see aaar	nonai page)
Certified Fo	ood Handle	er		Other (list)	$_{1}\bigcirc_{2}($	$\bigcirc$ 3 $\bigcirc$	$)_{4}\bigcirc_{5}\bigcirc$
<redac< td=""><td></td><td></td><td></td><td></td><td>1</td><td><u> </u></td><td><u>-, -, -, -, -, -, -, -, -, -, -, -, -, -</u></td></redac<>					1	<u> </u>	<u>-, -, -, -, -, -, -, -, -, -, -, -, -, -</u>
		E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ADD ATIVE	DELOW AS "D"
Section#	C/NC	R	Narrative	MIMARY OF VIOLATIONS AN	D IN THE N.		orrected By
				ada manain an manlaar			•
256	NC	R	Walk in cooler temperature gauge nee	eds repair or replace	ement.	12/3	31/2018
Dagaine 41	(many 1	4;41-	neisted):	Inspected by (r	nimted):		
Received by		_		Inspected by (name and title proceded)	imtea):		
Received by	(signature)	):		Inspected by (signature):			
cc:			cc:		cc:		



Establishme		_		Telephone Number	Date of Inspe	ction	ID#
Crazy	∕ Buf	fet		812-437-5050	(mm/dd/yr)	0040	12048
			mber and street, city, state, zip code)	( ) Owner	12/27/2	2018	
5435 F	Pearl	Dr	Ste 3D, Evansville, IN, 47712	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-up		e Date
Yong		_IU		<b>✓</b> Routine	Yes	01/	06/2019
Owner's Ac				Follow-up	Summary of	Violation	is:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td><math>\cap</math></td></reda<>				Complaint	$\cap$	(	$\cap$
Person in C				Pre-Operational	$_{\rm C}$	NC_	$I_{R}$
Responsible			21	Temporary	Menu Type	/C 11:	4:1 \
Kesponsible	e rerson's	c-ilia	ш	НАССР	Menu Type	(see aaai	nonai page)
Certified Fo	ood Handle	er		Other (list)	10,0	$)_3$	),(•),(•)
<redac< td=""><td></td><td>-</td><td></td><td></td><td>1</td><td><u> </u></td><td><u> </u></td></redac<>		-			1	<u> </u>	<u> </u>
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE NAI	OD ATIVE	RELOW AS "D"
Section#	C/NC	R	Narrative	WIMART OF VIOLATIONS AN			orrected By
Section#	CITIC	K	No noted violation	202		U DE C	orrected by
			No noted violation	JIIS.			
Received by	(name and	title 1	printed):	Inspected by (name and title pr	rinted):		
<red< td=""><td>*</td><td>_ *</td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></red<>	*	_ *		<redacted></redacted>			
Received by				Inspected by (signature):			
				,			
cc:			cc:		cc:		



Establishm Kitch		nk	Pizza's of Evansville	Telephone Number Date of Inspection (mm/dd/yr)  11049					
			mber and street, city, state, zip code)	812-305-4412	12/27	/2018	11918		
			n, Evansville, IN, 47711	<pre><redacted></redacted></pre>					
Owner	0			Purpose:	Follow-up		se Date		
Kathy		es		Routine	No	01/	06/2019		
Owner's Ac				Follow-up	Summary	of Violation	ns:		
<reda< td=""><td></td><td>•</td><td></td><td>Complaint</td><td></td><td>(</td><td>) ()</td></reda<>		•		Complaint		(	) ()		
Person in C				Pre-Operational	C_O	NC_	$\frac{0}{\mathbf{R}}$		
Responsible				Temporary	Menu Tyr	ne (See addi	tional page)		
Responsible	c i ci son s	L-ma		<b>ПАССР</b>	iviena ryp	- (See addi	nionai page)		
Certified Fo		er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3$	$)_4$ $\bigcirc_5$ $\bigcirc$		
		RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"	<u> </u>				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		O IN THE N	ADDATIVE	RELOW AS "D"		
Section#	C/NC	R	Narrative	WINIART OF VIOLATIONS AN	DIN THE N		orrected By		
Section#	C/INC	I	No noted violati	one		10 Ве С	nrected by		
			No noted violati	0115			_		
Received by		_		Inspected by (name and title precised)	rinted):	-			
Received by				Inspected by (signature):					
cc:			cc:		cc:				



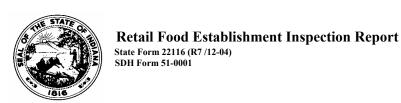
Establishm	_			Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Five (	Guys	В	urgers and Fries	812-401-1773	12/26/2	2010	11905
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	<pre></pre>	12/20/	2016	
5402 I	E Indi	an	a St, Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner				Purpose:	Follow-up		se Date
EFGB				Routine	No	01/	05/2019
Owner's A				Follow-up	Summary o	f Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td>) ()</td></reda<>				Complaint	$\cap$	(	) ()
Person in C				Pre-Operational	C	NC_(	$\mathcal{L}_{R}$
Responsible			:1	Temporary	Manu Trma	(Coo addi	tional page)
Kesponsibio	e rerson's	c-ilia	II	НАССР	Menu Type	(see aaan	iionai page)
Certified F	ood Handl	er		Other (list)	10,0	$)_3$ ( $\bullet$	$)_4\bigcirc_5\bigcirc$
<redag< td=""><td></td><td>-</td><td></td><td></td><td></td><td><u></u></td><td><u>-1-0-3-0</u></td></redag<>		-				<u></u>	<u>-1-0-3-0</u>
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"	<u>L</u>		
					ID IN THE NA	DD ATIME	DELOW AC 4D9
	C/NC		PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			10 ве Со	orrected By
			No violations	5.			
							-
	1						
D-: 11	. (	4141		Tourished 1 / 1999	-i-4-1\		
Received by			printea):	Inspected by (name and title properties)	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



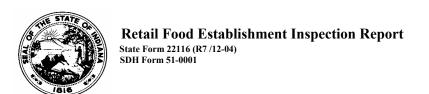
					_			
Establishm		36 <i>′</i>	270	Telephone Number  Date of Inspection (mm/dd/yr)  Date of Inspection (mm/dd/yr)				
Subw			nber and street, city, state, zip code)	812-425-8014	12/26	/2018	11774	
			nk Rd, Evansville, IN, 47712	<pre><redacted></redacted></pre>				
Owner				Purpose:	Follow-u		se Date	
		OX	el/Troxel Subs Inc	Routine	No	01/	05/2019	
Owner's A				<b>✓</b> Follow-up	Summary	of Violation	ns:	
<reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td>) (</td></reda<>		1		Complaint	$\cap$	(	) (	
Person in C				Pre-Operational	$_{\rm C}$	NC_	$0_{R}$	
Responsible				Temporary	Manu Tur	ae (Saa addi	tional page)	
Kesponsibil	e i eison s	L-mai	•	НАССР	wichu Ty	ic (see aaai	nonui puge)	
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}$	$\bigcirc_3$ $\bigcirc$	$_{4}O_{5}O$	
<redac< td=""><td>cted&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>	cted>							
• CRITICAI	L ITEMS AF	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"				
• VIOLATIO	ON(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			To Be Co	orrected By	
			Follow up from 12-1	8-2018.				
			All violations from the previous insp	pection were correct	cted.			
Received by		_	rinted):	Inspected by (name and title posterior < redacted >	rinted):			
Received by				Inspected by (signature):				
cc:			cc:		cc:			



Establishm				Telephone Number	Date of Ins (mm/dd/yr		ID#
Thai	Papa	ya	Cuisine	(812-477-8424 12/28/2018 11/			
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	<redacted></redacted>	12/20	/2016	
	I utor	Ln	, Evansville, IN, 47715	<u> </u>			
Owner	da: Da	امد	anant	Purpose:	Follow-up		se Date
Owner's A		CI	nanant	<b>✓</b> Routine	No	1	07/2019
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>Summary</td><td>of Violation</td><td></td></reda<>				Follow-up	Summary	of Violation	
Person in C				Complaint			$\frac{1}{R}$
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC</td><td> R</td></reda<>				Pre-Operational	C	NC	R
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР			
Certified F		er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3$	<u>)</u> 4 <u>•</u> 5
<redac< td=""><td>cted&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>	cted>						
• CRITICAI	L ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(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			To Be Co	orrected By
431	NC	R	Hood vents soil	led.		01/0	04/2019
					-		
Received by	/ (name and	title 1	orinted):	Inspected by (name and title p	rinted):		
<red< td=""><td></td><td></td><td>Allited).</td><td><redacted></redacted></td><td>inica).</td><td></td><td></td></red<>			Allited).	<redacted></redacted>	inica).		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



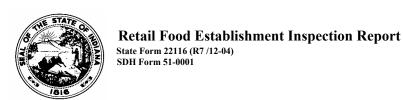
Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#
Subw	ay#	19	853	812-401-4545	` '		11590
			mber and street, city, state, zip code)		12/26/	2018	
501 N	Main	Sı	uite A, Evansville, IN, 47711	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Pathil				<b>✓</b> Routine	No	01/	05/2019
Owner's A				Follow-up	Summary o	of Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td>) ()</td></reda<>				Complaint	$\cap$	(	) ()
Person in C				Pre-Operational	$_{\rm C}$	NC_(	$\frac{1}{R}$
			2	Temporary	) T		
Responsible	e Person's	L-ma	II	НАССР	Menu Type	: (See aaai	tional page)
Certified F	ood Handle	er		Other (list)	1()2(	$\bigcirc$ 3( $\bullet$	$)_4\bigcirc_5\bigcirc$
<redag< td=""><td></td><td><b>,</b>1</td><td></td><td></td><td>1 2</td><td><u></u></td><td><u>/43_</u></td></redag<>		<b>,</b> 1			1 2	<u></u>	<u>/43_</u>
		E IUI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "C"	<u> </u>		
					ID IN THE ST	DD 4 mes	DELOW 10 (P*
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
					-		
					<del></del>		
					<del></del>		
Received by	•	_ *	printed):	Inspected by (name and title pr	rinted):		<del></del>
<red< td=""><td><u>acte</u></td><td><u> </u></td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></red<>	<u>acte</u>	<u> </u>		<redacted></redacted>			
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		
					1		



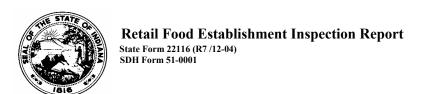
			•	•			
Establishm		lla	r #25585	Telephone Number (812-477-1922)	Date of Ins (mm/dd/yr	j	тр# 11531
			mber and street, city, state, zip code)		12/26	/2018	11331
			Ave, Evansville, IN, 47711	<pre>(<redacted></redacted></pre>			
Owner	V DC	71.1	_AR Stores of IN, LP	Purpose:	Follow-up No		se Date 05/2019
			LAR Stores of III, LP	Routine	110	01/	03/2019
Owner's Ad				Follow-up	Summary	of Violation	
Person in C				Complaint		NC_(	)
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td>- R</td></reda<>				Pre-Operational	C	NC_	- R
Responsible	e Person's	E-ma	il	Temporary HACCP	Menu Typ	e (See addi	tional page)
~				Other (list)			).()
Certified Fo		er			$1 \bigcirc 2$	<u>3</u>	<u> 1405</u>
• CRITICAL	ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "C"			
• VIOLATIC	N(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			To Be Co	orrected By
			No noted violation	ons.			
Received by	*			Inspected by (name and title p < redacted>	rinted):		
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



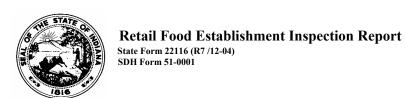
					-			
Establishm Big M		i 7 7	oria	Telephone Number Date of Inspection (mm/dd/yr)  1D #				
			mber and street, city, state, zip code)	812-434-6909	12/27	/2018	11511	
			ve, Evansville, IN, 47710	<pre><redacted></redacted></pre>				
Owner				Purpose:	Follow-u		se Date	
Dallas		ay	il	<b>✓</b> Routine	Yes	01/	06/2019	
Owner's A				Follow-up	Summary	of Violation	ns:	
<reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td>1</td><td></td><td>1 2</td></reda<>		1		Complaint	1		1 2	
Person in C				Pre-Operational	C	NC	$1_{R}$	
<reda< td=""><td></td><td></td><td>-</td><td>Temporary</td><td></td><td></td><td>tional page)</td></reda<>			-	Temporary			tional page)	
Responsible	e Person's	L-ma	1	НАССР	Menu Ty	se (see aaai	tionai page)	
Certified F	ood Handl	er		Other (list)	$10^{\circ}$	$\bigcirc_3$ ( $\bullet$	$)_4\bigcirc_5\bigcirc$	
Certifica	oou manui					<u></u>	<u>/4030</u>	
• CRITICAI	L ITEMS AI	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "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	
416	NC	R	Pest activity in back sto	rage room.		01/3	31/2019	
191	С	R	Date marking lacking	<del>_</del>		12/2	27/2018	
Received by		_		Inspected by (name and title p < redacted>	rinted):			
Received by				Inspected by (signature):				
				inspected by (signification).				
cc:			cc:		cc:			



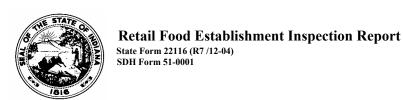
			•	•					
Establishm				Telephone Number  Date of Inspection (mm/dd/yr)					
Little	_			812-401-0588	12/27	/2018	11478		
			mber and street, city, state, zip code)	<pre><redacted></redacted></pre>		72010			
	FIISt A	106	e, Evansville, IN, 47710		F 11	D 1	D .		
Owner Amma	ar law	ıah	ırah	Purpose:	Follow-uj		se Date 706/2019		
Owner's A		vab	ian	Routine					
<reda< td=""><td></td><td>ı</td><td></td><td>Follow-up</td><td></td><td>of Violation</td><td>•</td></reda<>		ı		Follow-up		of Violation	•		
Person in C				Complaint	$\begin{bmatrix} 2 \\ 1 \end{bmatrix}$	NC_	) , ()		
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td><u> </u></td><td>NC_</td><td>_ R</td></reda<>				Pre-Operational	<u> </u>	NC_	_ R		
Responsible	e Person's	E-mai	11	Temporary	Menu Typ	e (See addi	tional page)		
				НАССР		$\bigcirc$ G			
Certified F		er		Other (list)	$1 \bigcirc 2$	<u>3</u>	<u> 1405</u> 0		
<redag< td=""><td>ctea&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td></redag<>	ctea>								
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	MARKED "C"					
• VIOLATIO	ON(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			To Be Co	orrected By		
			Violations from 12-5-18 inspe	ection corrected.					
			•						
Received by	,		printed):	Inspected by (name and title p	rinted):				
Received by				Inspected by (signature):					
cc:			cc:		cc:				
			ι		CC.				



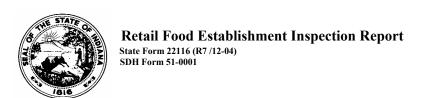
			-	•			
Establishm		)ai	ry Queen	Telephone Number	Date of In (mm/dd/y		то# 11453
			mber and street, city, state, zip code)	812-425-6107	12/26	5/2018	11453
6801			41, Evansville, IN, 47725	<pre><redacted></redacted></pre>	,		
Owner MIKE	SCH	LO	SS	Purpose:  Routine	Follow-u No		se Date // 05/2019
Owner's A			_	Follow-up	Summary	of Violation	
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td></td><td></td></reda<>				Complaint			
Person in C				Pre-Operational	$C_{\underline{U}}$	NC_	$\frac{1}{R}$
Responsible				Temporary	Manu Tre	no (Coo add	tional page)
Kesponsion	e reison s	L-ma	.11	НАССР	Iviciiu 1 y	pe (see aaai	iionai page)
Certified F		er		Other (list)	102	$\bigcirc_3$	$0_4 \bigcirc 5 \bigcirc$
		DE INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MADKED "C"	1		
					ND IN THE N	IADD ATIME	DELOW AC "D"
		_	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" A	ND IN THE N		
Section#	C/NC	R	Narrative				orrected By
218	NC	R	Ice accumulation on fans and	ceiling in freezer.		12/2	27/2018
			_				
			<u> </u>				
			<u> </u>				
Received by	,		orinted):	Inspected by (name and title < redacted>	orinted):		
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



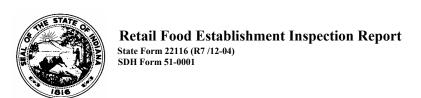
Establishmo Walgi Establishmo 925 S Owner Walgro Owner's Ac <redac <redac="" c="" certified="" fo<="" in="" person="" responsible="" th=""><th>reense Gree een Codress cted&gt; harge cted&gt; Person's</th><th>s (nui n F</th><th>mber and street, city, state, zip code) River Rd, Evansville, IN, 47715</th><th>Pu /</th><th>clephone Number 312-474-0055  <redacted> Irpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>Follow-u No Summary</th><th>P Release 01/ of Violation</th><th>05/2019 ns:</th></redac>	reense Gree een Codress cted> harge cted> Person's	s (nui n F	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	Pu /	clephone Number 312-474-0055 <redacted> Irpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u No Summary	P Release 01/ of Violation	05/2019 ns:
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS !	<b>AAR</b> F	KED "C"			
• VIOLATIO	N(S) REPE	ATED	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 violati	ons	).			
Di d l	(	4:41		Ĭ., .,,	4 . 4 1			
Received by		_	ninea).	_	redacted by (name and title pr	inteu):		
Received by					pected by (signature):			
				L				
cc:			cc:			cc:		



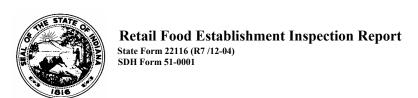
Establishm	ent Name			Telephone Number	Date of Ins	pection	ID#		
Subw		30	714	812-437-3750	(mm/dd/yr	<b>,</b>	11371		
			mber and street, city, state, zip code)		12/27	/2018	11071		
			Unit A, EVANSVILLE, IN, 47720	' <redacted></redacted>					
Owner				Purpose:	Follow-up		se Date		
Larry	Patel			<b>✓</b> Routine	No	01/	06/2019		
Owner's Ac				Follow-up	Summary	of Violation	ns:		
<reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td></td><td>(</td><td>) (</td></reda<>		1		Complaint		(	) (		
Person in C				Pre-Operational	$_{\rm C}$	NC_	$\mathcal{L}_{R}$		
<reda< td=""><td></td><td></td><td>21</td><td>Temporary</td><td>М Т</td><td> (C 1.1:</td><td>4: 1 \</td></reda<>			21	Temporary	М Т	(C 1.1:	4: 1 \		
Kesponsible	e Person's	E-ma	Ш	НАССР	Menu Type (See additional page)				
Certified F	ood Handl	er		Other (list)	$10^{2}$				
<redac< td=""><td>cted&gt;</td><td></td><td></td><td></td><td>1</td><td><u> </u></td><td><u></u></td></redac<>	cted>				1	<u> </u>	<u></u>		
• CRITICAL	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	IARKED "C"	<u> </u>				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative				orrected By		
			No noted violation	ons.			<u> </u>		
Received by	•		printed):	Inspected by (name and title p < redacted>	rinted):				
Received by	(signature	):		Inspected by (signature):					
cc:			cc:		cc:				



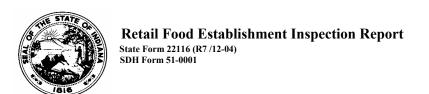
				T			I:		
Establishmo		Ini	n & Suites	Telephone Number (812-477-2677	Date of Ins (mm/dd/yr	·j	ъ# 11270		
			mber and street, city, state, zip code)		12/28	/2018			
			St, Evansville, IN, 47715	<pre><redacted></redacted></pre>					
Owner				Purpose:	Follow-up		se Date		
Hasu	Patel			Routine	No	01/	07/2019		
Owner's Ac				Follow-up	Summary	of Violation	ns:		
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Complaint</td><td>_ `</td><td>_</td><td>_</td></reda<>	cted>			Complaint	_ `	_	_		
Person in C				Pre-Operational			$0_{\rm R}$		
<reda< td=""><td>cted&gt;</td><td></td><td></td><td></td><td></td><td>. 110</td><td></td></reda<>	cted>					. 110			
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	oe (See addi	tional page)		
				НАССР					
Certified Fo		er		Other (list)	1 <u>U</u> 2	<u> </u>	<u> </u>		
<redac< td=""><td>cted&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>	cted>								
• CRITICAL	ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"					
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative			To Be Co	orrected By		
			No noted violati	ons.					
Received by	(	4:41	The state of the s	In an anti-d har ( 1774	-i4- 4\				
	*		orinted):	Inspected by (name and title p	rinted):				
<reda< td=""><td></td><td></td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></reda<>				<redacted></redacted>					
Received by	(signature	):		Inspected by (signature):					
cc:			cc:		cc:				
ĺ					1				



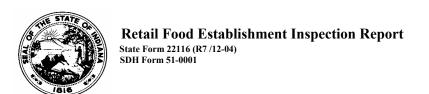
Establishm				Telephone Number	Date of Ins (mm/dd/yr)		ID#	
McDc	onald	s ‡	<i>‡</i> 35457	812-425-5922	12/28	,	11206	
			mber and street, city, state, zip code)	<pre></pre>	12/20	/2016		
	Bartle	ett /	Ave, Evansville, IN, 47711					
Owner PAUL	CVIIC	\	<b>.</b>	Purpose:	Follow-up		se Date //07/2019	
Owner's A			<u> </u>	Routine	No			
<reda< td=""><td></td><td>ı</td><td></td><td>Follow-up</td><td>Summary</td><td>of Violation</td><td></td></reda<>		ı		Follow-up	Summary	of Violation		
Person in C				Complaint	[ <sub>~</sub> ()	NC_	1 1	
<reda< td=""><td></td><td>ı</td><td></td><td>Pre-Operational</td><td>  c</td><td>NC</td><td><u> </u></td></reda<>		ı		Pre-Operational	c	NC	<u> </u>	
Responsible			il	Temporary	Menu Type (See additional page)			
				НАССР		$\bigcirc$ 6		
Certified F		er		Other (list)	1 2	<u>3</u>	<u> 1405</u>	
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MADVED "C"	<u> </u>			
					ID IN THE N	4 DD 4 TH/F	DELOW AC "D"	
	C/NC		PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N.			
Section#	NC	R R	Narrative	nitizar in hatwaan ı	100	To Be Corrected By  Corrected		
243	INC	Γ	Wet wiping cloths not stored in sai	iiiiizei iii between t	,se.		neclea	
Received by	/ (name and	l title p	printed):	Inspected by (name and title p	rinted):			
<red< td=""><td>acte</td><td><b>&lt;</b>b</td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></red<>	acte	<b>&lt;</b> b		<redacted></redacted>				
Received by	(signature)	):		Inspected by (signature):				
cc:			cc:		cc:			
					1			



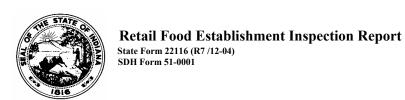
Establishme		s ±	‡20552		Telephone Number (812-867-9003)	Date of Inspe (mm/dd/yr)	11201	
			mber and street, city, state, zip code)			12/28/	2018	11201
			isant Rd, Evansville, IN, 47	7725	<pre><redacted></redacted></pre>			
Owner Ivan C	:arvai	al			Purpose:	Follow-up	Releas	e Date 07/2019
Owner's Ad		<u> </u>			1 <del></del>			
<reda< td=""><td></td><td></td><td></td><td></td><td>Follow-up Complaint</td><td>Summary o</td><td></td><td></td></reda<>					Follow-up Complaint	Summary o		
Person in C						$_{c}$ $0$	NC_1	<sub>5</sub> 1
<reda< td=""><td>cted&gt;</td><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC</td><td> K</td></reda<>	cted>				Pre-Operational	C	NC	K
Responsible	Person's	E-mai	a		Temporary	Menu Type	(See addit	tional page)
					HACCP	$\bigcirc$ (	76	
Certified Fo		er			Other (list)	1 <u>0</u> 2		<u>/4</u>
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COI	LUMNS M	AARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN	THE "SU!	MMARY OF VIOLATIONS" AND	) IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narra	tive		,	Го Ве Со	orrected By
218	NC	R	Ice accumulation and condens	sation	in walk in and free:	zer.	12/2	28/2018
								_
Received by	(name and	title r	printed):		Inspected by (name and title pri	nted):		
<red< td=""><td></td><td></td><td>•</td><td></td><td><redacted></redacted></td><td>,</td><td></td><td></td></red<>			•		<redacted></redacted>	,		
Received by	(signature)	):			Inspected by (signature):			
cc:			cc:			cc:		



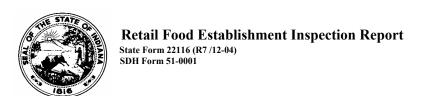
			<u> </u>	-			
Establishmo		ma	acy #6254	Telephone Number (812-475-2038)	Date of Insp (mm/dd/yr)		тр# 11184
Establishm	ont Address	a (nu	mber and street, city, state, zip code)		12/26	2018	11104
			ve, Evansville, IN, 47714	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
HOOk	(-SUF	PEF	RX LLC	Routine	No	01/	05/2019
Owner's Ac	ddress			Follow-up	Summary	of Violation	ns:
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Complaint</td><td></td><td>_</td><td></td></reda<>	cted>			Complaint		_	
Person in C	harge			Pre-Operational		NC_(	J b U
<reda< td=""><td>cted&gt;</td><td></td><td></td><td></td><td>C</td><td>NC</td><td> K</td></reda<>	cted>				C	NC	K
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	itional page)
				HACCP		$\sim$	
Certified Fo		er		Other (list)	$1 \bigcirc 2$	<u>_</u> 3 <u>_</u>	<u>)4U5U</u>
<redac< td=""><td>cted&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>	cted>						
• CRITICAL	ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
• VIOLATIC	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	IMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	RELOW AS "R"
Section#	C/NC	R	Narrative	MWART OF VIOLATIONS AN	DIN THE IV		orrected By
Section#	C/NC	K				то ве С	Trected by
			No noted violati	ons.			
					T	_	
					+		
Received by		_	orinted):	Inspected by (name and title properties)	rinted):		
Received by				Inspected by (signature):			
	(2-8-1414)	, -		- <sub>F</sub>			
201			T		Last		
cc:			cc:		cc:		



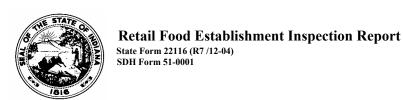
Establishm	_	`^f	0	Telephone Number	Date of Ins (mm/dd/yr		ID#
TJ M				812-465-4985	12/26	/2018	11167
			mber and street, city, state, zip code) I, EVANSVILLE, IN, 47711	' <redacted></redacted>			
Owner		_		Purpose:	Follow-up		se Date
CANT	EEN	Se	rvice Company	<b>✓</b> Routine	No	01/	05/2019
Owner's A				Follow-up	Summary	of Violatio	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td></td><td>1 0</td></reda<>				Complaint	$\cap$		1 0
Person in C				Pre-Operational	$_{\rm C}$ $_{\rm C}$	NC_	I RU
<reda< td=""><td></td><td></td><td>2</td><td>Temporary</td><td>) ( T</td><td></td><td></td></reda<>			2	Temporary	) ( T		
Responsible	e Person's	E-mai	.1	НАССР	Menu Typ	e (See aaai	itional page)
Certified F	ood Handl	or		Other (list)	102	(•) <sub>2</sub> (	$)_4\bigcirc_5\bigcirc$
<redag< td=""><td></td><td></td><td></td><td></td><td></td><td><u></u></td><td><u>/4030</u></td></redag<>						<u></u>	<u>/4030</u>
		e inc	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MADKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				orrected By 31/2018
324	NC		Plumbing in need of repair at 3	Plumbing in need of repair at 3 compartment sink.			
Received by			printed):	Inspected by (name and title p <redacted></redacted>	rinted):		
Received by				Inspected by (signature):			
					I		
cc:			cc:		cc:		



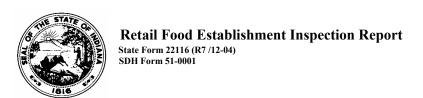
	540 ent Addres Burk mmed ddress cted> charge cted> e Person's	hai		Telephone Number  (812-471-0510  (redacted>  Purpose:  Routine  Follow-up  Complaint  Pre-Operational  Temporary  HACCP  Other (list)	Follow-u NO Summary	p Release 01/	05/2019 Ins: 2 R_2	
<redacted> • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"</redacted>								
					D IN THE A	ADDATISE	DELOW AC "D"	
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S  Section#   C/NC   R   Narrative				MMARY OF VIOLATIONS" AN	DINTHEN			
345	С	IX	Hand sink used for othe	r nurnoses		To Be Corrected By 12/26/2018		
431	NC	R	Facility in need of cleaning behind and under	• •	n area		31/2018	
430	NC	R	Tile & coving missing or broken in variou				6/2019	
100		• •				0.7	0,20.0	
Received by				Inspected by (name and title properties)	rinted):			
Received by				Inspected by (signature):				
cc:			cc:		cc:			



			<u> </u>				
Establishm		n	8 Suitos	Telephone Number	Date of Ins (mm/dd/yr)		ID#
			& Suites	812-473-2500	12/28	/2018	11033
			nt Dr., Evansville, IN, 47715	' <redacted></redacted>			
Owner	11010 1	10	THE DI.; E VANOVINO, 114, 477 TO	Purpose:	Follow-up	Releas	se Date
	ntosni	Ma	a Hospitality	Routine	No		07/2019
Owner's Ac			1 7	Follow-up	Summary		
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Complaint</td><td></td><td>_</td><td></td></reda<>	cted>			Complaint		_	
Person in C				Pre-Operational	$ _{\mathcal{C}}$ U	NC_(	$\mathcal{J}_{R}U$
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary			
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
Certified Fo	ood Handle	nr.		Other (list)	1000	<b>1</b> )2(	),(),()
<redag< td=""><td></td><td><b></b></td><td></td><td></td><td></td><td><u></u></td><td><u> </u></td></redag<>		<b></b>				<u></u>	<u> </u>
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N.	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		<u> </u>		orrected By
			No noted violati	ons.			<u> </u>
			Tro Hotea violati	<u> </u>			
Received by	(name and	title 1	orinted):	Inspected by (name and title p	rinted):		
<red< td=""><td>*</td><td></td><td></td><td><pre><redacted></redacted></pre></td><td></td><td></td><td></td></red<>	*			<pre><redacted></redacted></pre>			
Received by				Inspected by (signature):			
	, 5	-		1 -3 (- 8).			
cc:			cc:		cc:		



