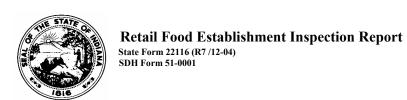
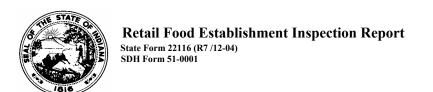


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Acrop				Telephone Number (812-475-9320)	Date of Ins (mm/dd/yr	·)	10# 10827	
		e (nu	mber and street, city, state, zip code)	1	12/13	/2016	10027	
			River Rd, Evansville, IN, 47715	() Owner				
Owner Viceby	مالم		C	Purpose:	Follow-u		se Date	
Yiochi		LL	.C	✓ Routine	Yes	12/	23/2016	
Owner's Ad 898 Bl		WC	OOD DR, Henderson, KY, 42420	Follow-up	_	of Violation		
Person in C				Complaint	L 3	NC_6	5 . 6	
Yiochi		LL	C	Pre-Operational Temporary	[C	NC_	R	
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	oe (See addi	tional page)	
Certified F	ood Handle	er		Other (list)	1(),	\bigcirc 3 \bigcirc)4(•)5(
Doros			va		1	<u> </u>		
• CRITICAL	ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"				
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
415	С	R	Roaches and fruit flies present.	Called pest contro	ıl.	12/2	20/2016	
345	С		Kitchen hand sink used for purposes of	other than hand wa	shing.	g. 12/13/2016		
171	С	R	Employees not washing hands	when necessary.		12/	13/2016	
410	NC	R	Lacking light shielding in v	valk-in cooler.		12/20/2016		
416	NC		Dead roaches within facility r	needing removal.		12/13/2016		
218	NC	R	The seal on the southern walk-in cooler in p	oor repair. Needs rep	olacing.	12/2	20/2016	
347	NC	R	Hand towels not provided for I	kitchen hand sink.		13/2016		
431	NC	R	Facility in need of cl	eaning.		12/2	20/2016	
394	NC		Refuse area in need of	f cleaning.		12/2	20/2016	
Received by	(name and	l title i	printed):	Inspected by (name and title p	rinted):			
_	`			Colin Ward				
Received by			- 10.113 4	Inspected by (signature):				
cc:			cc:		cc:			



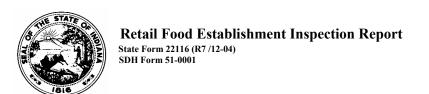
Establishm Al`s (_	or E		Telephone Number	Date of Ins (mm/dd/yr		ID#	
				812-550-2409	12/14	/2016	10834	
			mber and street, city, state, zip code) Dia St., Evansville, IN, 47710	812-550-2409				
Owner			<u>, , , , , , , , , , , , , , , , , , , </u>	Purpose:	Follow-uj	Releas	se Date	
Perry	Nuna	ma	ıker	✓ Routine	No	12/	24/2016	
Owner's Ac				Follow-up	Summary	of Violation	ns:	
9000 V	Vhisp	erin	ng Tree Ln, Evansville, IN, 47711	Complaint	_			
Person in C			•	Pre-Operational	$_{\rm c}$ U	NC 4	$2_{\rm R}0$	
Perry				Temporary				
Responsible	e Person's	E-mai	il	HACCP	Menu Typ	e (See addi	tional page)	
C (C I	1 77 11			Other (list)	. ()		\bigcirc	
Certified Fo	ood Handl	er			1 2	<u> </u>	<u> 1405</u>	
• CRITICAL	ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"				
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
431	NC		Microwave soil	ed.		12/	15/2016	
346	NC		No soap provided in men	n's bathroom.		12/15/2016		
Received by	(name and	l title r	printed).	Inspected by (name and title p	rinted):			
Reid		_		David Horni				
Received by				Inspected by (signature):	<u> </u>			
cc:			cc:		cc:			



Establishm	ent Name			Telephone Number	Date of Inspe	ction	ID#
		s l	Neighborhood Grill	(812-471-0942	(mm/dd/yr) 12/14/2		10844
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	(91 7 -270-5626	12/14/2	2010	
	= Moi	·ga	n Ave, Evansville, IN, 47715				
Owner Apple	Cent	ral,	LLC	Purpose: Routine	Follow-up No		24/2016
Owner's Ac	ldress			Follow-up	Summary of	Violation	ns:
PO Bo	ox 780)73	32, Wichita, KS, 67278	Complaint	-		
Person in C				Pre-Operational	$_{\rm C}$ U	NC_1	$L_R U$
Apple				Temporary			
Responsible	e Person's	E-ma	il	HACCP	Menu Type	(See addi	tional page)
					\bigcirc		
Certified For Aymee				Other (list)	1 2	<u> </u>	<u> 405</u>
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	MARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NAI	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		1	o Be Co	orrected By
430	NC		Tiles missing in various areas the	roughout the kitche	n.	01/0	09/2017
Received by	(name and	title p	printed):	Inspected by (name and title pr	rinted):		
Ayme	ee H	ar		Colin Ward	· 		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



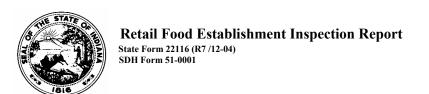
Establishm Arby		13	2	Telephone Number (812-477-2888	Date of Ins (mm/dd/yr	·)	10# 10846
			mber and street, city, state, zip code)		12/14	/2016	10040
			River Rd, Evansville, IN, 47715	678-514-4377			
Owner \[\Delta r \rightarrow '\cong \]	s Res	taı	ırant Group	Purpose:	Follow-u		se Date 24/2016
Owner's A		iac	Tant Group	Routine			
		eter	Center West, Atlanta, GA, 30338	Follow-up Complaint	-	of Violation	
Person in C	Charge			Pre-Operational	$\begin{bmatrix} 1 \end{bmatrix}$		0_{R}
			ırant Group	Temporary			
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	oe (See addi	tional page)
Certified F	ood Handl	or		Other (list)	100	\bigcirc),(),()
Monica			nev		1 2	<u></u>	<u>/4030</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "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
294	С		Chemical sanitizer for wiping cloths below	ow required concent	ration.	Co	rrected
Received by	*		rinted): Kinney	Inspected by (name and title p Kelly Holzm			
Received by				Inspected by (signature):	- j - c i		
cc:			cc:		cc:		



Establishm Amar		R	est Value	Telephone Number Date of Inspection (mm/dd/yr) 100				
			mber and street, city, state, zip code)	812-473-7944	12/13/	/2016	10899	
			eh, Evansville, IN, 47715	812-473-7966				
Owner	/ondo	. n l	1.0	Purpose:	Follow-up		se Date	
Shiv V		ın L	<u>-LC</u>	Routine	No		25/2016	
		nse	eh, Evansville, IN, 47715	Follow-up	l _ `	of Violation	_	
Person in C	Charge		·	Complaint Pre-Operational	0		$\frac{0}{R}$	
Shiv \				Temporary				
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)	
Certified F	and Handl	O.M.		Other (list)	1000	\bigcirc),()_5()	
n/a	oou manui	er			1 2		<u>/4030</u>	
• CRITICAI	L ITEMS AI	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"	<u> </u>			
• 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 Dixi			printed):	Inspected by (name and title processing Ward	rinted):			
Received by				Inspected by (signature):				
cc:			cc:		cc:			



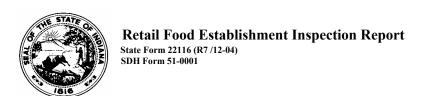
Establishm Donu		nk		Telephone Number	то# 10931		
			mber and street, city, state, zip code)	812-426-2311	12/14	/2016	10931
			e, EVANSVILLĖ, IN, 47710	812-426-0011			
Owner CHRIS	S KEI	ИP	 F	Purpose: Routine	Follow-uj		24/2016
Owner's A	ddress			Follow-up		of Violation	
		one	d Ave, Evansville, IN, 47711	Complaint	_ `		_
Person in C		ИP	F	Pre-Operational	$_{\rm C}$	NC_	$I_{R} 0$
Responsible				Temporary	Menu Typ	e (See addi	tional page)
				НАССР		\bigcirc G	
Certified F Abi Wi				Other (list)	1 <u>0</u> 2		<u> 4050</u>
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATEI	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
431	NC		Some floor surfaces in service area and ha	ndles of kitchen cooler	soiled.	12/	15/2016
Received by			printed): nbarger	Inspected by (name and title p			
Received by			901	Inspected by (signature):	· · · · · · · · · · · · · · · · · · · 		
cc:			cc:		cc:		



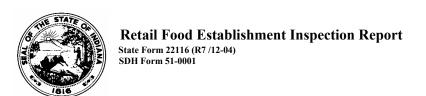
			•				
Establishm		nole	esale, Inc.	Telephone Number (812-471-0235	Date of Ins (mm/dd/yr)	i	то# 10945
			mber and street, city, state, zip code)		12/14	′2016	10010
4315 l	Morga	an <i>i</i>	Ave., EVANSVILLE, IN, 47715	812-385-3762			
Owner	اه دا		n, Engler	Purpose:	Follow-up		se Date
Owner's A		ier	ry Engler	✓ Routine	No		24/2016
		32	Princeton, IN, 47670	Follow-up	Summary	of Violation	ns:
Person in C		<i></i> ,	1 1111001011, 1111, 111010	Complaint	$\begin{bmatrix} 0 \end{bmatrix}$	NC_(0^{-6}
Danie	I & Sh	ner	ry Engler	Pre-Operational Temporary	C	NC	- K
Responsible	e Person's	E-ma	1	HACCP	Menu Typ	e (See addi	itional page)
G de le	177 11			Other (list)			\bigcirc
Certified For	ood Handl	er				<u> </u>	<u> 1405</u>
	LITEMS AF	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		ND IN THE N.	ARRATIVE	E BELOW AS "R"
Section#	C/NC	R	Narrative	MINIMI OF VIOLATIONS IN	(DITTILE IT		orrected By
Sections	0,110		No noted violation	ons.		10200	orrected By
				01101			
							_
Received by Danie				Inspected by (name and title p			
Received by				Inspected by (signature):			
cc:			cc:		cc:		



Establishm	ent Name			Telephone Number	Date of Ins	pection	ID#
Great	t Ame	erio	can Cookie Co	812-471-1774	(mm/dd/yr		10995
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	(10wner	12/12	/2016	
	Gree	n F	River Rd, Évansville, IN, 47715				
Owner	. Bak	ori.	oc Inc	Purpose:	Follow-up		se Date (22/2016)
Agape Owner's Ac		2116	25 IIIC	Routine			
		or	Run, Evansville, IN, 47711	Follow-up	_ `	of Violation	_
Person in C		.		Complaint	0	NC ($0_{\rm R}$
Agape	e Bak	erie	es Inc	Pre-Operational Temporary	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	NC	K
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
G 10 17				Other (list)			\bigcap
Certified For Amy S		er			$1 \bigcirc 2$	$\bigcirc 3 \bigcirc$	<u>/405</u>
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IADVED "C"	<u> </u>		
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		ID IN THE N	ADD ATIVE	DELOW AC "D"
Section#	C/NC	R	Narrative	MIMARY OF VIOLATIONS AN	DIN THE N.		orrected By
Section	C/ITC	K	No discrepancio			10 BC C	Trected By
			140 discrepance	 			
					$\overline{}$		
Received by				Inspected by (name and title p			
Julie	New	/m	an	Kelly Holzm	eyer		
Received by	(signature)):		Inspected by (signature):			
cc:			ce:		cc:		
					1		



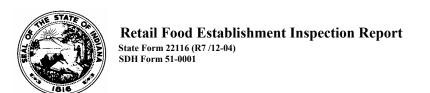
Establishm Hillto				Telephone Number	Date of In (mm/dd/yr		тр# 11029	
			mber and street, city, state, zip code)	812-422-1757	12/14	1/2016	11029	
			y Way, Evansville, IN, 47720	812-483-0432				
Owner				Purpose:	Follow-u		se Date	
Marta	Holle	n		✓ Routine	Yes	; 12/	<u>/24/2016</u>	
Owner's A		rnh	eimer Dr, Evansville, IN, 47720	Follow-up	Summary	of Violation	ns:	
Person in C			einer Di, Evansville, IIV, 47720	Complaint C NC R				
Marta		n		Pre-Operational	C	NC_	T R	
Responsible	e Person's	E-ma	il	Temporary	Menu Ty	pe <i>(See addi</i>	itional page)	
				HACCP		\bigcirc 6		
Certified For Randa			3	Other (list)	1 <u>0</u> 2	<u>U</u> 3 <u>U</u>	<u>/4</u> 05	
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"				
• VIOLATIO	ON(S) REPE	ATEL	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	IARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
347	NC		Bar hand washing sink lackir	ing paper towels. 12/14/2016				
346	NC		Bar hand washing sink, i	needs soap.		12/14/2016		
324	С		Kitchen hand washing sink	, needs repair.		12/	14/2016	
191	С		Ready to eat food improper	ly date marked.		12/	14/2016	
431	NC	R	Walk-in beer cooler, nee	ds cleaning.		01/0	04/2017	
256	NC		Bar area and meat reach in coolers lacki	ing functional thermo	meter.	12/	15/2016	
Received by	`	,		Inspected by (name and title p		 3		
Received by				Inspected by (signature):		,		
cc:			cc:		cc:			
			1					



Establishm Kirhy		ata	Diniing/Sauced	Telephone Number	Date of Ins (mm/dd/yr)		то# 11072
			mber and street, city, state, zip code)	812-422-2230	12/14	/2016	11072
			St., EVANSVILLE, IN, 47713	(812-483-9052			
Owner Scott	Schvi	mik		Purpose:	Follow-up		se Date //24/2016
Owner's A		HIIN		Routine			
		Hil	l Dr, Evansville, IN, 47711	Follow-up Complaint	Summary	of Violation	
Person in C	Charge			Pre-Operational	$_{\rm C}$	NC_($\bigcup_{\mathbf{R}} \mathbf{U}$
Scott				Temporary	1.	~ 11	
Responsible	e Person's	E-mai	ıl	НАССР	Menu Typ	e (See addi	tional page)
Certified F	and Handl			Other (list)	100	\bigcirc	\bigcirc
Scott S						<u></u>	<u> </u>
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "C"			
• VIOLATIO	ON(S) REPE	CATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No Violations observered at t	time of inspection			
Received by Scott		_		Inspected by (name and title p			
Received by				Inspected by (signature):	<u>. J</u>		
00:			Laci		co:		
cc:			cc:		cc:		



Establishm LiC'S		`ro	am	Telephone Number	Date of Insp (mm/dd/yr)		ID#
			mber and street, city, state, zip code)	812-473-0569	12/16	/2016	11084
			Ave., Evansville, IN, 47714	812-424-3066			
Owner				Purpose:	Follow-up		se Date
Don S	mith			✓ Routine	No	12/	26/2016
Owner's A		" • •	ot Evenoville IN 47700	Follow-up	Summary	of Violation	ns:
Person in C		ree	et, Evansville, IN, 47708	Complaint	\cap	() ()
Don S				Pre-Operational	C	NC_	$\frac{0}{\mathbf{R}}$
Responsible		E-ma	il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР			
Certified F Jamia				Other (list)	$1 \bigcirc 2$	<u>3</u>	<u>)4</u> 050
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	лакер "С"	<u> </u>		
• 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 Tricia				Inspected by (name and title processing Ward	rinted):		
Received by			-	Inspected by (signature):			
				- · · · · · · · · · · · · · · · · · · ·			
cc:			cc:		cc:		



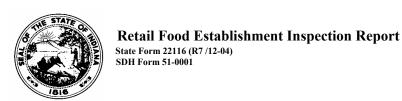
Establishm Libby		oπ	n´s Cafe	Telephone Number (812-437-3040)	pection)	1D# 11110	
			mber and street, city, state, zip code)		12/13	/2016	11110
			Evansville, IN, 47711	812-437-3040			
Owner				Purpose:	Follow-up		se Date
ELIZA		<u> </u>	OLK	✓ Routine	No	12/	23/2016
Owner's A		_ \	anovilla IN 47711	Follow-up	Summary	of Violation	ns:
Person in C		ĽV	ansville, IN, 47711	Complaint	\cap	(0_{R}
ELIZA		4 V	OLK	Pre-Operational	c_ O _	NC_	7 R O
Responsible				Temporary	Menu Typ	e (See addi	tional page)
				НАССР		\circ	
Certified For Elizabe				Other (list)	1 2	<u>3</u>	<u>)4050</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AADKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ADD ATIME	DELOW AC "D"
Section#	C/NC	R	Narrative	MIMARY OF VIOLATIONS" AN	DINTHEN		orrected By
Section#	C/NC	K	No noted violation	one		то ве С	Trected by
			No noted violation	0115.			
Received by				Inspected by (name and title p			
Eliza	beth	V	olk	Carol Coudr	et		
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



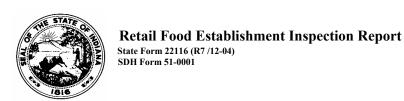
Establishm Chick				Telephone Number (812-477-9370	Date of Insp (mm/dd/yr))	то# 11142
			mber and street, city, state, zip code)		12/12/	/2016	11172
800 N	Gree	n F	River Rd, Evansville, IN, 47715				
Owner Debor	ah De	ear	1	Purpose: Routine	Follow-up NO		se Date /22/2016
Owner's Ac		<u> </u>	<u>'</u>	Follow-up		of Violation	
800 N	Gree	n F	River Rd, Evansville, IN, 47715	Complaint	Summary	_	
Person in C			<u> </u>	Pre-Operational		NC_	\mathbf{J} \mathbf{E} \mathbf{U}
Debor	ah D	ear	1			NC	K
Responsible	e Person's	E-mai	il	Temporary	Menu Typ	e (See addi	itional page)
				HACCP			
Certified For Debbie				Other (list)	1 2		<u> 1405</u>
• CRITICAL	L ITEMS AF	RE IDE	ENTIFIED 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 Antw		-		Inspected by (name and title p			
Received by				Inspected by (signature):	<u>- , </u>		
cc:			201		cc:		
66.			cc:				



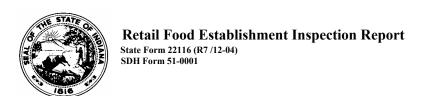
			• •					
Establishmo McDc		s ŧ	<i>‡</i> 11291	Telephone Number (812-421-0569)	Date of Ins (mm/dd/yr 12/13)	11197	
			mber and street, city, state, zip code) rger Ave, EVANSVILLE, IN, 47712	(0.4.)Owner 0.40	12/13	/2010		
Owner PAUL	SNIE	DEF		Purpose:	Follow-uj		se Date 23/2016	
Owner's Ad PO BO		109	, EVANSVILLE, IN, 47719	Follow-up Complaint	Summary	of Violation	_	
Person in C		DEF	₹	Pre-Operational Temporary	C O	NC_	$\frac{3}{2}$	
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)	
Certified For Michel			and	Other (list)	1 2	<u>3</u>	<u>)</u> 4 <u>U</u> 5 <u>U</u>	
• CRITICAL	ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
• VIOLATIO	ON(S) REPE	ATEL	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
324	NC		Grease trap log, not showing all d	locumented service	es.	12/	16/2016	
257	NC	R	Lacking thermometers in severa	al reach in coolers		12/16/2016		
431	NC	R	Walk in refrigarator cealing and three compa	12/	16/2016			
Received by Jake	,			Inspected by (name and title properties of the Ricardo Zac		<u> </u>		
Received by	(signature):		Inspected by (signature):				
cc:			ce:		cc:			



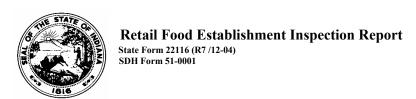
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Circle	e K #2	24	14	812-477-6352		2016	11242
			mber and street, city, state, zip code)	(812-379-9227	12/15/	2016	
2400 l	E Riv	ers	ide Dr, Evansville, IN, 47714	812-379-9227			
Owner	_			Purpose:	Follow-up		se Date
		/er	nience Store LLC	✓ Routine	No	12/	25/2016
Owner's A		- /	2	Follow-up	Summary o	f Violation	ns:
		7, (Columbus, IN, 47202	Complaint	\cap	() (
Person in C Mac's		⁄er	nience Store LLC	Pre-Operational	c_ U	NC_(J _R U
Responsible	e Person's	E-ma	il	Temporary	Menu Type	(See addi	tional page)
				HACCP		~ ~	
Certified Fo	ood Handle	er		Other (list)	1 2	<u>3</u>	<u>)4050</u>
• CRITICAL	LITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ЛARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
					+		
Received by	(name and	title 1	printed):	Inspected by (name and title p	rinted):		
teres	`			Carol Coudr			
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm		<u>~</u> Г		Telephone Number	Date of Ins (mm/dd/yr		ID#
Some				812-470-7772	12/14	/2016	11326
			mber and street, city, state, zip code) Evansville, IN, 47708	(812-470-7772			
Owner		τ, _	17700	Purpose:	Follow-u	p Releas	se Date
Belind	la Bre	eivo	gel	Routine	No		24/2016
Owner's A	ddress		_	Follow-up	Summary	of Violatio	ns:
		oar	d Ave, Evansville, IN, 47714	Complaint	\mathbf{a}		
Person in C		sis (c	agal	Pre-Operational	$_{\rm C}$ $_{\rm C}$	NC_	$I_{R}U$
Beling Responsible				Temporary	Monu Tyr		tional page)
Kesponsibi	e rerson's	E-ma	.11	НАССР	Menu Typ	se (see aaai	iionai page)
Certified F	ood Handl	er		Other (list)	$1\bigcirc_2$	\odot_3	$_{4}O_{5}O_{1}$
					1	<u> </u>	<u></u>
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"	•		
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
431	NC		Guard in ice machine by bac	ck cooler soiled.			15/2016
			_				
			<u> </u>				
Received by Ryar		-		Inspected by (name and title p			
Received by				Inspected by (signature):	J		
cc:			cc:		cc:		



Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Sonic	: Driv	e-l	ln #102	812-475-1099	12/13/2	2016	11328
			mber and street, city, state, zip code)	() Owner	12/13/	2016	
	Cover	<u>t A</u>	ve, Evansville, IN, 47714				
Owner .			(E ::::	Purpose:	Follow-up		se Date
4		-IN	of Evansville Inc	✓ Routine	No	12/	23/2016
Owner's Ac		~ E	ON MICHIEN MC 67200	Follow-up	Summary o	f Violation	18:
		ег	Rd, WICHITA, KS, 67209	Complaint	\cap	() ()
Person in C	narge Drive	-In	of Evansville Inc	Pre-Operational	c_ O	NC_	$\frac{1}{R}$
Responsible				Temporary	Menu Type	(See addi	tional page)
•				НАССР			
Certified Fo		er		Other (list)	$_{1}\bigcirc_{2}($	$)_3$ \bullet	$)_{4} \bigcirc_{5} \bigcirc$
Lori Ha	ayes						
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		r	Го Ве Со	orrected By
			No noted violation	ons.			
Received by				Inspected by (name and title p			
Sara	h Hu	nt	er	Kelly Holzm	eyer		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishmo Subw				Telephone Number	pection)	ID#	
		as (nu	mber and street, city, state, zip code)	812-401-8792		/2016	11364
			Evansville, IN, 47710	⁽ 812-401-8790			
Owner			· · · · · ·	Purpose:	Follow-uj		se Date
ANGE	LA M		GEE	Routine	No	12/	23/2016
Owner's Ac		0 11 0	re Del Eveneville IN 47744	Follow-up	Summary	of Violation	ns:
Person in C		OLĆ	ge Rd, Evansville, IN, 47711	Complaint	\cap	NC_	1 1
ANGE	narge HAM	1CC	3FF	Pre-Operational	C_O	NC	T R
Responsible				Temporary	Menu Typ	e (See addi	tional page)
				HACCP			
Certified Fo				Other (list)	$1 \bigcirc 2$	<u> </u>	<u>)4U5U</u>
Donna	Sanc	tetu	<u>ır </u>				
• CRITICAL							
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
431	NC		Beverage dispensing units	needs cleaned.		12/	14/2016
347	NC	R	Drying towels not at hand	washing sinks.			
254	NC		Walk-in freezer thermomet	er not accurate		12/2	20/2016
255	NC		Reach-in refigerator thermometer r	missing in serving a	area.	12/2	20/2016
			_				
Received by Rick		_	printed):	Inspected by (name and title p David Horni			
Received by				Inspected by (signature):	J		
cc:			cc:		cc:		



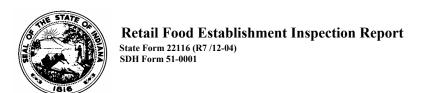
				I			
Subw		3U	71 <i>1</i>	Telephone Number	Date of Insp (mm/dd/yr)		ID#
			mber and street, city, state, zip code)	812-437-3750	12/10/	/2016	11371
			Unit A, EVANSVILLE, IN, 47720	⁽ 812 ⁻ 774-6689			
Owner				Purpose:	Follow-up	Releas	se Date
Larry				✓ Routine	No	12/	26/2016
Owner's Ad		_ 4 [Dr. Eveneville, INI, 47744	Follow-up	Summary	of Violation	ns:
		ot L	Or, Evansville, IN, 47711	Complaint		() (
Person in C				Pre-Operational	$C_{\underline{C}}$	NC_	$0_{\rm R}$
Larry Responsible		E	21	Temporary	Mana Tan	- (C 1.1:	tional page)
Kesponsibio	e rerson's	c-ma	ш	НАССР	Menu Typ	e (see aaai	uonai page)
Certified F	ood Handle	er		Other (list)	102	(a) (c)	$)_4\bigcirc_5\bigcirc$
Larry F						<u></u>	<u> </u>
		RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"	<u> </u>		
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No note of violati	ons.			
Received by				Inspected by (name and title p			
kalpe	esh p	at	el l	Ricardo Zac	arias)	
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		
I			i i		1		



Establishm 510 N Owner PATH Owner's Ad	ent Address STONE Charge	is (nui SE IIN ECI	REEK CIR, NEWBURGH, IN, 47630	Telephone Number (812-423-0035) (812-573-7777) Purpose: Routine Follow-up Complaint Pre-Operational Temporary	Pollow-up NO Summary o	Release 12/	_
Certified F				HACCP Other (list)	102	<u></u>	<u>4</u> 0 <u>5</u> 0
• CRITICAL	LITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
	. ,		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative	202		To Be Co	orrected By
			No noted violation	ons.			
Paggivad I-	(nama ar	titla -	printed):	Inspected by (name and title	rintad):		
Piyus				Ricardo Zac			
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



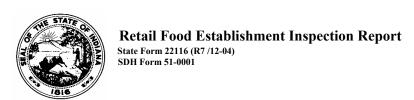
			<u> </u>				
Establishm TGI F		/S :	#432	Telephone Number (812-491-8443)	Date of Insp (mm/dd/yr)		тр# 11394
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)		12/16/	2016	
	Green	Riv	er Rd Ste 101, Evansville, IN, 47715			1	<u> </u>
Owner Centra	al Floi	rida	a Restaurants, Inc.	Purpose:	Follow-up		se Date //26/2016
Owner's Ac	ddress			Follow-up	Summary of		
		' A\	e Ste 301, Fremont, CA, 94538	Complaint	\cap	() ()
Person in C		rida	a Restaurants, Inc.	Pre-Operational	C	NC_	7 R O
Responsible			•	Temporary HACCP	Menu Type	See addi	tional page)
Certified F	ood Handle) P		Other (list)	102),(),()_5()
			n, Mark Schell			<u>3</u>	<u> </u>
• CRITICAL	LITEMS 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 NA	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No discrepanci	es.			
Received by Mark				Inspected by (name and title possible Kelly Holzm			
Received by	(signature)):		Inspected by (signature):	<u>.</u>		
cc:			cc:		cc:		



