



Retail Food Establishment Inspection Report

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

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

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

Establishment Name Acropolis		Telephone Number (812-475-9320) () Owner	Date of Inspection (mm/dd/yr) 12/20/2016	ID # 10827
Establishment Address (number and street, city, state, zip code) 501 N Green River Rd, Evansville, IN, 47715				
Owner Yiochriella, LLC	Purpose: <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 12/30/2016	
Owner's Address 898 BEACHWOOD DR, Henderson, KY, 42420		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Yiochriella, LLC				Menu Type (See additional page)
Responsible Person's E-mail				1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input checked="" type="radio"/> 5 <input type="radio"/>
Certified Food Handler Doros Hadjisavva				

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

Section#	C/NC	R	Narrative	To Be Corrected By
			Follow-up from inspection on 12/13/16. Critical violations corrected.	

Received by (name and title printed): Doros Hadjisavva		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Adeles	Telephone Number (812-467-0295)	Date of Inspection (mm/dd/yr) 12/22/2016	ID # 10828
Establishment Address (number and street, city, state, zip code) 4488 First Ave, Evansville, IN, 47710	(812-479-8331)		
Owner James Yoe	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 01/01/2017
Owner's Address 3017 Cottage Dr, Evansville, IN, 47711		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge James Yoe		Menu Type (See additional page) 1 <input checked="" type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Responsible Person's E-mail			
Certified Food Handler			

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

Received by (name and title printed): James Yoe	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Bob's Gym		Telephone Number (812-424-2627)	Date of Inspection (mm/dd/yr) 12/22/2016	ID # 10871
Establishment Address (number and street, city, state, zip code) 200 N Rosenberger Ave, Evansville, IN, 47712		Owner (812-402-2627)	Follow-up No	
Owner BOB SWALLOWS		Purpose: <input checked="" type="checkbox"/> Routine	Release Date 01/01/2017	
Owner's Address 200 N Rosenberger Ave, Evansville, IN, 47712		<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 0 R 0	
Person in Charge BOB SWALLOWS		<input type="checkbox"/> Complaint	Menu Type (See additional page)	
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler Randy Graves		<input type="checkbox"/> Temporary		
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

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

Received by (name and title printed): Lorelei Findley	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name: Dairy Queen
Telephone Number: (812) 423-6400
Date of Inspection: 12/22/2016
ID #: 10893
Establishment Address: 4830 University Dr., Evansville, IN, 47712
Owner: Tony Hood & Lara Medicis
Purpose: Routine
Follow-up: No
Release Date: 01/01/2017
Summary of Violations: C 0 NC 1 R 1
Menu Type: 1 0 2 0 3 0 4 0 5 0

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VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Table with columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: 218, NC, R, Seal on walk in freezer door in need of repair., 12/29/2016

Received by (name and title printed): Sam Medicis
Inspected by (name and title printed): Ricardo Zacarias

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

cc: fields for distribution list



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Establishment Name Denny's #290		Telephone Number (812-424-4472)	Date of Inspection (mm/dd/yr) 12/19/2016	ID # 10903
Establishment Address (number and street, city, state, zip code) 5212 Weston Rd., Evansville, IN, 47712		(812-482-3212)		
Owner SERVUS, Inc.	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow-up No	Release Date 12/29/2016	
Owner's Address 4201 Mannheim Rd Suite A, Jasper, IN, 47546		Summary of Violations: C <u>0</u> NC <u>3</u> R <u>3</u>		
Person in Charge SERVUS, Inc.		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler Michael Bruce				

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Section#	C/NC	R	Narrative	To Be Corrected By
431	NC	R	Hood vent and wall soiled.	12/26/2016
295	NC	R	Inside reach in frontline and walk in shelves soiled.	12/23/2016
324	NC	R	Dish machine backsiphonage is leaking, on work order.	12/26/2016