Establishment Name				Telephone Number Date of Inspection (mm/dd/yr)			
Quali	ty Inr	1		812-477-2211	12/28		10939
			mber and street, city, state, zip code)	<pre>                                     </pre>	12/20/	2016	
	Morga	an .	Ave., Evansville, IN, 47715				
Owner	atal			Purpose:	Follow-up		se Date
Raj Pa				<b>✓</b> Routine	No		07/2019
Owner's Ad		ı		Follow-up	Summary	of Violation	
Person in C				Complaint	1 0	NC_	
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>  c</td><td>NC</td><td>R_</td></reda<>				Pre-Operational	c	NC	R_
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР			
Certified For		er		Other (list)	1 2	<u>3</u>	<u>)4</u> 050
		E INI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKER "C"			
					ID IN THE N	A DD A TIME	DELOW AC 4D9
	C/NC	R	D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	NC	K	Narrative Microwave soile				orrected By
295	INC		Wildiowave soil	eu.		12/2	28/2018
Received by		_		Inspected by (name and title posterior < redacted >	rinted):		
Received by				Inspected by (signature):			
111001.00	(=-0	,•		spring of (organical).			
cc:			cc:		cc:		



Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Baym	nont I	nn	& Suites	812-477-2677	12/28/2	2018	10860
			mber and street, city, state, zip code)	<pre></pre>	12/20/2	2010	
	Divisi	on	St, Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner	<b>.</b> .			Purpose:	Follow-up		se Date
Hasu				Routine	No	01/	07/2019
Owner's Ac				Follow-up	Summary of	f Violatior	as:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td>(</td><td>) ()</td></reda<>				Complaint		(	) ()
Person in C				Pre-Operational	$_{\rm C}$	$_{\rm NC}$	$\frac{\mathbf{J}}{\mathbf{R}}$
Responsible			:1	Temporary	Menu Type	(Saa addi	tional naga)
Kesponsibil	e i eison s	L-ma	11	HACCP	Wichu Type	(See addit	nonai page)
Certified F	ood Handle	er		Other (list)	$ _{1}\bigcirc_{2}($	•)3(	$)_4\bigcirc_5\bigcirc$
<redac< td=""><td></td><td></td><td></td><td></td><td></td><td><u></u></td><td><u> </u></td></redac<>						<u></u>	<u> </u>
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
					ID IN THE NA	DD ATIME	DELOW AC 4D9
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violati	ons.			
					<del></del>		
		L					
Received by			printed):	Inspected by (name and title p	rinted):		
<pre><reda< pre=""></reda<></pre>	acte	<b>&lt;</b> c		<redacted></redacted>			
Received by	(signature)	):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm		_	a a dua a ut	Telephone Number	Date of In		ID#		
			oodmart	812-602-3552		5/2018	13802		
			mber and street, city, state, zip code) St., Evansville, IN, 47713	<pre><redacted></redacted></pre>					
Owner	.L. Ot	<u> </u>	n., Evansvine, III, 47713	Purpose:	Follow-u	n Releas	se Date		
JBMD	G LL	С		Routine	No		05/2019		
Owner's A				Follow-up	Summary	of Violation			
				Complaint	-				
Person in C				Pre-Operational	$\mathbf{c}$	NC	$1_{R}$		
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary					
Responsible	e Person's	E-ma	il	НАССР	Menu Ty	pe (See addi	tional page)		
Certified F	ood Handl	er		Other (list)	10,0,0,0,0				
Certified 1	oou manu					<u> </u>	<u>/ 4                                   </u>		
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"					
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	IARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative				orrected By		
118	С		No certified food safet	ty person	01/31/2019				
431	NC		Increase cleaning schedu	• •		12/26/2018			
101	increase cleaning schedule in kitchen.						-0/2010		
Received by		_		Inspected by (name and title posterior <redacted></redacted>	rinted):				
Received by				Inspected by (signature):					
Received by	(Signatule	<i>j</i> .		inspected by (signature).					
cc:			cc:		cc:				