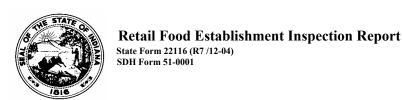
Establishm	erbui	s (nu	n Co Jail - Aramark mber and street, city, state, zip code) n Ave, Evansville, IN, 47711	Telephone Number (812-421-6288 (812-421-6288) Purpose:	Date of Insp (mm/dd/yr) 12/14/ Follow-up	2016	11420 se Date
Arama	ark			Routine	No		24/2016
Owner's Ac				✓ Follow-up	Summary of	of Violation	ns:
		lar	n Ave, Evansville, IN, 47711	Complaint		_	
Person in C				Pre-Operational	c_0	NC_	\mathcal{L}_{R}
Arama Responsible		E ma	31	Temporary			tional page)
Kesponsible	e rerson's	c-ma	11	HACCP	Menu Typo	: (see aaai	iionai page)
Certified Fo	ood Handle	er		Other (list)	$_{1}\bigcirc_{2}($	\bigcirc_3 \bigcirc	$_{4}\bigcirc_{5}\bigcirc$
Chuck	Strick	dar	nd)		
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			Dish machine operating	as required.			
<u> </u>				· · · · · · · · · · · · · · · · · · ·	1		
Bryan				Inspected by (name and title processed in Coudr			
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm				Telephone Number	Date of Ins (mm/dd/yr)		ID#
Wend	dy′s ≉	#32	26	812-477-4522	12/14		11437
			mber and street, city, state, zip code)	(812-482-3212	12/14/	2016	
1	Linco	n <i>F</i>	Ave., Evansville, IN, 47714				
Owner SERV	ו צוו׳	nc		Purpose:	Follow-up NO		se Date //24/2016
Owner's A		110.		 			
		neir	m Rd Suite A, Jasper, IN, 47546	Follow-up Complaint	Summary	of Violation	
Person in C			•	Pre-Operational	\mathbf{C}	NC_($\mathbf{J}_{\mathbf{R}}\mathbf{U}$
SERV				Temporary			
Responsible	e Person's	E-ma	11	НАССР	Menu Typ	e (See addi	tional page)
Certified F	ood Handl	er		Other (list)	$1 \bigcirc 2$	\bigcirc_3 \bigcirc	$_{4}O_{5}O_{1}$
Larry S						<u> </u>	<u></u>
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
295	С		Soiled ice dispenser	in lobby.		12/1	14/2016
Received by Mich			printed):	Inspected by (name and title p	rinted):		
Received by	y (signature):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#		
Pisto	n`s				2046	11506			
			mber and street, city, state, zip code)	(812 ^E 401-1699)	12/14/2	2016			
2131 \	W Fra	ank	lin St, Evansville, IN, 47712						
Owner				Purpose:	Follow-up		se Date		
Jason	Engl	ish		✓ Routine	No 12/24/20				
Owner's Ac				Follow-up	Summary of	Violation	ns:		
201 B	S Ful	tor	Ave, EVANSVILLE, IN, 47708	Complaint					
Person in C				Pre-Operational	c_2		J _R U		
Jason	Engl	ish		Temporary		110	_ ~		
Responsible	e Person's	E-ma	il		Menu Type	(See addi:	tional page)		
				НАССР	$I \sim c$	\			
Certified F				Other (list)	1 <u>U</u> 2 <u>(</u>	<u>3</u>	<u>)4</u> <u>0</u> 5 <u>0</u>		
Dante/	Cory	Gra	ay						
• 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 "SUI	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative				orrected By		
		IX		doto morkina			-		
191	С		Ready to eat items lacking				14/2016		
437	С		Chemical spray bottle r	not labaled		Co	rrected		
Dagai 11	. (mans 1	4;41 -	seinted).	Inamastad by (r 4 t'd	mintad):				
Received by	,			Inspected by (name and title property 700)					
Dont			5	Ricardo Zac	anas				
Received by	(signature)):		Inspected by (signature):					
cc:			cc:		cc:				



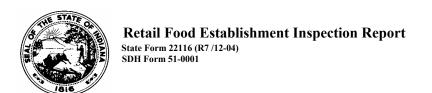
Establishm				Telephone Number Date of Inspection (mm/dd/yr)				
Taco				812-402-8226	12/13	/2016	11554	
			nber and street, city, state, zip code) River Rd, Evansville, IN, 47715	618-262-5441				
Owner Mike E	Blake			Purpose:	Follow-u		se Date //23/2016	
Owner's A				Follow-up		of Violation		
725 N	Mark	æt,	MT CARMEL, IL, 62863	Complaint	_			
Person in C Mike E				Pre-Operational	c_ Z	NC_	<u> </u>	
Responsible		E-mai	1	Temporary	Menu Tvi	oe (See addi	tional page)	
F				НАССР				
Certified F	ood Handl	er		Other (list)	1 2	<u></u>) ₄ <u>0</u> 5 <u>0</u>	
• CRITICAI	L ITEMS AF	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	AARKED "C"	1			
• 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	
295	С	R	Can opener soil	led.		Co	rrected	
303	С		Sanitize buckets were not provid	led for wiping cloth	S.	Corrected		
			_					
			_					
Received by Hanr				Inspected by (name and title p	rinted):			
Received by			:	Inspected by (signature):				
cc:			cc:		cc:			
			30.					



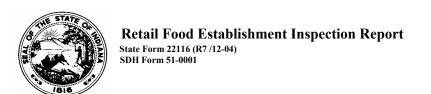
			<u> </u>				
Establishm		atu	ral Food Market Inc	Telephone Number (812-471-5071	Date of Insp (mm/dd/yr)		то# 11557
Establishm	ent Addre	ss (nu	mber and street, city, state, zip code)	812-430-9388	12/14/	2016	11001
	E Virg	gini	a St, Evansville, IN, 47715				
Owner Cathe	rine F	Elhe	ert-Burkemper	Purpose: Routine	Follow-up No		se Date /24/2016
Owner's A		_10(Sit Barkeripei	Follow-up	Summary		
6133	Bright	ton	Dr, Evansville, IN, 47715	Complaint	Suilillary		
Person in C		-lh/	ert-Burkemper	Pre-Operational	$c_{\rm U}$	NC	$J_{R}U$
Responsible				Temporary	Menu Type	: (See add)	itional page)
Tresponsion	0 1 01 5011 5		-	НАССР		, (See iiiiii	
Certified F	ood Handl	er		Other (list)	$1 \bigcirc 2$	<u>•)</u> 3 <u>C</u>	<u>)</u> 4 <u>U</u> 5 <u>U</u>
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "C"	•		
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE NA	ARRATIVE	E BELOW AS "R"
Section#	C/NC	R	Narrative			To Be C	orrected By
			No noted violation	ons.			
Received by Caro		_	· ·	Inspected by (name and title p	rinted):		
Received by			J	Inspected by (signature):			
cc:			cc:		cc:		



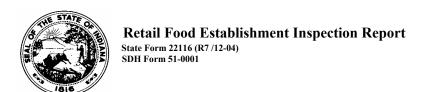
			• •	-			
Establishm Domi		Di-	770	Telephone Number	Date of Ins (mm/dd/yr		ID#
				<u> </u> (812-471-8585	12/12	2/2016	11581
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	() Owner			
Owner	ıгp	177	7.4 INIC	Purpose:	Follow-u		se Date
		IZZ	ZA, INC	Routine	Yes	12/	22/2016
Owner's Ac 1021 E		vay	, BOWLING GREEN, KY, 42104	Follow-up Complaint	Summary	of Violatio	
Person in C	Charge		ZA, INC	Pre-Operational	$_{\rm c}$	NC_	$I_{R}U$
Responsible				Temporary	Manu Tva		itional page)
Kesponsibil	e i eison s	L-ilia	11	НАССР	- Wichu Ty	oc (see aaa	iionai page)
Certified F				Other (list)	10^{2}	\bigcirc_3	$)_4$ \bigcirc_5 \bigcirc
Dan La	<u>ashbro</u>	ook	e				
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be C	orrected By
256	NC		Reach in prep table cooler lacl	king thermometer.		12/	16/2016
Received by Hunt				Inspected by (name and title p Kelly Holzm			
Received by				Inspected by (signature):	<i>- ,</i>		
cc:			cc:		cc:		



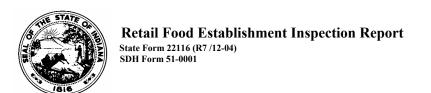
Establishm Domi		Di-	770	Telephone Number Date of Inspection (mm/dd/yr)				
				812-471-8585	12/16	2016	11581	
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	() Owner				
Owner	IFD	177	ZA, INC	Purpose:	Follow-up NO		se Date /26/2016	
Owner's A		ı∠∠	-A, INC	Routine				
		vay	, BOWLING GREEN, KY, 42104	Follow-up Complaint	Summary	_	•	
Person in C	Charge IFP	177	ZA, INC	Pre-Operational	$c_{\underline{\mathbf{U}}}$	NC_	$\frac{\mathbf{J}}{\mathbf{R}}$	
Responsible				Temporary	Menu Typ	e (See addi	itional page)	
				НАССР			\ \ \ \	
Certified For Dan La			e	Other (list)	$1 \bigcirc 2$	<u>3</u>	<u>)4</u> <u>0</u> 5 <u></u>	
			ENTIFIED 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 NA	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
			Violation from 12/12/16	corrected.				
Received by Sam				Inspected by (name and title position Kelly Holzm				
Received by				Inspected by (signature):	<i>- , -</i> -			
cc:			ec:		cc:			
			ω.					



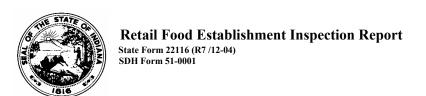
Establishm	ent Name			Telephone Number	Date of Ins	pection	ID#
		e-	ln #111	812-476-7730	(mm/dd/yr))	11604
			mber and street, city, state, zip code)	() Owner	12/16	/2016	11004
			River Rd, Evansville, IN, 47715	Owner			
Owner			, ,	Purpose:	Follow-up	Releas	se Date
Sonic	Drive	-In	of Evansville Inc	Routine	No	12/	26/2016
Owner's Ac				Follow-up	Summary	of Violation	ns:
208 S	Maiz	e F	Rd, WICHITA, KS, 67209	Complaint		_	
Person in C				Pre-Operational	$ _{\mathbf{C}}$ \mathbf{U}	NC ($0_{\rm R}$
			of Evansville Inc	Temporary			
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)
C (C IE	177 11			Other (list)			\bigcirc
Certified Fo			Ramahi		$1 \bigcirc 2 $	$\bigcirc 3 \bigcirc$	<u> 1405</u>
• CRITICAL	L 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				Inspected by (name and title p			
Mich	elle \	Na	adi Ramahi	Kelly Holzm	ever		
Received by				Inspected by (signature):	<i>- j -</i> .		
]							
cc:			cc:		cc:		



	e Rol		g Pretzel Co	Telephone Number (812-464-9289	Date of Inspe (mm/dd/yr)		1D# 11616
			mber and street, city, state, zip code) nk Rd, Evansville, IN, 47712	⁽ 330-823-0575	12/10/2	_010	
Owner WR P	RETZ	ΈL	S 3 INC	Purpose:	Follow-up No		e Date 25/2016
	W Sta	ate	St, ALLIANCE, OH, 44601	Follow-up Complaint	Summary of		
Person in C WR P		ΈL	S 3 INC	Pre-Operational Temporary	c_ U _	NC_	L _R U
Responsible	e Person's	E-ma	il	НАССР	Menu Type	(See addi	tional page)
Certified Fo				Other (list)	$1\bigcirc 2$	<u>)</u> 3 <u>C</u>	<u>4</u> 050
• CRITICAL	L ITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative		7		orrected By
431	NC		Fountain syrup container spill	in the back room.		12/1	15/2016
Received by	(name and	title p	printed):	Inspected by (name and title pr	rinted):		
Kata	rina l	Na	ısh	Ricardo Zac	arias		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



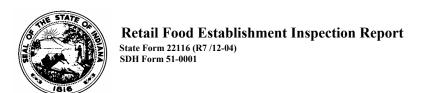
New New		tieı	Restaurant and Bar	Telephone Number () Establishment	ection	то# 11665	
Establishm	ent Addre	ss (nu	mber and street, city, state, zip code) By 57, Evansville, IN, 47720	812-867-3493	12/15/	2016	
Owner			er LLC	Purpose:	Follow-up NO		se Date /25/2016
Owner's Ac 8621 N		HE	STER CT, Evansville, IN, 47725	Follow-up Complaint	Summary	_	
4	s Fro		er LLC	Pre-Operational Temporary			$\frac{0}{R}$
Responsible	e Person's	E-ma	il	НАССР	Menu Type	: (See addi	tional page)
Certified F			t	Other (list)	1 2	<u>3</u>	<u>)</u> 4 <u>U</u> 5 <u>U</u>
• CRITICAI	L ITEMS AI	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violati	ons.			
Received by Victo				Inspected by (name and title p			
Received by	(signature):		Inspected by (signature):	<u>.</u>		
cc:			cc:		cc:		



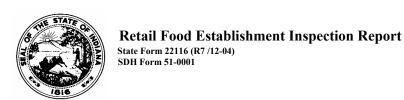
Toky(var	1	Telephone Number	Date of Insp (mm/dd/yr)		ID#
			l mber and street, city, state, zip code)	812-618-7148	12/10/	/2016	11694
			River Rd, Evansville, IN, 47715	812-618-7148			
Owner				Purpose:	Follow-up		se Date
Feng		Ta	n	Routine	No	12/	26/2016
Owner's A		on	River Rd, Evansville, IN, 47715	Follow-up	Summary	of Violation	ns:
Person in C		en	River Ru, Evansville, IN, 477 13	Complaint		(0_{R}
Feng		Та	n	Pre-Operational	C	NC_	- R
Responsible				Temporary	Menu Typ	e (See addi	tional page)
				HACCP			
Certified F Wei Li		er		Other (list)	1 2		<u>/405</u>
		RE IDI	ENTIFIED 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
			Violation from 12/08/201	6 corrected.			
Received by raich				Inspected by (name and title p			
Received by				Inspected by (signature):	<u> </u>		
cc:			cc:		cc:		



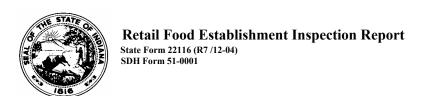
Establishm Rone		3ri	II #7505	Telephone Number (812-401-3474	Date of Ins (mm/dd/yr)		1D# 11707
			mber and street, city, state, zip code)	1	12/10/	/2016	11707
			xpressway, Evansville, IN, 47715	⁽ 812-282-1225			
Owner Bonef	ish G	rill	LIC.	Purpose:	Follow-up NO		se Date 26/2016
Owner's A				 			
		Sh	ore Blvd 5th Flr, Tampa, FL, 33607	Follow-up	l	of Violation	
Person in C				Compianit	0	NC ($\frac{1}{R}$
Bonef	ish G	rill	LLC	Pre-Operational	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	NC	K
Responsible	e Person's	E-ma	il .	Temporary	Menu Typ	e (See addi	tional page)
				HACCP		\sim	
Certified For Scott		er		Other (list)	1 <u>U</u> 2	<u>3</u>	<u> 1405</u> 0
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by	,			Inspected by (name and title p Colin Ward	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



			<u> </u>				
Establishm Chuc		Fo	od Mart #12	Telephone Number (812-477-2218	Date of Insp (mm/dd/yr)		то# 11769
			mber and street, city, state, zip code)	(a.)Owner 4 a 2 4 2	12/12/	2016	
1601 S	S Gre	en	River Rd, Evansville, IN, 47715	Purpose:	Follow-up	Dalaa	se Date
	AYLC	R	OIL INC	Routine	No		/22/2016
Owner's A		_	Dd Eveneville IN 47705	Follow-up	Summary	of Violatio	ns:
10105 Person in C		aer	n Rd, Evansville, IN, 47725	Complaint	\cap	NC_) ()
CET	AYLC	R	OIL INC	Pre-Operational	C	NC_	- R
Responsible	e Person's	E-ma	a a	Temporary HACCP	Menu Typ	e (See addi	itional page)
Certified F	and Handl	or		Other (list)	100	\bigcirc_{2}),()_5()
Kathy		ei				<u>3</u>	<u> </u>
• CRITICAL	L ITEMS AF	RE 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 NA	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No discrepanci	es.			
Received by Kath				Inspected by (name and title position Kelly Holzm			
Received by				Inspected by (signature):			
cc:			cc:		cc:		



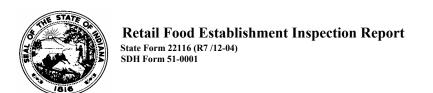
Establishm Subw		36	370	Telephone Number	Date of Ins (mm/dd/yr		1D# 11774
1			mber and street, city, state, zip code)	812-425-8014		/2016	11//4
			nk Rd, Evansville, IN, 47712	270-826-3183			
Owner			· · · · · · · · · · · · · · · · · · ·	Purpose:	Follow-u		se Date
		OX	el/Troxel Subs Inc	Routine	No	12/	25/2016
Owner's Ad PO Bo		4. H	Henderson, KY, 42419	Follow-up	_ `	of Violation	_
Person in C	Charge			Complaint Pre-Operational	$\begin{bmatrix} 0 \end{bmatrix}$	NC 4	$\frac{2}{R}$
Jeffrey	y S Tı	OX	el/Troxel Subs Inc	Temporary	<u> </u>	. NC	_ K
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	oe (See addi	tional page)
G 10 17				Other (list)	\Box		\bigcirc
Certified For Ethan					12	<u> </u>	<u>/405</u>
• CRITICAL	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATEL	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
255	NC		Thermometer not provided for front read	ch in cooler in service	e area.	12/2	22/2016
254	NC		Thermomether in reach in cooler in t	he kitchen, not acc	urate.	12/2	22/2016
Received by Ethal			· ·	Inspected by (name and title p		2	
Received by			511	Inspected by (signature):	ariac		
		•		7 (- 0/-			
cc:			cc:		cc:		



			• •				
Establishm Wok		Ш		Telephone Number	Date of Ins (mm/dd/yr)		ID#
			mber and street, city, state, zip code)	812-479-3118	12/13	/2016	11804
			River Rd, Evansville, IN, 47715	812-306-1661			
Owner				Purpose:	Follow-up		se Date
Jane ⁻				✓ Routine	No	12/	23/2016
Owner's A				Follow-up	Summary	of Violation	ns:
		:N	RIVER RD, Evansville, IN, 47715	Complaint		() (
Person in C				Pre-Operational	$_{\rm C}$ \cup	NC_	J _R U
Jane ⁻				Temporary			
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)
~			_	Other (list)	-		\bigcap
Certified For			/illiamson		$1 \bigcirc 2$	<u>3</u> <u></u>	<u>/405</u>
			ENTIFIED 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			To Be Co	orrected By
			No noted violation	ons.			
Received by Chris				Inspected by (name and title p Kelly Holzm			
Received by				Inspected by (signature):	<u> </u>		
cc:			cc:		cc:		
			ι		CC.		



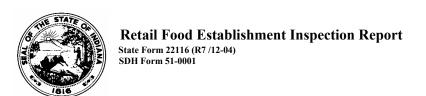
			<u> </u>					
Royal Suite				Telephone Number	Date of Ins (mm/dd/yr	ть# 11889		
Establishment Address (number and street, city, state, zip code)				<u> </u> (812-479-9732	12/14	/2016	11009	
			Ave, Evansville, IN, 47715	812-426-0133				
Owner				Purpose:	Follow-up		se Date	
		Cir	nemas Inc	Routine	Yes	12/	24/2016	
Owner's Ac 4200		rd <i>i</i>	Ave, Evansville, IN, 47710	Follow-up	Summary	of Violation		
Person in C	harge			Complaint Pre-Operational	$\begin{bmatrix} C \end{bmatrix}$	NC_	$\bigcup_{\mathbf{R}} \mathbf{U}$	
			nemas Inc	Temporary				
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)	
Certified F	ood Handle	er		Other (list)	1 2 3 4 5			
Mary D					1	<u></u>	<u> </u>	
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"				
• VIOLATIO	N(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	
342	NC		Bar hand washing sink in I	need of repair.		01/12/2017		
			All other violations noted from 12/008	•	ected.			
Received by Kayle				Inspected by (name and title processed by Holzme				
Received by			-	Inspected by (signature):	- , .			
cc:			cc:		cc:			



Establishm Ruler		d 9	Store #227	(Q1))Espitaling(Q7)			то# 11984
Establishment Address (number and street, city, state, zip code)				7	12/12	/2016	11304
			n Ave, Evansville, IN, 47711	615-232-9575			
Owner	-		Alla Dusiasa Lisasa	Purpose:	Follow-up		se Date
		51	ores - Attn: Business License	Routine	No		22/2016
Owner's A		510	03, Nashville, TN, 37230	Follow-up	Summary	of Violation	ns:
Person in C		<i>3</i> 1 C	70, 14001111110, 114, 07200	Complaint	0	, (O_{R}
		St	cores - Attn: Business License	Pre-Operational	<u> </u>	NC_	R
Responsible	e Person's	E-ma	il	Temporary HACCP	Menu Typ	e (See addi	tional page)
				Other (list)		\bigcirc	\bigcirc
Certified F	ood Handl	er			1 2	<u> 1405</u>	
	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by mich				Inspected by (name and title processed in Coudr			
Received by				Inspected by (signature):	<u> </u>		
cc:			cc:		cc:		



Hucks #383 Establishment Address (number and street, city, state, zip code) 3131 Kansas Rd, Evansville, IN, 47720 Owner MARTIN & BAYLEY INC Owner's Address 1311 A West Main, Carmi, IL, 62821 Person in Charge MARTIN & BAYLEY INC Responsible Person's E-mail Certified Food Handler Crystal Debes • 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 Section# Complex Release Date No 1202 1212/12/2016 1202 1212/2020 Summary of Violations: Complaint Pere-Operational Temporary HACCP Other (list) 102 304 55 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 Section# C/NC R Narrative To Be Corrected B A31 NC Drink island counters in need of cleaning. Corrected B A346 NC No soap at hand sink by the ice machine. 01/10/2017								-	
Establishment Address (number and street, city, state, zip code) 3131 Kansas Rd, Evansville, IN, 47720 Sala Sala Sala Sala Sala Sala Sala Sal			33		Telephone Number			12028	
3131 Kansas Rd, Evansville, IN, 47720 Owner MARTIN & BAYLEY INC Owner's Address 1311 A West Main, Carmi, IL, 62821 Person in Charge MARTIN & BAYLEY INC Responsible Person's E-mail Certified Food Handler Crystal Debes Certified Food Handler Crystal Debes Complaint Temporary HACCP Other (list) To Be Corrected By Complaint Temporary HACCP Other (list) To Be Corrected By Corrected By Complaint Temporary HACCP Other (list) To Be Corrected By Complaint Temporary HACCP Other (list) To Be Corrected By Complaint To Be Corrected By Corrected By Complaint To Be Corrected By Corrected By Complaint To Be Corrected By Correct					7		/2016	12020	
Dyner MARTIN & BAYLEY INC					618-382-2334				
Owner's Address 13.11 A West Main, Carmi, IL, 62821 Person in Charge MARTIN & BAYLEY INC Responsible Person's E-mail Certified Food Handler Crystal Debes - Certified Food Handler Crystal Debes - Certified Food Handler Crystal NC No soap at hand sink by the ice machine. O1/10/2013 347 NC No paper towels at the hand sink by the ice machine. Received by (name and title printed): Crystal Debes Received by (signature): Inspected by (signature): Summary of Violations: Complaint Compl	Owner				Purpose:	Follow-up			
1311 A West Main, Carmi, IL, 62821 Person in Charge MARTIN & BAYLEY INC Repossible Person's E-mail Certified Food Handler Crystal Debes - 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 Sections C/NC R Narrative To Be Corrected R 431 NC Drink island counters in need of cleaning. Corrected 346 NC No soap at hand sink by the ice machine. 347 NC No paper towels at the hand sink by the ice machine. O1/10/2017 Received by (name and title printed): Crystal Debes Received by (signature): Inspected by (signature):	MART	IN &	BA	YLEY INC	Routine	No	12/	22/2016	
Person in Charge MARTIN & BAYLEY INC Responsible Person's E-mail Certified Food Handler Crystal Debes CERTICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" *VIOLATIONS) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS Section# C/NC R Narrative To Be Corrected B 431 NC Drink island counters in need of cleaning. Corrected 346 NC No soap at hand sink by the ice machine. 01/10/2017. 347 NC No paper towels at the hand sink by the ice machine. 01/10/2017. Reserved by (name and title printed): Crystal Debes Received by (signature): Inspected by (signature):			~+ N	Main Carmi II 62821	Follow-up	Summary	of Violation	ns:	
Responsible Person's E-mail Certified Food Handler Crystal Debes 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 Section# C/NC R Narrative To Be Corrected B 431 NC Drink island counters in need of cleaning. Corrected B NC No soap at hand sink by the ice machine. 01/10/2017 347 NC No paper towels at the hand sink by the ice machine. 01/10/2017 When type (See additional page) Menu Type (See additional page) No Language (See additional page) Menu Type (See additional page) Menu Type (See additional page) Menu Type (See additional page) No Language (See additional page) Menu Type (See additional page) No Language (See additional page) No Language (See additional page) Menu Type (See additional page) Menu Type (See additional page) No Language (See additional page) Menu Type (See additional page) No Language (See additional pag			SU	viain, Carmi, IL, 6282 i	Complaint	\cap		3 N	
Responsible Person's E-mail Certified Food Handler Crystal Debes *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 Section# C/NC R Narrative To Be Corrected B 431 NC Drink island counters in need of cleaning. Corrected B NC No soap at hand sink by the ice machine. 01/10/2017. 347 NC No paper towels at the hand sink by the ice machine. 01/10/2017. No paper towels at the hand sink by the ice machine. 01/10/2017. Received by (name and title printed): Kelly Holzmeyer Received by (signature): Inspected by (signature):			BA	YI FY INC		C	NC_	$R_{\underline{}}$	
Certified Food Handler Crystal Debes 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 Section# C/NC R Narrative To Be Corrected B 431 NC Drink island counters in need of cleaning. Corrected 346 NC No soap at hand sink by the ice machine. 01/10/2017. 347 NC No paper towels at the hand sink by the ice machine. 01/10/2017. Which is a summary of violations" and in the Narrative Below as Section# C/NC R Narrative To Be Corrected B (Section# C/NC) R No soap at hand sink by the ice machine. 01/10/2017. Which is a summary of violations and interview Below as Section# C/NC R Narrative To Be Corrected B (Section# Counters in need of cleaning. Counters in						Menu Typ	e (See addi	tional page)	
Crystal Debes *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 *Section# C/NC R Narrative To Be Corrected B 431 NC Drink island counters in need of cleaning. Corrected 346 NC No soap at hand sink by the ice machine. 01/10/2017 347 NC No paper towels at the hand sink by the ice machine. 01/10/2017 **NO No paper towels at the hand sink by the ice machine. 01/10/2017 **Received by (name and title printed): Kelly Holzmeyer **Received by (signature): Inspected by (signature): Inspected by (signature):							\bigcirc \subseteq		
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 Section# C/NC R Narrative To Be Corrected B 431 NC Drink island counters in need of cleaning. Corrected B NC No soap at hand sink by the ice machine. 01/10/2017 347 NC No paper towels at the hand sink by the ice machine. 01/10/2017 NO Paper towels at the hand sink by the ice machine. 01/10/2017 **No paper towels at the hand sink by the ice machine. 01/10/2017 **Inspected by (name and title printed): Crystal Debes** **Received by (signature): Inspected by (signature): Inspected by (signature): Inspected by (signature):					Other (list)	1 2	<u>3</u>	<u>)4</u> 050	
Section# C/NC R Drink island counters in need of cleaning. Corrected 346 NC No soap at hand sink by the ice machine. 01/10/2013 347 NC No paper towels at the hand sink by the ice machine. 01/10/2013 348 NC No paper towels at the hand sink by the ice machine. 01/10/2013 349 NC No paper towels at the hand sink by the ice machine. 01/10/2013 340 NC No paper towels at the hand sink by the ice machine. 01/10/2013 341 NC No paper towels at the hand sink by the ice machine. 01/10/2013 342 NC No paper towels at the hand sink by the ice machine. 01/10/2013 343 NC No paper towels at the hand sink by the ice machine. 01/10/2013 344 NC No paper towels at the hand sink by the ice machine. 01/10/2013 345 NC No paper towels at the hand sink by the ice machine. 01/10/2013 346 NC No paper towels at the hand sink by the ice machine. 01/10/2013 347 NC No paper towels at the hand sink by the ice machine. 01/10/2013 348 NC No paper towels at the hand sink by the ice machine. 01/10/2013 349 NC No paper towels at the hand sink by the ice machine. 01/10/2013 349 NC No paper towels at the hand sink by the ice machine. 01/10/2013 340 NC No paper towels at the hand sink by the ice machine. 01/10/2013 347 NC No paper towels at the hand sink by the ice machine. 01/10/2013	_			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	MARKED "C"				
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346 NC No soap at hand sink by the ice machine. 347 NC No paper towels at the hand sink by the ice machine. 01/10/2017	Section#	C/NC	R	Narrative			To Be Co	orrected By	
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Big Bang Mongolian Grill				Telephone Number (812-602-1400)	Date of Ins (mm/dd/yr)	j	12346
Fitablishment Address (combine and street site state size and s				(a.a.)Owner	12/10/	/2010	
Owner Yu Ca	10			Purpose:	Follow-up		se Date //26/2016
Owner's Ac 4410 \$		tov	vn Rd, Evansville, IN, 47711	Follow-up Complaint	Summary	of Violation	_
Person in C			· · ·	Pre-Operational	c_{0}	NC_	$\frac{\mathbf{J}}{\mathbf{R}} \mathbf{U}$
Responsible	e Person's	E-mai	il	Temporary HACCP	Menu Typ	e (See addi	tional page)
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			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M		ID IN THE N	ARR ATIVE	RELOW AS "D"
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Section#	C/NC	R	Narrative			To Be Co	orrected By
			Violation from 12/1/16	corrected.			
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Jun (,	uue p		Inspected by (name and title properties) Kelly Holzm			
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Establishm	ent Addres	ss (nu	gers, Gyros and More mber and street, city, state, zip code) r Rd. Ste. 102, Evansville, Indiana, 47715	Telephone Number (812-604-8850 (812-604-8850	Date of Ins (mm/dd/yr 12/15		то# 13347	
Owner France Owner's Ad 800 N. C Person in C France Responsible	ddress Green R Charge O Mar	Rive nni	r Rd. Ste. 102, Evansville, Indiana, 47715	Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	c_2	of Violation	25/2016 as: R 0 tional page)	
Certified Fo	ood Handl	er		Other (list)	102	020304050		
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	JARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
344	С		Hand sink not acce	essible.		Co	rrected	
303	С		Sanitize buckets were not provid	ed for wiping cloth				
430	NC		Tiles and tile coving broken or missing.				12/18/2016	
256	NC		Reach-in coolers were not provided with temperature measuring device					
D' 11	. (4:41		Instructed by (c. 140)	.i4 - 4\			
France France				Inspected by (name and title processing Ward)	rinted):			
Received by	(signature):		Inspected by (signature):				
cc:			ce:		cc:			