Received by (name and title printed): Jimmy Yeh		Inspected by (name and title printed): Ricardo Zacarias	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Dollar General #1620	Telephone Number (812) 473-9947	Date of Inspection (mm/dd/yr) 12/21/2016	ID # 10913
Establishment Address (number and street, city, state, zip code) 4829 Pollack Ave., Evansville, IN, 47715	(615) 855-4000		
Owner DOLGENCORP LLC	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 12/31/2016
Owner's Address 100 Mission Ridge, Goodlettsville, TN, 37072		Summary of Violations:	
Person in Charge DOLGENCORP LLC		C <u>0</u> NC <u>0</u> R <u>0</u>	
Responsible Person's E-mail		Menu Type (<i>See additional page</i>)	
Certified Food Handler n/a		1 <input checked="" type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	

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

Received by (name and title printed): Nancy Burress	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Donut Bank		Telephone Number (812-426-1011)	Date of Inspection (mm/dd/yr) 12/20/2016	ID # 10927
Establishment Address (number and street, city, state, zip code) 210 N St. Joseph Ave, Evansville, IN, 47712		(812-426-0011)		
Owner CHRIS KEMPF	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow-up Yes	Release Date 12/30/2016	
Owner's Address 1031 Diamond Ave, Evansville, IN, 47711		Summary of Violations: C <u>1</u> NC <u>1</u> R <u>2</u>		
Person in Charge CHRIS KEMPF		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler				

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Section#	C/NC	R	Narrative	To Be Corrected By
295	C	R	Ice guard within ice machine soiled.	12/20/2016
285	NC	R	Hot water sanitization temperature for ware-washing machines not reaching 180 degrees F.	12/27/2016

Received by (name and title printed): Debbie Baker		Inspected by (name and title printed): Ricardo Zacarias	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	

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

Establishment Name Great Harvest Bread		Telephone Number (812-476-4999)	Date of Inspection (mm/dd/yr) 12/21/2016	ID # 10996
Establishment Address (number and street, city, state, zip code) 423 Metro, Evansville, IN, 47715		(812-476-4999)		
Owner Riland, LLC		Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 12/31/2016
Owner's Address 423 Metro Ave, Evansville, IN, 47715			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge Riland, LLC			Menu Type (See additional page) 1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Responsible Person's E-mail				
Certified Food Handler Kathryn Riney				

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

Received by (name and title printed): Katie Riney	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):

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

Establishment Name Busy Body Lounge	Telephone Number (812) 319-1238 <small>() Owner</small> (618) 472-1306	Date of Inspection <small>(mm/dd/yr)</small> 12/22/2016	ID # 11123																		
Establishment Address (number and street, city, state, zip code) 1201 E Columbia St., EVANSVILLE, IN, 47711	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____																				
Owner Dave Beckwith																					
Owner's Address 205 S Hancock St, McLeansboro, IL, 62896																					
Person in Charge Dave Beckwith																					
Responsible Person's E-mail 																					
Certified Food Handler 	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Follow-up</td> <td style="padding: 5px;">Release Date</td> </tr> <tr> <td style="text-align: center; padding: 5px;">No</td> <td style="text-align: center; padding: 5px;">01/01/2017</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Summary of Violations:</td> </tr> <tr> <td style="text-align: center; padding: 5px;">C <u>0</u></td> <td style="text-align: center; padding: 5px;">NC <u>0</u></td> </tr> <tr> <td colspan="2" style="text-align: center; padding: 5px;">R <u>0</u></td> </tr> <tr> <td colspan="2" style="padding: 5px;">Menu Type (See additional page)</td> </tr> <tr> <td style="text-align: center; padding: 5px;">1 <input checked="" type="radio"/></td> <td style="text-align: center; padding: 5px;">2 <input type="radio"/></td> </tr> <tr> <td style="text-align: center; padding: 5px;">3 <input type="radio"/></td> <td style="text-align: center; padding: 5px;">4 <input type="radio"/></td> </tr> <tr> <td style="text-align: center; padding: 5px;">5 <input type="radio"/></td> <td></td> </tr> </table>			Follow-up	Release Date	No	01/01/2017	Summary of Violations:		C <u>0</u>	NC <u>0</u>	R <u>0</u>		Menu Type (See additional page)		1 <input checked="" type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>	
Follow-up	Release Date																				
No	01/01/2017																				
Summary of Violations:																					
C <u>0</u>	NC <u>0</u>																				
R <u>0</u>																					
Menu Type (See additional page)																					
1 <input checked="" type="radio"/>	2 <input type="radio"/>																				
3 <input type="radio"/>	4 <input type="radio"/>																				
5 <input type="radio"/>																					

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

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



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Establishment Name Comfort Inn East		Telephone Number (812-476-3600)	Date of Inspection (mm/dd/yr) 12/22/2016	ID # 11165	
Establishment Address (number and street, city, state, zip code) 8331 Walnut St, Evansville, IN, 47714		Owner (812-476-3600)	Follow-up No		
Owner Crescent Capital Indiana LLC		Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Release Date 01/01/2017	Summary of Violations: C 0 NC 0 R 0	
Owner's Address 8331 Walnut Ave, Evansville, IN, 47714			Menu Type (See additional page)		
Person in Charge Crescent Capital Indiana LLC			1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Responsible Person's E-mail					
Certified Food Handler					

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

Received by (name and title printed): Rebecca Milam		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Marigold Bar	Telephone Number (812-475-8780)	Date of Inspection (mm/dd/yr) 12/19/2016	ID # 11190
Establishment Address (number and street, city, state, zip code) 2112 S Weinbach Ave., Evansville, IN, 47714	(812-598-0954)		
Owner Bush Investments	Purpose: <input checked="checked" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 12/29/2016
Owner's Address 2322 Boeke Place, Evansville, IN, 47714		Summary of Violations:	
Person in Charge Bush Investments		C <u>0</u> NC <u>0</u> R <u>0</u>	
Responsible Person's E-mail		Menu Type (See additional page)	
Certified Food Handler Dave Bush		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="checked" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	

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

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



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Establishment Name O`Charleys #296		Telephone Number (812-424-3348)	Date of Inspection (mm/dd/yr) 12/21/2016	ID # 11230
Establishment Address (number and street, city, state, zip code) 5125 Pearl Dr, Evansville, IN, 47712		Owner (615-256-8500)	Follow-up No	
Owner O`Charleys LLC	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Release Date 12/31/2016		
Owner's Address 3038 Sidco Dr, Nashville, TN, 37204		Summary of Violations: C 0 NC 1 R 0		
Person in Charge O`Charleys LLC	Menu Type (See additional page) 1 0 2 0 3 0 4 1 5 0			
Responsible Person's E-mail				
Certified Food Handler Brian Siebers				

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Section#	C/NC	R	Narrative	To Be Corrected By
190	NC		Improper cooling method for pasta.	Corrected

Received by (name and title printed): Brian Siebers	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Howard Johnson	Telephone Number (812) 476-9626	Date of Inspection (mm/dd/yr) 12/22/2016	ID # 11318
Establishment Address (number and street, city, state, zip code) 1101 N Green River Rd, Evansville, IN, 47715		Owner's Address 1101 N Green River Rd, Evansville, IN, 47715	
Owner Jasmin Kumat Patel	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 01/01/2017
Owner's Address 1101 N Green River Rd, Evansville, IN, 47715	Person in Charge Jasmin Kumat Patel	Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Responsible Person's E-mail	Menu Type (See additional page) 1 ○ 2 ● 3 ○ 4 ○ 5 ○		
Certified Food Handler n/a			

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

Received by (name and title printed): Brandi Jackson	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:
cc:	cc:



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Establishment Name Yen Ching		Telephone Number (812-474-0181)	Date of Inspection (mm/dd/yr) 12/19/2016	ID # 11458
Establishment Address (number and street, city, state, zip code) 406 S Green River Rd, Evansville, IN, 47715		(317-418-8818)		
Owner Zeng Ru Lin	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up Yes	Release Date 12/29/2016	
Owner's Address 737 Chateau Dr, Evansville, IN, 47715		Summary of Violations: C 3 NC 2 R 1		
Person in Charge Zeng Ru Lin		Menu Type (See additional page) 1 0 2 0 3 0 4 1 5 0		
Responsible Person's E-mail				
Certified Food Handler Zengru Lin				

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

Section#	C/NC	R	Narrative	To Be Corrected By
173	C		Improper storage of raw animal product in walk-in.	Corrected
324	C		Kitchen hand sink in need of repair.	12/26/2016
345	C		Hand sink in dish washing area used for purposes other than hand washing.	Corrected
347	NC	R	Disposable towels not provided at hand sink.	Corrected
234	NC		Rice scoop stored in standing water not held at 135 degrees Fahrenheit or greater.	Corrected

Received by (name and title printed): Zengru Lin	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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

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

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Establishment Name Family Dollar #4646		Telephone Number (812-421-0225) <small>(Establishment)</small>	Date of Inspection (mm/dd/yr) 12/20/2016	ID # 11529
Establishment Address (number and street, city, state, zip code) 501 Lincoln Ave, Evansville, IN, 47713		(704-814-5921) <small>(Owner)</small>		
Owner FAMILY DOLLAR INC	Purpose: <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 12/30/2016	
Owner's Address PO Box 1017, CHARLOTTE, NC, 28201		Summary of Violations: C 0 NC 3 R 1		
Person in Charge FAMILY DOLLAR INC		Menu Type (See additional page) 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Responsible Person's E-mail				
Certified Food Handler n/a				

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
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Section#	C/NC	R	Narrative	To Be Corrected By
232	NC		Bottom interior of milk and egg coolers soiled and need cleaned.	12/21/2016
431	NC	R	Multiple floor surfaces under shelves need cleaned.	12/21/2016
430	NC		Seal at bottom of back emergency door needs repair/replaced.	12/27/2016

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



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Form containing establishment details: Establishment Name (Dollar Tree #1541), Telephone Number (812-476-3426), Date of Inspection (12/21/2016), ID # (11563), Establishment Address (800 S Green River Rd, Evansville, IN, 47715), Owner (Dollar Tree), Purpose (Routine), Follow-up (No), Release Date (12/31/2016), Owner's Address (500 Volvo Parkway, Chesapeake, VA, 23320), Person in Charge (Dollar Tree), Responsible Person's E-mail, Certified Food Handler (n/a), and Summary of Violations (C:0, NC:0, R:0).

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

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

Received by (name and title printed): Tammy Wersich
Inspected by (name and title printed): Colin Ward

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

cc: (Three empty fields for contact information)



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Establishment Name Subway #28905		Telephone Number (812-401-1563)	Date of Inspection (mm/dd/yr) 12/22/2016	ID # 11615
Establishment Address (number and street, city, state, zip code) 301 Main St, Evansville, IN, 47708		Owner (812-457-8611)	Follow-up No	Release Date 01/01/2017
Owner ED KUCER	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____		Summary of Violations: C <u>0</u> NC <u>1</u> R <u>1</u>	
Owner's Address PO Box 2245, EVANSVILLE, IN, 47728			Menu Type (See additional page) 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Person in Charge ED KUCER	Responsible Person's E-mail			
Certified Food Handler Shayla Gordan				

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Section#	C/NC	R	Narrative	To Be Corrected By
347	NC	R	Men's restroom needs drying towels.	12/23/2016

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



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Establishment Name Ruth's House	Telephone Number (812) 402-0424	Date of Inspection (mm/dd/yr) 12/22/2016	ID # 11630
Establishment Address (number and street, city, state, zip code) 321 Walnut St, Evansville, IN, 47708	Owner Telephone Number (812) 422-0297	Follow-up No	
Owner UNITED CARING SERVICES	Purpose: <input checked="" type="checkbox"/> Routine	Release Date 01/01/2017	
Owner's Address 324 NW 6th St, Evansville, IN, 47708	<input type="checkbox"/> Follow-up	Summary of Violations: C <u>0</u> NC <u>1</u> R <u>0</u>	
Person in Charge UNITED CARING SERVICES	<input type="checkbox"/> Complaint	Menu Type (See additional page)	
Responsible Person's E-mail	<input type="checkbox"/> Pre-Operational	1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler n/a	<input type="checkbox"/> Temporary		
	<input type="checkbox"/> HACCP		
	<input type="checkbox"/> Other (list)		

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Section#	C/NC	R	Narrative	To Be Corrected By
232	NC		Dishwashing unit and microwave needs cleaned	12/23/2016

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



Retail Food Establishment Inspection Report

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Establishment Name Aldi Foods Inc #3	Telephone Number (812-422-6775)	Date of Inspection (mm/dd/yr) 12/21/2016	ID # 11689
Establishment Address (number and street, city, state, zip code) 214 S Rosenberger Ave, Evansville, IN, 47712	Owner (317-887-6273)	Follow-up No	
Owner ALDI FOODS INC	Purpose: <input checked="" type="checkbox"/> Routine	Release Date 12/31/2016	
Owner's Address 486 E Stop 18 Rd, Greenwood, IN, 46143	<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 0 R 0	
Person in Charge ALDI FOODS INC	<input type="checkbox"/> Complaint	Menu Type (See additional page)	
Responsible Person's E-mail	<input type="checkbox"/> Pre-Operational	1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler n/a	<input type="checkbox"/> Temporary		
	<input type="checkbox"/> HACCP		
	<input type="checkbox"/> Other (list)		

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

Received by (name and title printed): monika woodward	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Big Lots #1760	Telephone Number (812-473-9483)	Date of Inspection (mm/dd/yr) 12/21/2016	ID # 11810
Establishment Address (number and street, city, state, zip code) 720 S Green River Rd, Evansville, IN, 47715	Owner (614-278-6835)	Follow-up No	
Owner Big Lots Stores Inc - Attn: Tax Dept	Purpose: <input checked="" type="checkbox"/> Routine	Release Date 12/31/2016	
Owner's Address 300 Phillipi Rd, Columbus, OH, 43228	<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 0 R 0	
Person in Charge Big Lots Stores Inc - Attn: Tax Dept	<input type="checkbox"/> Complaint	Menu Type (See additional page)	
Responsible Person's E-mail	<input type="checkbox"/> Pre-Operational	1 <input checked="" type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler n/a	<input type="checkbox"/> Temporary		
	<input type="checkbox"/> HACCP		
	<input type="checkbox"/> Other (list)		

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

Received by (name and title printed): Josh Seaver	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Sweet Bettys Bakery		Telephone Number (812-402-3889)	Date of Inspection (mm/dd/yr) 12/22/2016	ID # 12097
Establishment Address (number and street, city, state, zip code) 5600 E Virginia St Ste E, Evansville, IN, 47715		(818-402-3889)		
Owner Andrea Miles	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow-up No	Release Date 01/01/2017	
Owner's Address 5600 E Virginia St Ste E, Evansville, IN, 47715		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Andrea Miles		Menu Type (See additional page) 1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Responsible Person's E-mail				
Certified Food Handler Andrea Miles				

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

Received by (name and title printed): Andrea Miles	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Los Bravos		Telephone Number (812-474-9078)	Date of Inspection (mm/dd/yr) 12/20/2016	ID # 12261
Establishment Address (number and street, city, state, zip code) 6226 Waterford Blvd, Evansville, IN, 47715		Owner (812-499-8151)	Follow-up Yes	
Owner Los Bravos Inc		Purpose: <input checked="" type="checkbox"/> Routine	Release Date 12/30/2016	
Owner's Address 5977 Medinah Dr, NEWBURGH, IN, 47630		<input type="checkbox"/> Follow-up	Summary of Violations: C 2 NC 5 R 3	
Person in Charge Los Bravos Inc		<input type="checkbox"/> Complaint		
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	Menu Type (See additional page)	
Certified Food Handler Jaime Bonilla		<input type="checkbox"/> Temporary	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input checked="" type="radio"/> 5 <input type="radio"/>	
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
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Section#	C/NC	R	Narrative	To Be Corrected By
415	C		Insect activity present within facility.	12/27/2016
295	C	R	Can open soiled; needs cleaning.	12/20/2016
234	NC		Utensils stored in standing water not held at 135 degrees Fahrenheit.	12/20/2016
342	NC	R	Hand sink in restrooms not reaching temperature of 100 degrees Fahrenheit or greater.	12/21/2016
285	NC		Dish machine not reaching the appropriate temperature of 180 degrees Fahrenheit.	12/27/2016
218	NC	R	Seal on freezer walk-in needs replacing.	12/22/2016
190	NC		Improper cooling method being utilized.	12/20/2016

Received by (name and title printed): Luis Martinez		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name La Campirana		Telephone Number (812-550-1585)	Date of Inspection (mm/dd/yr) 12/19/2016	ID # 12265
Establishment Address (number and street, city, state, zip code) 724 N. Burkhardt Rd. Ste 600, Evansville, IN, 47715		Owner (270-724-2172)	Follow-up No	
Owner Josue A Brown		Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Release Date 12/29/2016	
Owner's Address 934 Millcreek Dr, Henderson, KY, 42420			Summary of Violations: C 2 NC 1 R 0	
Person in Charge Josue A Brown			Menu Type (See additional page)	
Responsible Person's E-mail			1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler Ezequiel Campos				

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- VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section#	C/NC	R	Narrative	To Be Corrected By
173	C		Improper storage of raw animal product.	Corrected
295	C		Can opener soiled.	Corrected
234	NC		Utensils stored in standing water not held at 135 degrees Fahrenheit.	Corrected

Received by (name and title printed): Abraham Brown		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Lombardi's Pizza		Telephone Number (812) 202-5336	Date of Inspection (mm/dd/yr) 12/20/2016	ID # 13411	
Establishment Address (number and street, city, state, zip code) 3311 N. Green River Road, Evansville, Indiana, 47715		(845) 629-1301 <small>Owner</small>			
Owner Frank Laudonio		Purpose: <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input checked="" type="checkbox"/> Other (list) Opening _____	Follow-up Yes	Release Date 12/30/2016	
Owner's Address 3311 N. Green River Road, Evansville, Indiana, 47715			Summary of Violations:		
Person in Charge Frank Laudonio			C <u>0</u> NC <u>0</u> R <u>0</u>		
Responsible Person's E-mail		Menu Type (See additional page)			
Certified Food Handler		1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>			

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Section#	C/NC	R	Narrative	To Be Corrected By
			Ok to open after construction equipment is cleared and interior is cleaned.	

Received by (name and title printed): Jackson Daugherty		Inspected by (name and title printed): Kelly Holzmeyer	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	cc:



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Establishment Name Crossroads IGA		Telephone Number (812-867-0828)	Date of Inspection (mm/dd/yr) 12/20/2016	ID # 13440
Establishment Address (number and street, city, state, zip code) 6401 N Greenriver Rd, Evansville, Indiana, 47725		Owner (812-867-0828)		
Owner Houchen's Food Group	Purpose: <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input checked="" type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up Yes	Release Date 12/30/2016	
Owner's Address 6401 N Greenriver Rd, Evansville, Indiana, 47725		Summary of Violations: C 0 NC 0 R 0		
Person in Charge Houchen's Food Group			Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler				

- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
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Section#	C/NC	R	Narrative	To Be Corrected By
			Caulk/ Re-caulk floor drains, hand sink and around mop sink drains.	

Received by (name and title printed): Brian Spillman	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc: