

Establishm	rs Gr ent Addres	s (nu	re Bauerhaus mber and street, city, state, zip code) adt Rd., EVANSVILLE, IN, 47725	Telephone Number (812-867-3169 (812-867-3169 Purpose:		^{r)} 6/2016	ID # 10858 se Date
James	s A Ba	aue	er	Routine	No		05/2016
Owner's A	ddress			Follow-up		of Violation	
		<u>y (</u>	Ct, Evansville, IN, 47725	Complaint			
Person in C				Pre-Operational		(J _R U
James				Temporary			
Responsible	e Person's	E-ma	Ш	НАССР	Menu Ty	pe (See addi	tional page)
Certified Fo		er		Other (list)	1_22	<u></u> 3	$\underline{)}_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
1		E ID					
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
	-		D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!	MMARY OF VIOLATIONS" AN	D IN THE N	-	
Section#	C/NC	R	Narrative	0.10.0		To Be Co	orrected By
			No noted violation	ons			
Received by				Inspected by (name and title p Katie Gretle			
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



907 N Owner L & D Owner's Ac 1510 Person in C	S Lou ent Addres Fare Willia ddress rving harge Willia e Person's		nber and street, city, state, zip code) Ne., Evansville, IN, 47 Enterprises LLC Ave, Evansville, IN, 4 Enterprises LLC	Telephone Number ⁽ 812-425-4929 ⁽ 812-550-1698 Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u Summary C	p Releas p Releas 11/ of Violatior	04/2016	
Daniel				·	1 <u></u> 2			
			NTIFIED IN THE CHECKLIST AND NARRAT					DELOBIAC (ST
	()		FROM PREVIOUS INSPECTIONS ARE DENO		MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R		Narrative				orrected By
430	NC	R	Floors nee	ed repair/re	eplaced.		11/2	25/2016
Received by					Inspected by (name and title provided to the second			
Received by					Inspected by (signature):	-		
cc:			cc:			cc:		



Establishm	Less	s (nu	oods #430 mber and street, city, state, zip code) ylvania St., Evansville, IN, 47712	Telephone Number (812-426-7080 (270-843-3252	Date of Ins (mm/dd/yr 10/25		ID# 10885	
Owner HOUC Owner's Ac PO BO Person in C HOUC Responsible	CHEN Idress X 900 Charge CHEN Person's	S 1 09, S 1 ^{E-ma}	NORTH FOODS LLC , BOWLING GREEN, KY, 42102 NORTH FOODS LLC	Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	с_1		04/2016	
	ITFMS AR	FIDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ARKED "C"				
			PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUM		D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
173	С	R	Deli cooked chicken not protected from cross contami	nation, stacked on top of e	achother	Co	rrected	
			without protective b	parrier				
430	NC	R	Flooring thoughout in areas		11/3	30/2016		
100		1	r looning thoughout in arous					
Received by				Inspected by (name and title pr Katie Gretle				
Received by	(signature)):		Inspected by (signature):				
cc:			cc:		cc:			



	ond L	s (nu	Nes mber and street, city, state, zip code) vay 41, Evansville, IN, 47711	Telephone Number (812-424-4679 (812-426-0151) Purpose:	Date of Ing (mm/dd/yr 10/28 Follow-u	^{.,} 3/2016	ID # 10908 e Date
Georg	e Are	nd	ell	Routine	No		07/2016
Owner's Ad	ddress			Follow-up	Summary	of Violation	
		<u>n R</u>	Rd, Newburgh, IN, 47630	Complaint			
Person in C Georg	0	nd	ما	Pre-Operational	с <u></u> U	NC_	
Responsible				- Temporary	Menu Tvi	pe <i>(See addii</i>	tional page)
				НАССР		$\sim \sim$	$\mathbf{\hat{\mathbf{A}}}$
Certified For Pam R				Other (list)	1 <u>02</u>	<u>•</u> 3 <u></u>	$\underline{O}_4 \underline{O}_5 \underline{O}_5$
• CRITICAL	. ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
• VIOLATIO)N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
218	NC	R	Dish machine not prope	rly working.		10/3	31/2016
Received by	·		· · · · · · · · · · · · · · · · · · ·	Inspected by (name and title pr			
pam	ricke	<u>etts</u>	5	Carol Coudr	et		
Received by	(signature)	1:		Inspected by (signature):			
cc:			cc:		cc:		



Establishme	ent Name			Telephone Number	Date of Ins		ID #
Domi	no´s	Piz	zza #2571	(812-477-5544	(mm/dd/yr	, ,	10923
			nber and street, city, state, zip code)	() Owner	10/25	/2016	
1300 \$	S Gre	en	River Rd, Evansville, IN, 47715				
Owner	. – –			Purpose:	Follow-u		e Date
		IZZ	ZA, INC	Routine	No	11/	04/2016
Owner's Ad			POWEINC ODEEN KY 42404	Follow-up	Summary	of Violation	15:
		vay	, BOWLING GREEN, KY, 42104	Complaint		(
Person in C	I F P	177	ZA, INC	Pre-Operational	с <u></u> U		$\mathbf{D}_{\mathbf{R}}$
Responsible				Temporary	Menu Tvi	ne <i>(See add</i> i	tional page)
responsion	er er son s			НАССР			
Certified Fo	ood Handl	er		✓ Other (list)	$1O_2$	●₃($_{4}O_{5}O$
Keith E	Brown			opening	- <u> </u>	<u> </u>	<u> </u>
• CRITICAL	ITEMS AR	RE IDF	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
			No noted violations. Rea	adv to open			
			Caulk needed at the bac	CK OF SINKS.			
Received by	(nome or 1	title -	srinted).	Inspected by (name and title p	rintad):		
Keith		-		Kelly Holzm			
Received by	(signature)):		Inspected by (signature):	-		
cc:			cc:		cc:		



