



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 AFC SUSHI BAR@ SCHNUCKS 703		Telephone Number (812-473-0151 <small>(Establishment)</small> (310-604-3200 <small>(Owner)</small>		Date of Inspection (mm/dd/yr) 10/14/2016		ID # 10831	
Establishment Address (number and street, city, state, zip code) 4600 Washington Ave., EVANSVILLE, IN, 47714				Follow-up No		Release Date 10/24/2016	
Owner ADVANCED FRESH CONCEPTS FRANCHISE CORP		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) _____		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>			
Owner's Address 19205 S Laurel Park Rd, RANCHO DOMINQUEZ, CA, 90220				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"/>			
Person in Charge ADVANCED FRESH CONCEPTS FRANCHISE CORP							
Responsible Person's E-mail							
Certified Food Handler PI Tuang							

- 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): Tuang Pi	Inspected by (name and title printed): Colin Ward
----------------------------------------------------------	-------------------------------------------------------------

Received by (signature):	Inspected by (signature):
--------------------------	---------------------------

cc:	cc:	cc:
-----	-----	-----



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Establishment Name: Bosse High School
Telephone Number: (812) 474-6935
Date of Inspection: 10/12/2016
ID #: 10875
Establishment Address: 1300 Washington Ave., EVANSVILLE, IN, 47714
Owner: Evansville Vanderburgh School Corp.
Owner's Address: 951 Walnut St, Evansville, IN, 47713
Person in Charge: Evansville Vanderburgh School Corp.
Responsible Person's E-mail:
Certified Food Handler: Toni Giefer
Purpose: [X] Routine, [] Follow-up, [] Complaint, [] Pre-Operational, [] Temporary, [] HACCP, [] Other (list)
Follow-up: No
Release Date: 10/22/2016
Summary of Violations: C 0, NC 0, R 0
Menu Type: 1 0, 2 0, 3 0, 4 0, 5 0

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Table with 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: No noted violations.

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

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

cc: (three empty fields)



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Establishment Name Evansville Country Club		Telephone Number (812-425-2243)	Date of Inspection (mm/dd/yr) 10/12/2016	ID # 10951
Establishment Address (number and street, city, state, zip code) 3810 Stringtown Rd, Evansville, IN, 47711		(812-425-2243)		
Owner Evansville Country Club	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 10/22/2016	
Owner's Address 3810 Stringtown Rd, Evansville, IN, 47711		Summary of Violations: C <u>1</u> NC <u>6</u> R <u>4</u>		
Person in Charge Evansville Country Club		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 Doug Crockett				

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
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Section#	C/NC	R	Narrative	To Be Corrected By
294	C	R	Bar dish machine not sanitizing.	10/12/2016
218	NC	R	Bar dish machine not properly dispensing chemical sanitizer.	10/12/2016
291	NC		Chemical test strips needed.	10/12/2016
399	NC		Cabinet at wait station hand sink needs repaired/replaced.	10/31/2016
430	NC	R	Ceiling needs repaired in prep areas.	10/31/2016
342	NC		Water pressure & temperature at new prep hand sink needs increase for hot water pressure.	10/13/2016
431	NC	R	Floors & under equipment soiled.	10/12/2016

Received by (name and title printed): Joseph Besse	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name G.D. Ritzy's		Telephone Number (812-474-6259)	Date of Inspection (mm/dd/yr) 10/11/2016	ID # 10980
Establishment Address (number and street, city, state, zip code) 601 N Green River Rd, EVANSVILLE, IN, 47715		Owner (812-474-6256)	Follow-up No	
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)		Release Date 10/21/2016	
Owner's Address 2641 N Cullen Ave, Evansville, IN, 47715			Summary of Violations: C 2 NC 1 R 3	
Person in Charge Dan Grunow/Andy Guagenti			Menu Type (See additional page) 1 2 3 4 5	
Responsible Person's E-mail				
Certified Food Handler Cindy Clemons				

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Section#	C/NC	R	Narrative	To Be Corrected By
295	C	R	Food debris present on dishes that were put away on the clean dish rack.	10/11/2016
295	C	R	Ice machine's inside guard soiled.	10/12/2016
218	NC	R	Shelving is rusting and in poor repair in various areas.	10/25/2016

Received by (name and title printed): Cindy Clemons	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Red Roof Inn & Suites		Telephone Number (812-867-1100)	Date of Inspection (mm/dd/yr) 10/11/2016	ID # 11034
Establishment Address (number and street, city, state, zip code) 19600 Elpers Rd., Evansville, IN, 47725		(812-867-1100)		
Owner APAR, 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 Yes	Release Date 10/21/2016	
Owner's Address 19600 Elpers Rd, Evansville, IN, 47725		Summary of Violations: C 3 NC 1 R 3		
Person in Charge APAR, 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				

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Section#	C/NC	R	Narrative	To Be Corrected By
343	C	R	Hand washing sink needed in kitchen.	10/21/2016
438	C	R	Spray bottle not marked with contents.	Corrected
303	C	R	Sanitizer not available at 3 compartment sink.	Corrected
291	NC		Test strips not available for chemical sanitizer.	10/12/2016

Received by (name and title printed): Andy Bhakta		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Kanpai		Telephone Number (812-471-7076)	Date of Inspection (mm/dd/yr) 10/10/2016	ID # 11052
Establishment Address (number and street, city, state, zip code) 4593 Washington Ave., EVANSVILLE, IN, 47714		Owner (812-504-6512)	Follow-up No	
Owner Jayson R Munoz		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 10/20/2016	
Owner's Address 5366 E Sherwood Dr, Newburgh, IN, 47630			Summary of Violations: C 1 NC 0 R 1	
Person in Charge Jayson R Munoz			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 Matthew Mort				

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Section#	C/NC	R	Narrative	To Be Corrected By
295	C	R	Ice guard within the ice dispenser soiled.	10/10/2016

Received by (name and title printed): Matthew Mort	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Lodge Community School K-8		Telephone Number (812-469-5085)	Date of Inspection (mm/dd/yr) 10/14/2016	ID # 11090
Establishment Address (number and street, city, state, zip code) 1400 E Riverside Dr, EVANSVILLE, IN, 47714		Owner (812-435-8453)	Follow-up No	
Owner Evansville Vanderburgh School Corp.		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 10/24/2016	
Owner's Address 951 Walnut St, Evansville, IN, 47713			Summary of Violations: C 0 NC 0 R 0	
Person in Charge Evansville Vanderburgh School Corp.			Menu Type (See additional page) 1 0 2 1 3 0 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Vicki Loughrie				

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

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



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Establishment Name Long John Silvers #29		Telephone Number (812-422-9824	Date of Inspection (mm/dd/yr) 10/12/2016	ID # 11098
Establishment Address (number and street, city, state, zip code) 4625 W Pennsylvania St., Evansville, IN, 47712		(812-482-3212		
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 10/22/2016	
Owner's Address 4201 Mannheim Rd Suite A, Jasper, IN, 47546		Summary of Violations: C 0 NC 0 R 0		
Person in Charge SERVUS, Inc.		Menu Type (See additional page) 1 0 2 0 3 ● 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler Leah Miller				

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

Received by (name and title printed): Leah Miller		Inspected by (name and title printed): Katie Gretler	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	cc:



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

Form containing establishment details: Establishment Name (Los Bravos), Telephone Number (812-464-3163), Date of Inspection (10/13/2016), ID # (11103), Address (4630 W Lloyd Expressway, Evansville, IN, 47712), Owner (Los Bravos Inc), Purpose (Routine), Follow-up (Yes), Release Date (10/23/2016), Summary of Violations (C1, NC2, R2), and Certified Food Handler (Jaime Bustos).

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Table with 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Contains 3 rows of violation data: 294 (Dish machine not sanitizing), 218 (Dish machine not operating as designed), 291 (Lacking test strips for sanitizer).

Signature section with fields for Received by (Jaime Bustos), Inspected by (Katie Gretler), and cc: fields.



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Form with fields: Establishment Name (Los Bravos), Telephone Number (812-464-3163), Date of Inspection (10/14/2016), ID # (11103), Establishment Address (4630 W Lloyd Expressway, Evansville, IN, 47712), Owner (Los Bravos Inc), Purpose (Follow-up), Follow-up (No), Release Date (10/24/2016), Owner's Address (5977 Medinah Dr, NEWBURGH, IN, 47630), Person in Charge (Los Bravos Inc), Responsible Person's E-mail, Certified Food Handler (Jaime Bustos), Summary of Violations (C 0, NC 0, R 0), Menu Type (3 selected).

- 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"

Table with 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: Corrected dish machine now sanitizing and working as designed.

Received by (name and title printed): Nergio Velazquez
Inspected by (name and title printed): Katie Gretler
Received by (signature):
Inspected by (signature):
cc:



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Establishment Name Lucky Lady/Playgirl Inc	Telephone Number (812) 428-6384	Date of Inspection (mm/dd/yr) 10/13/2016	ID # 11105
Establishment Address (number and street, city, state, zip code) 523 N Main St, EVANSVILLE, IN, 47711	() Owner		
Owner Ronnie Baars	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 10/23/2016
Owner's Address 836 Wianecki Rd, Mosinee, WI, 54455		Summary of Violations:	
Person in Charge Ronnie Baars		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		1 <input checked="" type="radio"/> 2 <input type="radio"/> 3 <input 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): tonya hagan	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Circle K #91		Telephone Number (812-461-2373) (812-379-9227)	Date of Inspection (mm/dd/yr) 10/13/2016	ID # 11106
Establishment Address (number and street, city, state, zip code) 7 N Fulton Ave, Evansville, IN, 47710		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 10/23/2016
Owner Mac's Convenience Store LLC	Owner's Address PO Box 347, Columbus, IN, 47202	Summary of Violations: C 0 NC 2 R 1		
Person in Charge Mac's Convenience Store LLC	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 Robert Jones				

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Section#	C/NC	R	Narrative	To Be Corrected By
324	NC		Hand sink leaking under counter	
431	NC	R	Shelving under soda machines soiled	

Received by (name and title printed): Kelly Jones		Inspected by (name and title printed): Katie Gretler	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Burger King #116		Telephone Number (812-421-1060)	Date of Inspection (mm/dd/yr) 10/12/2016	ID # 11118
Establishment Address (number and street, city, state, zip code) 900 N Main St, Evansville, IN, 47711		(315-424-0513)		
Owner Carrols, 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 10/22/2016	
Owner's Address 968 James St, Syracuse, NY, 13212		Summary of Violations: C 1 NC 1 R 1		
Person in Charge Carrols, LLC		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 Clarke Johnson				

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Section#	C/NC	R	Narrative	To Be Corrected By
192	C		Expired hold time on items not refrigerated per SOP.	Corrected
430	NC	R	Repair/replace broken floor & ceiling tiles.	10/31/2016

Received by (name and title printed): Clarke Johnson	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:

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Establishment Name Canton Inn		Telephone Number (812-428-6611)	Date of Inspection (mm/dd/yr) 10/14/2016	ID # 11127
Establishment Address (number and street, city, state, zip code) 947 North Park Dr, Evansville, IN, 47710		(812-428-6611)		
Owner Wai Yim Seto	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 10/24/2016	
Owner's Address 947 North Park Dr, Evansville, IN, 47710		Summary of Violations: C <u>0</u> NC <u>2</u> R <u>1</u>		
Person in Charge Wai Yim Seto		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 Mary Ann Seto				

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Section#	C/NC	R	Narrative	To Be Corrected By
310	NC		Ventilation system needs cleaning	10/14/2016
234	NC	R	Scoop stored in water between use.	

Received by (name and title printed): Yim Seto	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name China Lu Market		Telephone Number (812-471-9999)	Date of Inspection (mm/dd/yr) 10/13/2016	ID # 11148
Establishment Address (number and street, city, state, zip code) 4604 Vogel Rd., Evansville, IN, 47715		() Owner (812-471-9999)		
Owner Yue Ying Yang	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 10/23/2016	
Owner's Address 4604 Vogel Rd, Evansville, IN, 47715		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Yue Ying Yang		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 Amy Yang				

- 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 inspection on 7/26/16. All violations corrected.	

Received by (name and title printed): Amy Yang		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



Retail Food Establishment Inspection Report

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

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

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Establishment Name Comfort Inn Mahadev		Telephone Number (812-867-1600)	Date of Inspection (mm/dd/yr) 10/11/2016	ID # 11166
Establishment Address (number and street, city, state, zip code) 19622 Elpers Rd., Evansville, IN, 47725		(812-867-1600)		
Owner Priti and Sonny Patel		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 10/21/2016
Owner's Address 19622 Elpers Rd, Evansville, IN, 47725			Summary of Violations: C 0 NC 1 R 0	
Person in Charge Priti and Sonny Patel			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
324	NC		Grease trap maintenance log not current.	Corrected

Received by (name and title printed): Priti Patel		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Cynthia Heights School K-5		Telephone Number (812-435-8748)	Date of Inspection (mm/dd/yr) 10/14/2016	ID # 11189
Establishment Address (number and street, city, state, zip code) 7225 Cynthiana Rd, EVANSVILLE, IN, 47720		Owner (812-435-8453)	Follow-up No	
Owner Evansville Vanderburgh School Corp.		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 10/24/2016	
Owner's Address 951 Walnut St, Evansville, IN, 47713			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge Evansville Vanderburgh School Corp.			Menu Type (See additional page)	
Responsible Person's E-mail			<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5	
Certified Food Handler Dana Estes				

- 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): Kathy Lux		Inspected by (name and title printed): Katie Gretler	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Pizza King		Telephone Number (812-424-7976)	Date of Inspection (mm/dd/yr) 10/14/2016	ID # 11264
Establishment Address (number and street, city, state, zip code) 220 N St. Joseph Ave, Evansville, IN, 47712		Owner (812-473-1744)	Follow-up No	
Owner D NIX 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) _____	Release Date 10/24/2016	
Owner's Address 1401 N BOEKE RD, Evansville, IN, 47711			Summary of Violations: C 0 NC 0 R 0	
Person in Charge D NIX ENTERPRISES INC			Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Brittany McIntire				

- 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): Brittany McIntire		Inspected by (name and title printed): Katie Gretler	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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

Establishment Name Schnucks #703		Telephone Number (812-473-0151)	Date of Inspection (mm/dd/yr) 10/14/2016	ID # 11304
Establishment Address (number and street, city, state, zip code) 4600 Washington Ave., EVANSVILLE, IN, 47714		(314-994-4718)		
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 10/24/2016	
Owner's Address 11420 Lackland Rd, St Louis, MO, 63146		Summary of Violations: C 0 NC 1 R 0		
Person in Charge Schnucks Markets Inc		Menu Type (See additional page) 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input checked="" type="radio"/> 5 <input type="radio"/>		
Responsible Person's E-mail				
Certified Food Handler Debbie Thyen				

- 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
348	NC		Hand sink in meat area not provided with soap and disposable hand towels.	10/14/2016

Received by (name and title printed): Chris Wynn	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Scott Elementary School		Telephone Number (812-867-4765)	Date of Inspection (mm/dd/yr) 10/11/2016	ID # 11310
Establishment Address (number and street, city, state, zip code) 14940 Old State Rd., EVANSVILLE, IN, 47725		(812-435-8453) Owner		
Owner Evansville Vanderburgh School Corp.	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 10/21/2016	
Owner's Address 951 Walnut St, Evansville, IN, 47713		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Evansville Vanderburgh School Corp.		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"/>		
Responsible Person's E-mail				
Certified Food Handler Lisa Brandle				

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

Received by (name and title printed): Lisa Brandle	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name St Boniface School		Telephone Number (812-422-1014)	Date of Inspection (mm/dd/yr) 10/13/2016	ID # 11335
Establishment Address (number and street, city, state, zip code) 2031 W Michigan St., EVANSVILLE, IN, 47712		() Owner		
Owner ST BONIFACE SCHOOL		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 10/23/2016
Owner's Address			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge ST BONIFACE SCHOOL			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"/>	
Responsible Person's E-mail				
Certified Food Handler Mary Jo Townsend				

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

Received by (name and title printed): Leeanne Happe		Inspected by (name and title printed): Katie Gretler	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name St Joe Mini Mart	Telephone Number (812-963-5761)	Date of Inspection (mm/dd/yr) 10/10/2016	ID # 11338
Establishment Address (number and street, city, state, zip code) 6000 W St. Joe Rd., Evansville, IN, 47720	(812-963-5761)		
Owner Lyle Granger	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 10/20/2016
Owner's Address 6000 W St Joe Rd, Evansville, IN, 47720	Summary of Violations:		
Person in Charge Lyle Granger	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 n/a	1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		

- 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): Lyle Granger	Inspected by (name and title printed): Katie Gretler
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Stockyard Inn		Telephone Number (812-402-9273)	Date of Inspection (mm/dd/yr) 10/12/2016	ID # 11357
Establishment Address (number and street, city, state, zip code) 1217 Baker St., Evansville, IN, 47710		Owner (812-480-8792)	Follow-up No	Release Date 10/22/2016
Owner Tanoos Enterprises 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) _____	Summary of Violations: C 0 NC 2 R 1		
Owner's Address 2409 Ellington Ridge Ct, Evansville, IN, 47711		Menu Type (See additional page) 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Person in Charge Tanoos Enterprises LLC	Responsible Person's E-mail			
Certified Food Handler TF Tanoos				

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
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Section#	C/NC	R	Narrative	To Be Corrected By
430	NC	R	Floors need repair/replaced.	10/31/2016
431	NC		Outside back area needs cleaning.	

Received by (name and title printed): TJ tanoos		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Washington School 6-8		Telephone Number (812-469-5090)	Date of Inspection (mm/dd/yr) 10/14/2016	ID # 11432
Establishment Address (number and street, city, state, zip code) 1801 Washington Ave., EVANSVILLE, IN, 47714		Owner (812-435-8453)	Follow-up No	
Owner Evansville Vanderburgh School Corp.		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 10/24/2016	
Owner's Address 951 Walnut St, Evansville, IN, 47713			Summary of Violations: C 0 NC 0 R 0	
Person in Charge Evansville Vanderburgh School Corp.			Menu Type (See additional page) 1 0 2 1 3 0 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Jo McQuilling				

- 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): Patrice Miles		Inspected by (name and title printed): Kelly Holzmeyer	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Wendy's #324		Telephone Number (812-425-2359)	Date of Inspection (mm/dd/yr) 10/14/2016	ID # 11435
Establishment Address (number and street, city, state, zip code) 3351 First Ave, Evansville, IN, 47710		Owner (812-482-3212)	Follow-up No	
Owner SERVUS, Inc.		Purpose: <input checked="" type="checkbox"/> Routine	Release Date 10/24/2016	
Owner's Address 4201 Mannheim Rd Suite A, Jasper, IN, 47546		<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 1 R 1	
Person in Charge SERVUS, Inc.		<input type="checkbox"/> Complaint	Menu Type (See additional page)	
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler Chevette Hillard		<input type="checkbox"/> Temporary		
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

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

Section#	C/NC	R	Narrative	To Be Corrected By
347	NC	R	Paper towels needed at hand sink.	Corrected

Received by (name and title printed): chevette Hillard		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	cc:



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Establishment Name Dollar General #6626		Telephone Number (812-477-1947)	Date of Inspection (mm/dd/yr) 10/10/2016	ID # 11462
Establishment Address (number and street, city, state, zip code) 5033 Theater Drive, Evansville, IN, 47715		() 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 10/20/2016
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 0 2 0 3 0 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler n/a				

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

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

Received by (name and title printed): Bart Wagner		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Cold Stone Creamery		Telephone Number (812-454-0156)	Date of Inspection (mm/dd/yr) 10/13/2016	ID # 11475
Establishment Address (number and street, city, state, zip code) 6401 E Lloyd Expressway, Evansville, IN, 47715		(812-454-0156)		
Owner Wayne Kinney	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 10/23/2016	
Owner's Address 6401 E Lloyd Expy, EVANSVILLE, IN, 47715		Summary of Violations: C <u>0</u> NC <u>1</u> R <u>1</u>		
Person in Charge Wayne Kinney		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 Jennifer Dillard				

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
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Section#	C/NC	R	Narrative	To Be Corrected By
218	NC	R	Accumulation of ice in freezer.	10/20/2016

Received by (name and title printed): Grant Campbell	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Circle K #2262		Telephone Number (812-424-7517)		Date of Inspection (mm/dd/yr) 10/12/2016	ID # 11479	
Establishment Address (number and street, city, state, zip code) 3105 N First Ave, Evansville, IN, 47710		Telephone Number (812-379-9227)				
Owner Mac's Convenience Store 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 10/22/2016		
Owner's Address PO Box 347, Columbus, IN, 47202			Summary of Violations: C 0 NC 0 R 0			
Person in Charge Mac's Convenience Store LLC			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						

- 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): Josh Bradley	Inspected by (name and title printed): Katie Gretler
Received by (signature):	Inspected by (signature):

cc:	cc:	cc:
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Establishment Name Hornville Tavern		Telephone Number (812-963-0967)	Date of Inspection (mm/dd/yr) 10/10/2016	ID # 11480
Establishment Address (number and street, city, state, zip code) 2607 W Baseline Rd, Evansville, IN, 47720		(812-963-0967)		
Owner Walter & Debbie Schneider		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 10/20/2016
Owner's Address 14121 Bickmeier Rd, Evansville, IN, 47725			Summary of Violations: C <u>0</u> NC <u>1</u> R <u>1</u>	
Person in Charge Walter & Debbie Schneider			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 Debbie Schneider				

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

Section#	C/NC	R	Narrative	To Be Corrected By
431	NC	R	Walk-in shelving is rusted or soiled	10/14/2016

Received by (name and title printed): Debbie Lee	Inspected by (name and title printed): Katie Gretler
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 Salvation Army Community Center	Telephone Number (812-425-1375)	Date of Inspection (mm/dd/yr) 10/14/2016	ID # 11481
Establishment Address (number and street, city, state, zip code) 1040 N Fulton Ave, Evansville, IN, 47710	(812-422-4673)		
Owner SALVATION ARMY	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 10/24/2016
Owner's Address 1040 Fulton Ave, Evansville, IN, 47711		Summary of Violations: C <u>1</u> NC <u>0</u> R <u>0</u>	
Person in Charge SALVATION ARMY		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 Gwen Rode			

- 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
191	C		Items in walk-in lacking date marking	10/14/2016

Received by (name and title printed): Jeffrey Garrett	Inspected by (name and title printed): Katie Gretler
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Shortys		Telephone Number (812-401-1560)	Date of Inspection (mm/dd/yr) 10/12/2016	ID # 11595
Establishment Address (number and street, city, state, zip code) 1209 Baker Ave, Evansville, IN, 47710		Owner (812-483-9053)	Follow-up No	
Owner Gary DeVillez Jr.		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 10/22/2016	
Owner's Address 10240 FISCHER RD, Evansville, IN, 47720			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge Gary DeVillez Jr.			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"/>	
Responsible Person's E-mail				
Certified Food Handler Trisha DeVillez				

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

Received by (name and title printed): Rona Fields		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	cc:



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Establishment Name St Mary's Gift Shoppe		Telephone Number (812-485-4269)	Date of Inspection (mm/dd/yr) 10/12/2016	ID # 11700
Establishment Address (number and street, city, state, zip code) 3700 Washington Ave, Evansville, IN, 47750		() Owner		
Owner St Mary's Auxiliary		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 10/22/2016
Owner's Address 3700 WASHINGTON AVE, Evansville, IN, 47750			Summary of Violations: C 0 NC 0 R 0	
Person in Charge St Mary's Auxiliary		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 n/a				

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

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



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Establishment Name Vegetable Land LLC - Zion UCC		Telephone Number (812-425-7029)	Date of Inspection (mm/dd/yr) 10/11/2016	ID # 11743
Establishment Address (number and street, city, state, zip code) 415 NW 5th St, EVANSVILLE, IN, 47711		Telephone Number (812-205-0616)		
Owner Wendy Wilson	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 10/21/2016	
Owner's Address 3470 Vines Rd, Mt Vernon, IN, 47620		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Wendy Wilson		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 Wendy Wilson				

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

Received by (name and title printed): Wendy Wilson	Inspected by (name and title printed): David Horning
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name PIZZA HUT #316308		Telephone Number (812-476-1666)	Date of Inspection (mm/dd/yr) 10/12/2016	ID # 11839
Establishment Address (number and street, city, state, zip code) 925 N Green River Rd, Evansville, IN, 47715		(317-596-3260)		
Owner PIZZA HUT OF AMERICA LLC c/o Ducharm, McMiller & Assoc.	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 10/22/2016	
Owner's Address PO Box 80600, Indianapolis, IN, 46280		Summary of Violations: C 0 NC 1 R 1		
Person in Charge PIZZA HUT OF AMERICA LLC c/o Ducharm, McMiller & Assoc.		Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler Robin Downs				

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Section#	C/NC	R	Narrative	To Be Corrected By
295	NC	R	Shelving in the walk-in cooler soiled.	10/13/2016

Received by (name and title printed): Amber Uhde	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name MJ's Café	Telephone Number (812) 402-6313	Date of Inspection (mm/dd/yr) 10/12/2016	ID # 11902
Establishment Address (number and street, city, state, zip code) 801 St Mary's Dr, Evansville, IN, 47714	(812) 459-4517		
Owner MARY JO BRUGMANN	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 10/22/2016
Owner's Address 8845 Vienna Rd, Evansville, IN, 47720		Summary of Violations:	
Person in Charge MARY JO BRUGMANN		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 Jamie Allen		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): Erin Overby	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Chick-fil-A At Cross Pointe		Telephone Number (812) 471-9203	Date of Inspection (mm/dd/yr) 10/11/2016	ID # 11935
Establishment Address (number and street, city, state, zip code) 7101 E Indiana St, Evansville, IN, 47715		(812) 305-1355		
Owner Jack R Stierwalt 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 No	Release Date 10/21/2016	
Owner's Address 4233 Stonegarden Ln, Newburgh, IN, 47630		Summary of Violations: C <u>0</u> NC <u>1</u> R <u>0</u>		
Person in Charge Jack R Stierwalt II		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 Rich Stierwalt				

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Section#	C/NC	R	Narrative	To Be Corrected By
394	NC		Refuse area not properly maintained.	10/12/2016

Received by (name and title printed): Jeff Johnson		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name God's Kids Preschool - McCutchanville Community Church		Telephone Number (812-867-5735)	Date of Inspection (mm/dd/yr) 10/14/2016	ID # 12012
Establishment Address (number and street, city, state, zip code) 9505 Petersburg Rd, Evansville, IN, 47725		(812-867-5735)		
Owner McCutchanville Community Church	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 10/24/2016	
Owner's Address 9505 Petersburg Rd, Evansville, IN, 47725		Summary of Violations: C <u>0</u> NC <u>2</u> R <u>0</u>		
Person in Charge McCutchanville Community Church		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 Rhia Hardin				

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Section#	C/NC	R	Narrative	To Be Corrected By
256	NC		Reach in cooler lacking thermometer.	10/21/2016
285	NC		Warewashing machine not reaching required temperature.	10/21/2016

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



Retail Food Establishment Inspection Report

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Establishment Name The Perfect Plan To Go	Telephone Number (812-471-9599)	Date of Inspection (mm/dd/yr) 10/14/2016	ID # 12087
Establishment Address (number and street, city, state, zip code) 3101 N Green River Rd Ste 310, Evansville, IN, 47715	(812-598-5222)		
Owner Sean Melvin	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 10/24/2016
Owner's Address 12747 Kingsley Ct, Evansville, IN, 47725		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge Sean Melvin		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 Sean Melvin			

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

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



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Establishment Name Firehouse Subs		Telephone Number (812-401-0670)	Date of Inspection (mm/dd/yr) 10/13/2016	ID # 12148
Establishment Address (number and street, city, state, zip code) 222 S Red Bank Rd, Evansville, IN, 47712		() Owner (904-894-4925)		
Owner Dan Irmscher	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 10/23/2016	
Owner's Address 3600 Eastbrooke Dr, Evansville, IN, 47711		Summary of Violations: C 1 NC 1 R 0		
Person in Charge Dan Irmscher		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 Dan Irmscher				

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Section#	C/NC	R	Narrative	To Be Corrected By
187	C		Meat balls and chili not holding 135* or greater	Corrected
218	NC		Warmer not working as designed	10/20/2016

Received by (name and title printed): Brent Davis	Inspected by (name and title printed): Katie Gretler
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name PIZZA HUT #317147		Telephone Number (812-426-1166) (317-596-3260)		Date of Inspection (mm/dd/yr) 10/14/2016	ID # 12210
Establishment Address (number and street, city, state, zip code) 4508 First Ave, Evansville, IN, 47710		Owner PIZZA HUT OF AMERICA LLC c/o Ducharm, McMiller & Assoc.		Follow-up No	
Owner's Address PO Box 80600, Indianapolis, IN, 46280		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 10/24/2016	
Person in Charge PIZZA HUT OF AMERICA LLC c/o Ducharm, McMiller & Assoc.				Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Responsible Person's E-mail		Certified Food Handler Chris Martin		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"/>	

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

Received by (name and title printed): Chris Martin		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



Retail Food Establishment Inspection Report

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Establishment Name Randall's Pizzeria	Telephone Number (812-475-8933)	Date of Inspection (mm/dd/yr) 10/13/2016	ID # 12214
Establishment Address (number and street, city, state, zip code) 1211 Tutor Ln. Ste. E2, Evansville, IN, 47715	(812-455-9717)		
Owner Randall Hadley	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 10/23/2016
Owner's Address 2843 Ravenswood Dr, Evansville, IN, 47714		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge Randall Hadley		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"/>	
Responsible Person's E-mail			
Certified Food Handler Randall Hadley			

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

Received by (name and title printed): Randall Hadley	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:

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Establishment Name Scandals		Telephone Number (812-423-2121)	Date of Inspection (mm/dd/yr) 10/13/2016	ID # 12278
Establishment Address (number and street, city, state, zip code) 1352 E Division St, Evansville, IN, 47714		(812-423-2121) (812-423-2121)		
Owner MNA 2001 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 10/23/2016	
Owner's Address 1348 E Division, Evansville, IN, 47711	Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>			
Person in Charge MNA 2001 Inc.	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"/>			
Responsible Person's E-mail				
Certified Food Handler Michael Stoker				

- 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): Michael Stoker	Inspected by (name and title printed): Carol Coudret
----------------------------------------------------------------	----------------------------------------------------------------

Received by (signature):	Inspected by (signature):
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cc:	cc:	cc:
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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 Zion Evangelical United Church of Christ		Telephone Number (812-425-7029)		Date of Inspection (mm/dd/yr) 10/11/2016	ID # 12289
Establishment Address (number and street, city, state, zip code) 415 NW 5th St, Evansville, IN, 47708		(812-425-7029)			
Owner Zion Evangelical UCC		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 10/20/2016
Owner's Address 415 NW 5th St, Evansville, IN, 47708				Summary of Violations: C 1 NC 0 R 0	
Person in Charge Zion Evangelical UCC				Menu Type (See additional page) 1 0 3 0 5	
Responsible Person's E-mail					
Certified Food Handler n/a					

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

Section#	C/NC	R	Narrative	To Be Corrected By
324	C		Manifest of grease trap cleaning could not be shown.	10/12/2016

Received by (name and title printed): Kim Reising		Inspected by (name and title printed): David Horning	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name: River Side Food Mart
Telephone Number: (812) 431-5373
Date of Inspection: 10/12/2016
ID #: 12366
Establishment Address: 1641 S Kentucky Ave, Evansville, IN, 47714
Owner: Gulshan Gora
Owner's Address: 2583 N KY Ave, Evansville, IN, 47711
Person in Charge: Gulshan Gora
Responsible Person's E-mail:
Certified Food Handler: New person starting will have.
Purpose: Routine (checked)
Follow-up: No
Release Date: 10/22/2016
Summary of Violations: C 1 NC 1 R 0
Menu Type: 1 2 3 4 5 (3 is selected)

- 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"

Table with 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: 324, C, Grease trap log needs maintained, 10/13/2016. Row 2: 346, NC, Customer hand sink needs soap, 10/13/2016.

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



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Establishment Name Burkhardt Motomart		Telephone Number (618-233-6754)	Date of Inspection (mm/dd/yr) 10/14/2016	ID # 12936	
Establishment Address (number and street, city, state, zip code) 500 N Burkhardt, Evansville, IN, 47715		Owner (618-233-6754)	Follow-up No		
Owner FKG Oil Company		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 10/24/2016		
Owner's Address 721 W Main, Belleville, IL, 62220			Summary of Violations: C 0 NC 1 R 0		
Person in Charge FKG Oil Company			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"/>		
Responsible Person's E-mail		Certified Food Handler			

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Section#	C/NC	R	Narrative	To Be Corrected By
342	NC		Hand sink in back not provided with hot water.	10/17/2016

Received by (name and title printed): Pam Mcintire		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	cc:



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Establishment Name Lincoln Market	Telephone Number (812-746-1170)	Date of Inspection (mm/dd/yr) 10/11/2016	ID # 13232
Establishment Address (number and street, city, state, zip code) 751 Lincoln Ave, Evansville, Indiana, 47713	Telephone Number (812-746-1170)		
Owner Fouzia Khan	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 10/21/2016
Owner's Address 751 Lincoln Ave, Evansville, Indiana, 47713		Summary of Violations: C 0 NC 1 R 0	
Person in Charge Fouzia Khan		Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Responsible Person's E-mail			
Certified Food Handler Fouzia Khan			

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- 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
257	NC		Temperture food probe needed.	10/12/2016

Received by (name and title printed): Maquesood A Khan	Inspected by (name and title printed): David Horning
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Received by (signature):	Inspected by (signature):
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cc:	cc:	cc:
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Establishment Name McAlister's Deli		Telephone Number (812-228-4222)	Date of Inspection (mm/dd/yr) 10/13/2016	ID # 13318
Establishment Address (number and street, city, state, zip code) 5301 Pearl Dr, Evansville, Indiana, 47712		Owner (812-228-4222)	Follow-up No	
Owner Kent Johnson	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 10/23/2016	
Owner's Address 5301 Pearl Dr, Evansville, Indiana, 47712	Person in Charge Kent Johnson		Summary of Violations: C 0 NC 0 R 0	
Responsible Person's E-mail	Certified Food Handler Mitch Henderlong		Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 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 THE NARRATIVE BELOW AS "R"

Section#	C/NC	R	Narrative	To Be Corrected By
			Approved to open	

Received by (name and title printed): Mitch Henderlong	Inspected by (name and title printed): Katie Gretler
Received by (signature):	Inspected by (signature):
cc:	cc: