



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 OneMain/Eurest Dining Service		Telephone Number (812-468-5737)	Date of Inspection (mm/dd/yr) 10/07/2016	ID # 10837
Establishment Address (number and street, city, state, zip code) 601 NW Second St., EVANSVILLE, IN, 47708		Owner (812-468-5737)	Follow-up No	
Owner OneMain Eurest Dining Service		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) _____	Release Date 10/17/2016	
Owner's Address 601 NW Second St, Evansville, IN, 47708			Summary of Violations: C 0 NC 0 R 0	
Person in Charge OneMain Eurest Dining Service			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 Debbie Bushrod				

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
- VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

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

Received by (name and title printed): Debbie Bushrod	Inspected by (name and title printed): David Horning
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Bob Evans #132	Telephone Number (812-473-9022)	Date of Inspection (mm/dd/yr) 10/06/2016	ID # 10869
Establishment Address (number and street, city, state, zip code) 1125 N Green River Rd, Evansville, IN, 47715	Owner ()		
Owner BOB EVANS FARMS LLC	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 10/16/2016
Owner's Address 8111 Smith's Mill Rd, New Albany, OH, 43054	Summary of Violations: C 0 NC 1 R 1		
Person in Charge BOB EVANS FARMS LLC	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			

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Section#	C/NC	R	Narrative	To Be Corrected By
218	NC	R	Refrigerated drawer under grill not holding 41 degrees Fahrenheit.	10/07/2016

Received by (name and title printed): Alyssa Cook	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Buehlers IGA #456		Telephone Number (812-867-8610) (270-843-3252)	Date of Inspection (mm/dd/yr) 10/07/2016	ID # 10886
Establishment Address (number and street, city, state, zip code) 12500 N Highway 41, Evansville, IN, 47725				
Owner HOUCHENS NORTH FOODS LLC		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 10/17/2016
Owner's Address PO Box 90009, BOWLING GREEN, KY, 42102			Summary of Violations: C 1 NC 1 R 0	
Person in Charge HOUCHENS NORTH FOODS LLC			Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Diana				

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Section#	C/NC	R	Narrative	To Be Corrected By
191	C		Deli items not date marked to reflect 7 day hold time.	Corrected
146	NC		Grab & go deli items lacking proper labels.	10/07/2016

Received by (name and title printed): Alice Duvall		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Dollar General #9430		Telephone Number (812-867-3599)	Date of Inspection (mm/dd/yr) 10/07/2016	ID # 10917
Establishment Address (number and street, city, state, zip code) 12250 N Highway 41, Evansville, IN, 47725		Owner (615-855-4000)		
Owner DOLGENCORP LLC		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 10/17/2016
Owner's Address 100 Mission Ridge, Goodlettsville, TN, 37072			Summary of Violations: C 0 NC 0 R 0	
Person in Charge DOLGENCORP LLC			Menu Type (See additional page) 1 ● 2 ○ 3 ○ 4 ○ 5 ○	
Responsible Person's E-mail				
Certified Food Handler				

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

Received by (name and title printed): Susan Null		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name G.D. Ritzys		Telephone Number (812-421-1300)	Date of Inspection (mm/dd/yr) 10/06/2016	ID # 10979
Establishment Address (number and street, city, state, zip code) 4320 First Ave, EVANSVILLE, IN, 47711		(812-474-6256)		
Owner Dan Grunow/Andy Guagenti	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 10/16/2016	
Owner's Address 2641 N Cullen Ave, Evansville, IN, 47715		Summary of Violations: C <u>1</u> NC <u>4</u> R <u>1</u>		
Person in Charge Dan Grunow/Andy Guagenti		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 Bonnie Bryan				

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Section#	C/NC	R	Narrative	To Be Corrected By
347	NC		No paper towels at front counter hand sink.	Corrected
345	C	R	Utensils stored in hand sink.	Corrected
190	NC		Improper cooling of noodles & chilli.	10/06/2016
119	NC		Person in charge lacking training on cooling & temperatures.	10/06/2016
217	NC		Crouton container broken & lacking proper scoop.	10/06/2016

Received by (name and title printed): Cody Underhill		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Kennel Club of Evansville		Telephone Number (812-422-1211)	Date of Inspection (mm/dd/yr) 10/06/2016	ID # 11067
Establishment Address (number and street, city, state, zip code) 5201 Kratzville Rd, Evansville, IN, 47710		() Owner		
Owner Kennel Club of Evansville 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 10/16/2016
Owner's Address 5201 Kratzville Rd, Evansville, IN, 47710			Summary of Violations: C 0 NC 0 R 0	
Person in Charge Kennel Club of Evansville Inc			Menu Type (See additional page) 1 0 2 0 3 ● 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Kim Racine				

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

Received by (name and title printed): Kim Racine		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Cambridge Golf Course	Telephone Number (812-868-4653)	Date of Inspection (mm/dd/yr) 10/05/2016	ID # 11124
Establishment Address (number and street, city, state, zip code) 1034 Beacon Hill Dr, Evansville, IN, 47725	Owner (812-684-4653)	Follow-up No	Release Date 10/15/2016
Owner Raymond E Wright	Purpose: <input checked="" type="checkbox"/> Routine	Summary of Violations: C 0 NC 1 R 1	
Owner's Address 1034 Beacon Hill Rd, Evansville, IN, 47725	<input type="checkbox"/> Follow-up	Menu Type (<i>See additional page</i>)	
Person in Charge Raymond E Wright	<input type="checkbox"/> Complaint	1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Responsible Person's E-mail	<input type="checkbox"/> Pre-Operational		
Certified Food Handler Jo McQuilling	<input type="checkbox"/> Temporary		
	<input type="checkbox"/> HACCP		
	<input type="checkbox"/> Other (list) _____		

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Section#	C/NC	R	Narrative	To Be Corrected By
218	NC	R	Walk-in not maintaing 41f or under.	10/05/2016

Received by (name and title printed): karen patton	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Corner Bar & Grill		Telephone Number (812-425-5059)	Date of Inspection (mm/dd/yr) 10/04/2016	ID # 11171
Establishment Address (number and street, city, state, zip code) 2668 Mt. Vernon Ave., Evansville, IN, 47712		(812-449-6988)		
Owner Diehl	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 10/14/2016	
Owner's Address 2668 Mt Vernon Ave, Evansville, IN, 47712			Summary of Violations: C 1 NC 2 R 1	
Person in Charge Brian Diehl			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 Samantha Lamon				

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Section#	C/NC	R	Narrative	To Be Corrected By
415	C		gnats present	10/11/2016
218	NC		Beer reach-ins and stand-up freezer have ice accumulation	10/06/2016
430	NC	R	Flooring throughout in areas needs repaired or replaced	11/21/2016

Received by (name and title printed): Brian Diehl	Inspected by (name and title printed): Katie Gretler
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Stepping Stone - 30022004		Telephone Number (812-473-7104)	Date of Inspection (mm/dd/yr) 10/05/2016	ID # 11353
Establishment Address (number and street, city, state, zip code) 30 S Stockwell Rd., Evansville, IN, 47714		Owner (866-372-3035)	Follow-up No	
Owner Sodexo & Affiliates		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) _____	Release Date 10/15/2016	
Owner's Address PO BOX 352, Buffalo, NY, 14240			Summary of Violations: C 0 NC 0 R 0	
Person in Charge Sodexo & Affiliates			Menu Type (See additional page) 1 0 2 0 3 ● 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Linda Book				

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

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



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Establishment Name Stolls Country Inn South		Telephone Number (812-867-7730)	Date of Inspection (mm/dd/yr) 10/05/2016	ID # 11358
Establishment Address (number and street, city, state, zip code) 19820 Castle Creek Dr, Evansville, IN, 47725		Owner (812-798-7088)	Follow-up No	
Owner Rodney Miller & Carla Miller		Purpose: <input checked="" type="checkbox"/> Routine	Release Date 10/15/2016	
Owner's Address 3482 S 300 W, Washington, IN, 47501		<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 2 R 0	
Person in Charge Rodney Miller & Carla Miller		<input type="checkbox"/> Complaint		
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Certified Food Handler Carla Miller		<input type="checkbox"/> Temporary		
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

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Section#	C/NC	R	Narrative	To Be Corrected By
218	NC		Dish machine not properly dispensing sanitizer.	10/05/2016
179	NC		Items on buffet need covers.	Corrected

Received by (name and title printed): Nick Dewig	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Stringtown School K-5		Telephone Number (812-435-8595 (812-435-8453)		Date of Inspection (mm/dd/yr) 10/06/2016		ID # 11360	
Establishment Address (number and street, city, state, zip code) 4720 Stringtown Rd, EVANSVILLE, IN, 47711				Owner Evansville Vanderburgh School Corp.		Follow-up No	
Owner's Address 951 Walnut St, Evansville, IN, 47713				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)		Release Date 10/16/2016	
Person in Charge Evansville Vanderburgh School Corp.				Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>			
Responsible Person's E-mail				Menu Type (See additional page) 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>			
Certified Food Handler Elaine Effinger							

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

Received by (name and title printed): Elaine Effinger		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	cc:



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Establishment Name Subway		Telephone Number (812) 429-0090		Date of Inspection (mm/dd/yr) 10/06/2016		ID # 11361	
Establishment Address (number and street, city, state, zip code) 4750 W Lloyd Expressway, Evansville, IN, 47712				Owner (812) 573-7777			
Owner PATHIL AMIN		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 10/16/2016	
Owner's Address 10082 STONECREEK CIR, NEWBURGH, IN, 47630				Summary of Violations:			
Person in Charge PATHIL AMIN				C <u>0</u> NC <u>0</u> R <u>0</u>			
Responsible Person's E-mail				Menu Type (See additional page)			
Certified Food Handler Piyush Patel				1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>			

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

Received by (name and title printed): Piyush Patel		Inspected by (name and title printed): Katie Gretler	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	cc:



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Establishment Name BN Mart Incorporated		Telephone Number (812-402-0255 () Owner	Date of Inspection (mm/dd/yr) 10/04/2016	ID # 11463
Establishment Address (number and street, city, state, zip code) 3500 Hogue Rd, EVANSVILLE, IN, 47712				
Owner Niraj Maharjan	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 10/14/2016	
Owner's Address 8174 Lincoln Ave Apt D, Evansville, IN, 47715		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Niraj Maharjan		Menu Type (See additional page) 1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Responsible Person's E-mail				
Certified Food Handler n/a				

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

Received by (name and title printed): Niraj Maharjan	Inspected by (name and title printed): Katie Gretler	
Received by (signature):	Inspected by (signature):	
cc:	cc:	cc:



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Establishment Name Big M's Pizzeria		Telephone Number (812-434-6909)	Date of Inspection (mm/dd/yr) 10/06/2016	ID # 11511
Establishment Address (number and street, city, state, zip code) 1313 N First Ave, Evansville, IN, 47710		(812-434-6909)		
Owner Dallas R May II	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	Release Date 10/16/2016	
Owner's Address 5822 Epworth Rd, Newburgh, IN, 47630		Summary of Violations: C <u>2</u> NC <u>1</u> R <u>2</u>		
Person in Charge Dallas R May II		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 Brett Cabb				

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Section#	C/NC	R	Narrative	To Be Corrected By
146	NC	R	self service desserts lacking labeling information	10/20/2016
415	C	R	Some roaches observed	10/27/2016
193	C		Lacking time display for using time as a public health control	10/20/2016

Received by (name and title printed): Dallas May II		Inspected by (name and title printed): Katie Gretler	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



Retail Food Establishment Inspection Report

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

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

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

Establishment Name PaPa Johns Mobile Unit		Telephone Number (812-423-9024	Date of Inspection (mm/dd/yr) 10/04/2016	ID # 11544
Establishment Address (number and street, city, state, zip code) 313 N Weinbach Ave, Evansville, IN, 47711		Owner (812-423-9024		
Owner KGK Enterprises 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 10/14/2016	
Owner's Address 303 N Weinbach Ave, Evansville, IN, 47711		Summary of Violations: C 0 NC 0 R 0		
Person in Charge KGK Enterprises Inc		Menu Type (See additional page) 1 ● 2 ○ 3 ○ 4 ○ 5 ○		
Responsible Person's E-mail				
Certified Food Handler				

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
- VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

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

Received by (name and title printed): Kevin King	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:
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Retail Food Establishment Inspection Report

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Establishment Name Show Me's East		Telephone Number (812-401-7469)	Date of Inspection (mm/dd/yr) 10/04/2016	ID # 11683
Establishment Address (number and street, city, state, zip code) 1700 Morgan Center, Evansville, IN, 47715		(812-430-5194)		
Owner STEVE HAZLETT	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 10/14/2016	
Owner's Address 3010 Cypress Ct, Evansville, IN, 47711		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge STEVE HAZLETT		Menu Type (See additional page) 1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Responsible Person's E-mail				
Certified Food Handler Tyler Francis				

- 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
			All violations from 09/21/2016 corrected.	

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



Retail Food Establishment Inspection Report

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

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

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Establishment Name CVS Pharmacy #3448		Telephone Number (812-867-6407)	Date of Inspection (mm/dd/yr) 10/07/2016	ID # 11877
Establishment Address (number and street, city, state, zip code) 511 E Boonville New Harmony Rd, Evansville, IN, 47725		Owner (401-770-2272)	Follow-up No	
Owner HOOK-SUPERX LLC		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) _____	Release Date 10/17/2016	
Owner's Address 1 CVS Dr/Mail Drop 23062A, Woonsocket, RI, 02895			Summary of Violations: C 0 NC 0 R 0	
Person in Charge HOOK-SUPERX LLC		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input checked="" type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler				

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
- VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

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

Received by (name and title printed): matt cavazos	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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

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

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

Establishment Name Honey Dew Coffee Co.		Telephone Number (812-602-3123)	Date of Inspection (mm/dd/yr) 10/05/2016	ID # 13224
Establishment Address (number and street, city, state, zip code) 612 S Weinbach Ave, Evansville, IN, 47714		Owner (812-483-9932)	Follow-up No	
Owner Jessica Farmer		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) _____	Release Date 10/15/2016	
Owner's Address 435 S Kelsey, Evansville, IN, 47714			Summary of Violations: C 1 NC 0 R 0	
Person in Charge Jessica Farmer			Menu Type (See additional page) 1 0 2 0 3 0 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Ahmed Albaqshi				

- 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
187	C		Food not being maintained at proper temperature.	Corrected

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