	sville		ountry Club	Telephone Number (812-425-2243	Date of Ins (mm/dd/yr 10/25		id# 10951
			mber and street, city, state, zip code) vn Rd, Evansville, IN, 47711	⁽ 812-425-2243			
owner Evans	ville (Σοι	untry Club	Purpose:	Follow-up		e Date 04/2016
Owner's Ac 3810		tov	vn Rd, Evansville, IN, 47711	✔ Follow-up Complaint	Summary	of Violation	
Person in C Evans	0	Σοι	untry Club	Pre-Operational	с <u></u> О	NC	<u>_</u>
Responsible				Temporary HACCP	Menu Typ	be (See addit	tional page)
Certified Fo				Other (list)	1 <u>0</u> 2	<u>3</u>	$\underline{O}_4 \underline{O}_5 \underline{O}_5 \underline{O}_5$
• CRITICAL	. ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
• VIOLATIC	DN(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
218	NC	R	Bar dish machine not	sanitizing.		Co	rrected
Received by				Inspected by (name and title pr Carol Coudr			
Received by			2	Inspected by (signature):			
cc:			cc:		cc:		



Establishme		Inr	2 Suitos	Telephone Number	Date of Ins (mm/dd/yr		ID #
			n & Suites nber and street, city, state, zip code)	(812-867-1100	10/26	/2016	11034
			Rd., Evansville, IN, 47725	⁽ 812-867-1100			
^{Owner} APAR	. LLC	,		Purpose:	Follow-uj NO		^{e Date} 05/2016
Owner's Ac	ldress			✓ Follow-up		of Violation	
		rs	Rd, Evansville, IN, 47725	Complaint	-		
Person in C APAR		,		Pre-Operational	с <u></u> U		$ _{R} 0 $
Responsible	,		il de la constant de	Temporary HACCP	Menu Typ	e (See addi	tional page)
Certified Fo	od Handl			Other (list)		\bigcap_{i}	$)_{4} \bigcap_{5} \bigcap_{7}$
Certified Fo	ou nanui	er			1 <u>02</u>		<u>′4030</u>
• CRITICAL	ITEMS AR						
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			All violations from 10-11-	16 corrected.			
Received by		-		Inspected by (name and title pr Carol Coudr			
Received by				Inspected by (signature):			
cc:			cc:		cc:		



Establishme		ť		Telephone Number (812-477-7588	Date of Ins (mm/dd/yr	r)	ID# 11048
Establishm	ent Addres	s (nu	mber and street, city, state, zip code) ton Ave., Evansville, IN, 47714	(a,)Owner	10/25	5/2016	
^{Owner} Pravin	Ikuma	ar F	Patel	Purpose:	Follow-u NO		e Date 04/2016
	Nash	ing	ton Ave, Evansville, IN, 47714	Follow-up Complaint	-	of Violation	
Person in C Pravin	Ikuma			Pre-Operational Temporary			<u>8</u> <u>R</u> <u>3</u>
Responsible				HACCP Other (list)	Menu Tyj	pe (See addii	ional page)
Certified Fo	ood Handle	er		Other (list)	$1 \underline{\bigcup} 2$		<u>/4050</u>
• CRITICAL	ITEMS AR	E IDE	CNTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
346	NC	R	Restroom lacking ha	•			rrected
347	NC	R	Restroom lacking pap	ertowels.		Co	rrected
295	NC	R	Reach in cooler shelving in n	eed of cleaning.		11/0	01/2016
Received by Rha		-		Inspected by (name and title pr Kelly Holzm			
Received by	(signature)):		Inspected by (signature):	-		
cc:			cc:		cc:		



2601 N Owner Busler Owner's Ad 2601 N Person in C	rS ent Addres NSt.J Ente Idress NSt.J harge Ente Person's	os erpr Joe erpr E-ma	mber and street, city, state, zip code) eph Ave, Evansville, IN, 47720 rises Inc e Ave, Evansville, IN, 47720 rises Inc	Telephone Number (812-426-2787 (812-424-7511 Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) —	Follow-u NO Summary C	p Releas 11/ of Violatior	03/2016
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
	. ,	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons			
Received by		-		Inspected by (name and title pr Katie Gretle			
Received by				Inspected by (signature):			
cc:			cc:		cc:		



Establishm Milan		iar	n Cuisine		Telephone Number (812-484-2222	Date of Ins (mm/dd/yr) 10/26)	^{ID #} 11216
			mber and street, city, state, z EVANSVILLE,		⁽ 812-909-1558	10/20	/2010	
^{Owner} Rafic	Hach	эm			Purpose:	Follow-up NO		e Date 05/2016
Owner's A			d Dr E Evansy	ville, IN, 47715	Follow-up	Summary	of Violation	-
Person in C	Charge		· · · · · · · · · · · · · · · · · · ·	/	Complaint Pre-Operational	$_{\rm C}$ 0	NC	<u>R</u>
Rafic				Temporary	<u> </u>			
Responsible	e Person's	E-mai	il	НАССР	Menu Typ	e (See addii	tional page)	
Certified F				Other (list)	1 <u>0</u> 2	<u>3</u>	$\underline{O}_{4} \underline{O}_{5} \underline{O}$	
• CRITICAI	L ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIS	T AND NARRATIVE COLUMNS N	MARKED "C"			
• VIOLATIO)N(S) REPE	ATED	FROM PREVIOUS INSPECTI	IONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
430	NC		Several are	eas of kitchen floor r	need repair/replace	;	11/2	26/2016
Received by Rafic					Inspected by (name and title pr David Hornii			
Received by	/ (signature)):			Inspected by (signature):			
cc:			I		cc:			



Establishm				Telephone Number	Date of Ins (mm/dd/yr		ID #
Motor				(812-963-6631	· ·	, /2016	11220
			mber and street, city, state, zip code) & 164, CYNTHIANA, IN, 47612	⁽ 618-233-6754	10/21	/2010	
^{Owner} FKG (Dil Co)		Purpose:	Follow-uj NO		e Date 03/2016
Owner's Ad				Follow-up	Summary	of Violation	15:
		stre	et PO Box 122, Belleville, IL, 62222	Complaint	\cap	($) \cap$
Person in C FKG (Pre-Operational	с <u></u>	NC_	$\underline{)}_{R} \underline{0}$
Responsible			 i	Temporary	Menu Tyj	pe (See addi	tional page)
				HACCP	\cap	\frown	
Certified Fo	ood Handle	er		Other (list)	$1 \underline{\bigcirc} 2$		<u>/405</u>
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUM	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons			
Received by		-		Inspected by (name and title pr Katie Gretle			
Received by				Inspected by (signature):			
cc:			cc:		cc:		



	High		chool	Telephone Number (812-435-8291	Date of Ins (mm/dd/yr 10/26		^{ID #} 11228
			mber and street, city, state, zip code) vay 41, EVANSVILLE, IN, 47725	⁽ 812-435-8453		/2010	
^{Owner} Evans	ville \	/ar	nderburgh School Corp.	Purpose:	Follow-uj NO		e Date 05/2016
	/alnut	St	, Evansville, IN, 47713	Follow-up Complaint	Summary	of Violatior	
	ville \		nderburgh School Corp.	Pre-Operational Temporary	с_ U _		
Responsible	e Person's	E-mai	1	НАССР	Menu Typ	e (See addii	tional page)
Certified For				Other (list)	1 <u>0</u> 2	<u>•</u> 3 <u>C</u>	$\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$
• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by		-		Inspected by (name and title pr Carol Coudr			
Received by				Inspected by (signature):			
cc:			cc:		cc:		



1201 Owner JVCR Owner's Ad	S #5 ent Addres E Virc J Ass Idress Shelb Charge J Ass e Person's	s (nui gini OCi yvi OCi E-ma	lle Rd, Louisville, KY, 40207 ates	Telephone Number (812-425-8119 (502-895-4265 Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u Summary C	p Releas 11/ of Violatior NC	ID # 11276 ie Date 04/2016 is: R_1 tional page) 4050	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"				
• VIOLATIC	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	UMMARY OF VIOLATIONS" AN	D IN THE N	HE NARRATIVE BELOW AS "R"		
Section#	C/NC	R	Narrative			To Be Co	orrected By	
430	NC	R	Grout missing alo	ng wall.		10/3	31/2016	
				-				
			-					
			-					
Received by	-	-		Inspected by (name and title p Carol Coudr				
Received by	1			Inspected by (signature):				
cc:			cc:		cc:			



2744 N Owner	ay #2 ent Addres NGre	en is (nui	631 ^{mber and street, city, state, zip code)} River Rd, Evansville, IN, 47715	Telephone Number (812-471-2933) (812-457-8611) Purpose:	Follow-uj) /2016	ID # 11369
Person in C	ldress DX 224 harge	45,	EVANSVILLE, IN, 47728	Routine Follow-up Complaint Pre-Operational		of Violatior	04/2016
ED KU Responsible Certified Fo Marla	e Person's ood Handle	E-mai er	1	Temporary HACCP Dther (list)		be (See addition $3 \bigcirc 3 $	tional page) 4050
• VIOLATIO	N(S) REPE	ATED	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUM		D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			Ok to open.				
Received by Ed K		-		Inspected by (name and title price of the second se	· ·		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm		_			Telephone Number	Date of Ins (mm/dd/yr		ID #
Taco					(812-467-0804	10/28	/2016	11385
			mber and street, city, state, zip code)	1 47740	(270-443-4364	10/20	/2010	
	SI.JC	se	ph Ave, Evansville, IN	N, 4771Z		E U	D 1	
^{Owner} D & G	Prop	ert	ies - Mike Dorman		Purpose:	Follow-uj NO		07/2016
Owner's Ad	ldress				Follow-up	Summary	of Violation	
5250 L	JS Hv	vy (60 West, PADUCAH, K	(Y, 42003	Complaint		_	
Person in C					Pre-Operational	$\mathbf{U}_{\mathbf{J}}$		
D & G	Prop	ert	ies - Mike Dorman		Temporary	0		
Responsible	e Person's	E-ma	1		НАССР	Menu Typ	be (See addii	ional page)
					Other (list)	$\cdot \bigcirc \cdot$	\frown	$\mathcal{O}\mathcal{O}$
Certified Fo						$1 \underline{\bigcirc} 2$	$\underline{\bigcirc}_3\underline{\bigcirc}$	<u>′4050</u>
CRITICAL	ITEMS AR	RE IDF	ENTIFIED IN THE CHECKLIST AND NARRA	ATIVE COLUMNS N	IARKED "C"			
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE " Section# C/NC D Normative					MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
			No n	noted violati	ons			
Received by	(name and	title p	printed):		Inspected by (name and title pr	rinted):		
Lisha	Nes	ssl	er		Katie Gretle	r		
Received by	(signature):			Inspected by (signature):			
cc:			cc:			cc:		



Establishme Crazy		fet		Telephone Number (812-437-8833	Date of Ins (mm/dd/yr	.)	^{ID #} 11494
Establishm	ent Addres	s (nu	mber and street, city, state, zip code) rdt Rd, Evansville, IN, 47715	⁽ 812-437-8833	10/20	8/2016	
^{Owner} Fei Er	n Pan			Purpose:	Follow-uj Yes		^{e Date} 07/2016
Owner's Ac 3228 (y E	Dr, EVANSVILLE, IN, 47711	Follow-up Complaint	_	of Violatior	
Person in C Fei Er	harge			Pre-Operational	<u>с</u> 9		5 _R 9
Responsible		E-mai	1	– Temporary HACCP	Menu Typ	oe (See addii	ional page)
Certified For				Other (list)	1 <u>0</u> 2	<u>3</u>	$\underline{0}_4 \underline{0}_5 \underline{0}$
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"							
	. ,		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				orrected By
344	C	R	Hand sink not acce				rrected
129	C		Employees not washing hand				28/2016
345	С		Hand washing facility used for purposes		•		28/2016
173	С	R	Improper storage of raw animal proc	ducts in walk-in coo	olers.		28/2016
415	С	R	German cockroaches	present.		11/1	0/2016
295	С	R	Knives and can opener stored a	as clean but soiled.		Co	rrected
191	С		Items lacking date marking in	n walk-in coolers.		10/2	28/2016
187	С	R	Various items on buffet line not held at 135 d	legrees Fahrenheit or ç	greater.	10/2	28/2016
193	С		Imitation crab meat and melons on buffet line not clear	rly marked to indicate that ti	me as a		
			public health control is be	eing utilized.		10/2	28/2016
177	NC	R	Food items not covered in v	walk-in coolers.		10/2	28/2016
295	NC	R	Shelving in walk-in coolers	heavily soiled.		10/3	30/2016
177	NC	R	Fish and beef stored on floor in wal		oler.	Co	rrected
413	NC		Gap in threshold at ba			11/0	04/2016
431	NC	R	Area under Mongolian grill buf	ffet heavily soiled.		10/3	30/2016
			55	,			
	Received by (name and title printed): Feien Pan Inspected by (name and title printed): Colin Ward						
Received by	(signature))]		Inspected by (signature):			
cc: cc: cc:							



2011 L ^{Owner} Eric W Owner's Ac	e Slic ent Addres _incol /eber Idress Beat harge /eber e Person's	s (nui n A ty E-mai	mber and street, city, state, zip code) Ave, Evansville, IN, 47714 Ln, Evansville, IN, 47725	Telephone Number (812-402-8518 (812-626-1313) Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-uj NO Summary C) /2016 Releas 11/ of Violation NC	$ID # 11534 e Date 07/2016 Is: D R O tional page) 14 O_5 O$
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS 1	MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative	040		To Be Co	orrected By
			All violations from 10/19/2	016 corrected.			
Received by		-	printed):	Inspected by (name and title pr Kelly Holzm			
Received by				Inspected by (signature):			
cc:			cc:		cc:		



Establishme 14134 Owner SWIR Owner's Ac 16 W Person in C SWIR Responsible Certified Fo N/a	n Chi ent Address Darn CA & Idress Virgin harge CA & Person's	nst Mc iia Mc E-mai	St, Evansville, IN, 47713 pre	Telephone Number (812-867-3142 (812-464-7807 Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	.) 5/2016 p Releas	05/2016
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
Section	ente	ĸ	No noted violatio	ากร		10 20 00	incerea by
				5113			
Received by				Inspected by (name and title pr Katie Gretle			
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishme Blush		a L	ounge		Telephone Number() Establishment	Date of Ins (mm/dd/yr		^{ID #} 11592
			nber and street, city, state, zip code) side, Evansville, IN, 47708		⁽ 812-433-4034	10/24	/2010	
^{Owner} Aztar In	diana (Gam	ning Co LLC / dba Tropicana Evansv	ville	Purpose:	Follow-up NO		se Date 03/2016
^{Owner's Ad} 421 N		ver	side Dr, Evansville, IN, 4770	80	Follow-up Complaint	Summary	of Violation	
Person in C Aztar In		Gam	ning Co LLC / dba Tropicana Evansv	ville	Pre-Operational	с <u></u> U		$\int_{R} U$
Responsible	e Person's	E-mai	l		НАССР	Menu Typ	ve (See addii	tional page)
Certified Fo					Other (list)	1 <u>0</u> 2	<u>•</u> 3 <u>C</u>	<u>)4050</u>
• CRITICAL	ITEMS AR	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUM	MNS M	ARKED "C"			
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S Section# C/NC R Narrative					MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		-			To Be Co	orrected By
			No noted vio	olatio	ons			
Received by Nicol					Inspected by (name and title pr Katie Gretle			
Received by	(signature)):			Inspected by (signature):			
cc:			сс:	1		cc:		



Establishmo 12731 ^{Owner} Stacia	ders ent Addres N Gre Mille	een	zza Too ^{nber and street, city, state, zip code)} River Rd, Evansville, IN, 47715 Joseph Sells	Telephone Number (812-867-7172 (812-449-0304 Purpose: Routine	Date of Ins (mm/dd/yr 10/25 Follow-up NO) /2016 p Releas	ID # 11631 se Date 04/2016
Owner's Ad 13221		twi	ck Ct, Evansville, IN, 47725	Follow-up Complaint	-	of Violation	
Person in C Stacia		r &	Joseph Sells	Pre-Operational	<u>c_U</u>		$\underline{)}_{R} \underline{0}$
Responsible	Person's	E-mai	1	Temporary HACCP	Menu Typ	e (See addii	tional page)
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u></u> 3) ₄ <u>0</u> 5 <u>0</u>
• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
	.,		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by		title p		Inspected by (name and title pr Kelly Holzm	<i>,</i>		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



		nic	or Center		Telephone Number () Establishment	Date of Ins (mm/dd/yr		^{ID#} 11684
			nber and street, city, state, zip code) St, Evansville, IN, 47708		() Owner	10/24	/2016	
^{Owner} CARV	'ER S	EN	IIOR CENTER		Purpose:	Follow-up NO		se Date 03/2016
	E EIG	θHΓ	۲ ST, Evansville, IN, 47708	3	Follow-up Complaint	Summary	of Violation	
	ER S		IIOR CENTER		Pre-Operational Temporary	с <u></u> U		J_{R}
Responsible	e Person's	E-mai	ù.		НАССР	Menu Typ	e (See addii	tional page)
Certified Fo		er			Other (list)	1 <u>0</u> 2	<u>•</u> 3 <u>(</u>) ₄ <u>0</u> 5 <u>0</u>
			NTIFIED IN THE CHECKLIST AND NARRATIVE COL FROM PREVIOUS INSPECTIONS ARE DENOTED IN 1			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrat	tive			To Be Co	orrected By
Section	ente	K	No discrep				TOBCEC	freeded by
				Janut	58.			
Received by		-			Inspected by (name and title pr David Hornii	· · · · ·		
Received by					Inspected by (signature):			
cc:			cc:	1		cc:		



Establishm 240 N Owner	e Arra ent Addres Burk	ha	gements ^{mber and street, city, state, zip code)} rdt Rd, Evansville, IN, 47715	Telephone Number (812-437-5999 (812-437-5999 Purpose:	Follow-up Relea		ID # 11741
1		ſer	ri J Miller	✔ Routine	No	11/	05/2016
Owner's A 3400		1D	ALE DR, Newburgh, IN, 47630	Follow-up Complaint	Summary	of Violation	
Person in C David		Гer	ri J Miller	Pre-Operational	с_ U		J_{R}
Responsible				- Temporary HACCP	Menu Ty	pe <i>(See addi</i>	tional page)
	1 77 11			Other (list)	$1 \bigcirc 1$		$\mathcal{O}_{\mathcal{O}}$
Certified F		er			$1 \underline{\bigcirc} 2$		<u>/4050</u>
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATEI) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by				Inspected by (name and title pr Colin Ward	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			сс:		cc:		



Establishm	a Me	s (nu	terranean Gri ^{mber and street, city, state, zi} Ave, Evansville	ip code)	Telephone Number (812-473-7005) (812-476-7672)			id# 11749
^{Owner} Amjad	l Man	na			Purpose:	Follow-uj NO		^{e Date} 04/2016
Owner's Ac	ldress				Follow-up		of Violation	
), E	vansville, IN, 4	17715	Complaint		(
Person in C Amjad	0	na			Pre-Operational	с <u></u>	NC_(
Responsible			a		Temporary HACCP	Menu Typ	e (See addii	tional page)
Certified Fo	od Handl	r			Other (list)	$1 \bigcirc 2$	$\bigcap_2 \bullet$	$)_{4} \bigcirc _{5} \bigcirc$
Kristi C			nanna					<u> 4030</u>
• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIST	TAND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIO	ONS ARE DENOTED IN THE "SUN	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
				No noted violation	on.			
Received by Kristi			orinted): gemanna		Inspected by (name and title p Kelly Holzm			
Received by	(signature)	1			Inspected by (signature):	_		
cc:				cc:		cc:		



Establishm		Ge	lato & More		Telephone Number	Date of Ins (mm/dd/yr		ID# 11883
			nber and street, city, state, zip code)		(812-479-8272	10/28	/2016	11003
2003 I	_incol	n A	ve, Evansville, IN, 4	47714	⁽ 812-430-1127			
owner Valeri		orc			Purpose:	Follow-up NO		e Date 07/2016
Owner's Ac		10			✔ Routine Follow-up		of Violation	
3305 \$	Swee	tse	r Ave, Evansville, IN	J, 47714	Complaint		_	_
Person in C					Pre-Operational	\mathbf{C} U		$ _{R} 0 $
Valeri			1		Temporary			
Responsible	e Person's	E-ma	I		НАССР	Menu Typ	se (See aaai	tional page)
Certified F					Other (list)	1 <u>0</u> 2	$\bigcirc_3 \bigcirc$	$)_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
Wendy	/ VVIIS	on						
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS viol ation(s) dedeated edom ddevious inspections are denoted in the se								
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE " Section# C/NC P Norretive					MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	No	Narrative		 	To Be Co	orrected By
No noted violations					ons.			
Received by					Inspected by (name and title pr			
Received by					Inspected by (signature):			
cc:			cc:			cc:		



Establishm				Telephone Number	Date of Ins (mm/dd/yr		ID #
Kwik				(812-473-7008	10/26	/2016	11945
			nber and street, city, state, zip code) Ave, Evansville, IN, 47714	⁽ 214 ⁻ 781-4532	10,20	,_010	
Owner				Purpose:	Follow-u		se Date
Dhanji	i Pate	el		✔ Routine	No	11/	05/2016
Owner's Ad		1		Follow-up	Summary	of Violation	15:
		nu	t St, Evansville, IN, 47714	Complaint	\cap	(
Person in C		Л		Pre-Operational	<u>с</u> О		
Dhanji			-	Temporary		<i>(C)</i> 11:	
Responsible	e Person's	E-mai		НАССР	Menu Ty	be (See addi	tional page)
Certified Fo	od Handl			Other (list)	$1 \bigcirc 2$		$)_{4} \bigcirc _{5} \bigcirc$
n/a	Jou Hallun	51			$1 \underline{\bigcirc} 2$		<u>/4030</u>
	ITEMS AD	E IDE	NTIFIED IN THE CHECKLIST AND NADDATINE COLUMNS	MADIZED ((C))			
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	UMMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violat	tions.			
Received by		title p	printed):	Inspected by (name and title pr Colin Ward	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm	Jr H ent Addres	s (nu	n School 7-8 mber and street, city, state, zip code)	Telephone Number (812-435-0976 (812-435-8453	Date of Ins (mm/dd/yr 10/26		^{ID#} 11973
Owner			way 41, Evansville, IN, 47725 Inderburgh School Corp.	812-435-8453 Purpose:	Follow-uj NO		e Date 05/2016
Owner's Ac 951 W Person in C	ldress Alnut Tharge	St	, Evansville, IN, 47713	Follow-up Complaint Pre-Operational	Summary	of Violatior	
Responsible	e Person's	E-mai	nderburgh School Corp.	Temporary HACCP Other (list)			tional page)
Certified Fo					$1 \underline{\bigcup} 2$		<u>′4050</u>
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violati	ons			C
				0113.			
Received by				Inspected by (name and title pr Carol Coudr			
Received by				Inspected by (signature):			
cc:			cc:		cc:		



Establishm Salac		rld	Downtown		Telephone Number (812-422-0777	7 Date of Inspection (mm/dd/yr) 10/26/2016		ID# 11977	
			mber and street, city, state, zip code) , Evansville, IN, 47708		() Owner	10/26	/2016		
^{Owner} Matthe		de	out		Purpose:	Follow-uj NO		e Date 05/2016	
	Main	St	, Evansville, IN. 47708		Follow-up Complaint	-	of Violation		
Person in C Matthe Responsible	ew Ri				Pre-Operational Temporary		NC	2 <u>R</u>	
Certified F					HACCP Other (list)) $_{4}\bigcirc _{5}\bigcirc$	
Matthe			ut					<u>_+</u>	
• CRITICAI	. ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIV	/E COLUMNS M	IARKED "C"				
• VIOLATIO	VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU Section# C/NC R Narrative				MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R		Narrative	<u> </u>			orrected By	
226	NC	ļ!	Cooler by register leaking wa		-	duled.	11/09/2016 10/27/2016		
431	NC	R	Ice machin	Ice machine guard soiled.					
		!							
			<u> </u>						
			<u> </u>						
			<u> </u>						
		<u> </u>							
			L						
			<u> </u>						
Received by		-			Inspected by (name and title pr David Hornii	· · ·			
Received by	latthew Rideout				Inspected by (signature):				
cc:			cc:	I		cc:			



Establishme 6549 S Owner Trudy Owner's Ac	arts Address S 105 Stew Idress S 105 harge Stew	art 0 V art 0V art	/, Owensville, IN, 47665	Telephone Number (812-664-6049 (812-664-6049 Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u NO Summary C) /2016 Releas 11/ of Violation NC	ID # 11997 e Date 07/2016 hs: 	
Certified Fo	ood Handle	er		Other (list)	1 <u>0</u> 2	<u>O</u> 3 <u>C</u>	$)_4 \underline{\bigcirc}_5 \underline{\bigcirc}$	
• CRITICAL	ITEMS AR	E IDF	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
	. /		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N			
Section#	C/NC	R	Narrative			To Be Co	orrected By	
			No noted violation	ons.				
Received by		-		Inspected by (name and title pr Carol Coudr				
Received by	(signature)):		Inspected by (signature):				
cc:			cc:		cc:			



Establishm					T-1	Date of Ins	neation	ID #
			kos		Telephone Number	(mm/dd/yr		ID #
<u>Gigi´s</u>					(812-437-9149	10/26	/2016	12013
			nber and street, city, state, z dt, Evansville,		⁽ 317-809-9626			
Owner	-				Purpose:	Follow-u		
Brand		allm	nan		✔ Routine	No	11/	05/2016
Owner's Ad		∖.∕ff	Dr, Evansville	NI 17711	Follow-up	Summary	of Violation	IS:
DIS VV Person in C		y II		;, IIN, 47711	Complaint	\cap		
Brand		allm	nan		Pre-Operational	с <u></u>	NC_	
Responsible					Temporary	Menu Typ	e (See addi	tional page)
					HACCP		\sim	
Certified Fo					Other (list)	$1 \bigcirc 2$	$\underline{\bigcirc}_3\underline{\bigcirc}$	$_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
Fron S	hea F	lilln	nan					
• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIS	T AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU				MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
				No noted violation	ons.			
N 11				ſ	×			
Received by		-	umiet		Inspected by (name and title provided to the second	rinted):		
Received by	(signature)	:			Inspected by (signature):			
cc:				cc:		cc:		



Establishme 499 N (Owner Chipot Owner's Ac 1401 V Person in C	otle N ent Address Green tle Me Idress Vynkc harge tle Me	s (nur Riv exic exic	kican Grill #2077 mber and street, city, state, zip code) ver Rd Ste A, Evansville, IN, 47715 can Grill of Colorado, LLC St Ste 500, Denver, CO, 80202 can Grill of Colorado, LLC	Purpose: Routine Follow-up	Follow-u NO Summary C	r) 7/2016 p Releas	06/2016
Certified Fo			James King	Other (list)	102	<u></u> 3	<u>4</u> 050
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No Violations observered at ti	me of inspection.			
Received by	(name and	title r	printed):	Inspected by (name and title p	rinted):		
Jame		-		Colin Ward	,		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



Establishme Little		sar	`s Pizza	Telephone Number (812-401-9555	Date of Ins (mm/dd/yr		ю# 12144	
			mber and street, city, state, zip code) ph Ave, Evansville, IN, 47711	⁽ 734-658-7768	10/25	/2010		
^{Owner} Collec	tive E	Effo	orts Investments, Inc	Purpose:	Follow-up NO		se Date 04/2016	
	String	tov	wn Rd, Evansville, IN, 47714	Follow-up Complaint		of Violation		
Person in C Collec		Effo	orts Investments, Inc	Pre-Operational Temporary	с <u></u> U		$\underline{)}_{R} \underline{0}$	
Responsible	Person's	E-mai	a	НАССР	Menu Typ	e (See addi	tional page)	
Certified Fo	od Handle	er		Other (list)	1 <u>0</u> 2		$_{4}\underline{\bigcirc}_{5}\underline{\bigcirc}$	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative		<u> </u>		orrected By	
Section#	C/NC	ĸ				TO BE CO	frected By	
			No noted violation	ons				
Received by Riley				Inspected by (name and title pr Katie Gretle				
Received by				Inspected by (signature):				
cc:			cc:		cc:			



	nie's		cret Homemade Desserts	Telephone Number (812-437-5757	Date of In (mm/dd/yr 10/28		id# 12224
			mber and street, city, state, zip code) II Rd, Evansville, IN, 47711	⁽ 812-422-1698	10/20	,2010	
^{Owner} Bobbie	e Wea	ath	erford	Purpose:	Follow-u NO		^{e Date} 07/2016
Owner's Ac		ridg	ge Ct, Evansville, IN, 47711	Follow-up Complaint	Summary	of Violation	
Person in C Bobbie		ath	erford	Pre-Operational	с <u></u>		J_{R}
Responsible	e Person's	E-ma	1	Temporary HACCP	Menu Tyj	pe (See addii	tional page)
Certified Fo			erford	Other (list)	1 <u>0</u> 2	$\bigcirc_3 \bigcirc$	$\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by Bobb	·			Inspected by (name and title pr Carol Coudr	,		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm				Telephone Number	Date of Ins		ID #	
Tom (& Ch	ee	1	(812-401-2433	(mm/dd/yr	。 。 。 /2016	12273	
			mber and street, city, state, zip code)		10/25	/2010		
	N Gr	eer	n River Rd, Evansville, IN, 47715					
owner Steve	Ham	me	r	Purpose:	Follow-up Yes		04/2016	
Owner's A				Follow-up		of Violation		
600 N	Weink	bac	ch Ste 520, Evansville, IN, 47711	Complaint	-			
Person in C	harge			Pre-Operational	$\mathbf{U}_{\mathbf{O}}$	NC		
Steve				Temporary				
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addii	tional page)	
Certified F	ood Hondl) P		Other (list)	$1 \bigcirc 2^{1}$	$\bigcap_2 \bullet$	$)_{4} \bigcap_{5} \bigcap_{5} \bigcap_{7} \bigcap_{7$	
Certified F	oou manuk	.1			1 <u></u> 2_	<u></u>	<u>+030</u>	
• CRITICAI	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
• VIOLATIO	DN(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative		I	To Be Co	orrected By	
256	NC		Reach in prep table cooler lacl	king thermometer.		10/02/2016		
Received by		-		Inspected by (name and title pr				
kari d	delar	OS	a	Kelly Holzm	eyer			
Received by	(signature)):		Inspected by (signature):				
cc:			cc:		cc:			



	City		ercantile nber and street, city, state, zip code)		Telephone Number (812-618-5824	^{ID #} 12922		
			/anderburgh, Indiana, 47	7713	812-618-5824			
^{Owner} Heath	er Va				Purpose: Routine	Follow-uj NO		e Date 03/2016
	lain S	t, \	/anderburgh, Indiana, 47	7713	Follow-up Complaint		of Violatior	
Person in C Heath		uq	nt		Pre-Operational			$\mathbf{D}_{\mathbf{R}} \mathbf{O}$
Responsible					Temporary HACCP	Menu Typ	pe (See addii	tional page)
Certified Fo	ood Handle	er			Other (list)	1 <u>0</u> 2	<u></u> 3	$)_4 O_5 O$
• CRITICAL	. ITEMS AR	E IDF	NTIFIED IN THE CHECKLIST AND NARRATIVE	COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R		arrative			To Be Co	orrected By
	ļ		No disc	repanci	es.			
			<u> </u>					
	<u> </u>							
Received by Clint		-			Inspected by (name and title pr David Hornin			
Received by	(signature)	12			Inspected by (signature):			
cc:			сс:			cc:		



Establishm St. M		W	est Side Crossing	Telephone Number Date of Inspection (mm/dd/yr) ID # (812-485-4800 10/26/2016 1326					
			mber and street, city, state, zip code) ger Ave, Evansville, Indiana, 47712		10/20	<i>»</i> 2010			
^{Owner} Touch	-			Purpose:	Follow-u NO		se Date 05/2016		
Owner's Ac 3700 V Person in C	Vashir	ngto	on Ave, Evansville, Indiana, 47714	Complaint		of Violation	· ·		
Touch Responsible	point	E-ma		Pre-Operational Temporary		NC pe (See addin			
Certified For			t	HACCP Other (list)	102	<u></u> 3	$\underline{)}_4 \underline{\bigcirc}_5 \underline{\bigcirc}$		
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M						
			D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!	MMARY OF VIOLATIONS" AN	D IN THE N				
Section#	C/NC	R	Narrative			To Be Co	orrected By		
			No noted violation	ons					
	_					ļ			
						ļ			
	<u> </u>								
	1								
Received by				Inspected by (name and title pr Katie Gretle	· · ·				
Received by	v (signature)):		Inspected by (signature):					
cc:			cc:		cc:				



Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 1-5, Sanitary Operations of Tattoo Parlors, 5.45 City & 5.06 County Tattoo Parlors and Body Piercing Facilities Ordinance. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment	ulichmont Nama						Establishment	Phone	Inspection Da	te: ID#			
ABC Test 1		Se	rivce						10/26/2				
Establishment	Addres	s (N	umber & Street, Ci	ty, State, Zip)			Purpose:		Follow-up:				
							Routine		INO				
Establishment	Email /	\ddr	955				Follow-u	р	Violation Sum	marv			
Establishinent	Email F	Auun	255				Complair	nt					
							Pre Oper	ational	NC	R			
Manager Name	e						Tempora	iry	Operation Typ	pe:			
							Other		Tattoo				
							_		Piercing				
Manager Emai	Addre	SS							Permaner Tattoo &	nt Make-up			
										ercing & Pern	n Ma	ko-un	
-VIOLATION(S)	ARE ID	ENTI	FED IN THE FOLLO	WING COLUMN	S: "NC'	" NOT COMP	LIANT "C" CO	omplian [.]		OT OBSERVED		KC-up	
			FROM PREVIOUS II									S "R"	
		-	ection		C NC	NO		Sect	-		С	NC	NO
Work area isolat							rps containers and			.37)			
Surfaces; intact,							ste storage-locked/		-				
Surfaces disinfe			ired (1.5.36)				ste transport/dispo	•	·				
					le use razor & sten	•	(2)						
Proper ventilation (5.45.26)					e use needles (1.5.33) able equip. autoclaved in separate area (5.45.26; 5.6.17)								
Restrooms Clean & Available (5.06.25; 5.45.06)					• •		• •	5.26; 5.6.17)					
Handwashing facilities (1.5.30; 5.45.06; 5.6.16)			-	le Use Packaging u	•					ļ			
Eating, drinking, smoking prohibited (1.5.36) BPP/Infectious Waste Handling Training Records (1.5.24/27)				oclave Spore Log &									
-			5 5	,		· ·	uired Disinfectant			5.6.25)			
	•		B Records (5.06.24;				elry quality/steriliz	•		1			ļ
Operator Writte			se displayed (5.06.2	4; 5.45.30)			sonal Protective equipment provided (1.5.25) sonal Protective equipment used (1.5.31)						
Patron's rights of		•					dwashing (1.5.30)	,					ļ
5	. ,	•	cords (5.45.04/05/0) 6. E 6 11)			8.	airmont (1 5 20)				
-		-	ars (1.5.28/5.6.10)	50, 5.0.11)			ditions/illness/impairment (1.5.29) too/piercing site prep (5.45.15)						
			nstructions given to	natrons			in dressing applied	• •					
(5.45.22; 5.6.22)		aren	istructions given to	pations				(3.43.00)					ĺ
						Clea	in Protective Clothi	ing (5.6.14	4/24; 5.45.25)				
Section#	NC	R	Narrative							To Be Corre	ectec	l By	
219		R	No V	iolations	obser	vered a	t time of in	spec	tion	10/2	7/2	016	;
								•					
	-												
Received by (n	ame ar	nd tit	^{le printed):} tes	st 2			Inspected by (r	name and	title printed):	Vanderbu	rgh	Οοι	unty
Received by (si							Inspected by (s	ignature):				
cc:	cc: cc:					1	cc:						



Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 1-5, Sanitary Operations of Tattoo Parlors, 5.45 City & 5.06 County Tattoo Parlors and Body Piercing Facilities Ordinance. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment I	Name								Establishment I	Phone	Inspection Da	te:	ID#				
ABC Test Tattoo Serivce									10/27/2016								
Establishment Address (Number & Street, City, State, Zip)									Purpose: Follow-up:								
									Routine		Yes						
Establishment E	ddre	ess		Follow-up Violation Summary:													
				Complaint NC R													
Manager Name										Pre Operational							
_									Tempora	ry	Tattoo						
				Other	Other Piercing												
Manager Email	SS					Permanei		•									
						Tattoo &		•	N 4 - I								
			ED IN THE FOLLO		MPLIAN	Tattoo, Pi 「 "NO" N	-			ke-up							
								<u>[</u> Compliant "C" <u>Compliant</u> "No" Not obsei I the "Summary of Violations" and in the Narrative							S "R"		
Section						NC	NO		Section					С	NC	NO	
Work area isolated (5.45.06/25; 5.6.25)									ps containers and infectious waste bags (1.5.37)								
Surfaces; intact, smooth, cleanable (1.5.36)									te storage-locked/symbol (1.5.37)								
Surfaces disinfected as required (1.5.36)									te transport/disposal (1.5.38)							ļ	
Proper lighting (5.45.06)								0	le use razor & stencils (1.5.32)								
Proper ventilation (5.45.26)									le use needles (1.5.33)								
Restrooms Clean & Available (5.06.25; 5.45.06)									sable equip. autoclaved in separate area (5.45.26; 5.6.17) le Use Packaging used (1.5.34)								
Handwashing facilities (1.5.30; 5.45.06; 5.6.16) Eating, drinking, smoking prohibited (1.5.36)									oclave Spore Log & maintenance records (5.45.26; 5.6.17)								
BPP/Infectious Waste Handling Training Records (1.5.24/27)									uired Disinfectant used and labeled (1.5.36; 5.6.25)								
Artist & Operator Hepatitis B Records (5.06.24; 5.45.25)								•	relry quality/sterilized (5.45.26; 5.6.25)								
Establishment & Artist License displayed (5.06.24; 5.45.30)									onal Protective equipment provided (1.5.25)								
Operator Written Policies (1.5.26)								Perso	onal Protective equipment used (1.5.31)								
Patron's rights displayed (1.5.25)								Hand	dwashing (1.5.30)								
Consent/ Minor Consent/Records (5.45.04/05/06; 5.6.11)								Cond	ditions/illness/impairment (1.5.29)								
Patron's records – keep 2 years (1.5.28/5.6.10)								Tatto	oo/piercing site prep (5.45.15)								
Written & verbal aftercare instructions given to patrons (5.45.22; 5.6.22/25)								Clear	n dressing applied (5.45.06)								
								Clean Protective Clothing (5.6.14/24; 5.45.25)									
Section#	NC	R	Narrative									To Be Corrected By					
							othe	r				,	10/31	1/2016			
													10/31	1/2016			
				kelly 11/15										5/20	016	1	
			Kelly 10/23										3/20	016	l.		
kelly									11/16/2016								
Received by (name and title printed):									Inspected by (n	ame and	l title printed):	Kel	ly Ho	olzr	ney	<i>y</i> er	
Received by (sig							Inspected by (signature):										
cc:							cc:										