



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 Jaya's Authentic Foods		Telephone Number (812-422-6667)	Date of Inspection (mm/dd/yr) 01/17/2017	ID # 11058
Establishment Address (number and street, city, state, zip code) 119 SE Fourth St, EVANSVILLE, IN, 47708		Owner (812-422-6667)	Follow-up No	Release Date 01/27/2017
Owner Jaya Dodd	Purpose: <input checked="" type="checkbox"/> Routine	Summary of Violations: C 1 NC 1 R 1		
Owner's Address 119 SE 4th St, Evansville, IN, 47708	<input type="checkbox"/> Follow-up			
Person in Charge Jaya Dodd	<input type="checkbox"/> Complaint	Menu Type (See additional page) 1 0 2 0 3 ● 4 0 5 0		
Responsible Person's E-mail	<input type="checkbox"/> Pre-Operational			
Certified Food Handler Chris Dodd	<input type="checkbox"/> Temporary			
	<input type="checkbox"/> HACCP			
	<input type="checkbox"/> Other (list) _____			

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

Section#	C/NC	R	Narrative	To Be Corrected By
232	NC		Soda guns and holders need cleaning.	01/18/2017
191	C	R	Foods lacking date marking.	01/18/2017

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



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Establishment Name Legends	Telephone Number (812-476-7444)	Date of Inspection (mm/dd/yr) 01/20/2017	ID # 11080
Establishment Address (number and street, city, state, zip code) 1050 S Weinbach Ave, Evansville, IN, 47714		Owner (812-480-3058)	
Owner VUK Corporation	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 01/30/2017
Owner's Address 2032 Championship Dr, Evansville, IN, 47725		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge VUK Corporation		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 Michelle Avers			

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

Received by (name and title printed): Brian Light	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Lic's Ice Cream		Telephone Number (812-422-2618)	Date of Inspection (mm/dd/yr) 01/20/2017	ID # 11083
Establishment Address (number and street, city, state, zip code) 2311 W Virginia St., Evansville, IN, 47712		(812-424-3066)		
Owner Don Smith	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 01/30/2017	
Owner's Address 11 N 5th Street, Evansville, IN, 47708		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Don Smith		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 Jamia Brown				

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

Received by (name and title printed): Nila Hite		Inspected by (name and title printed): Ricardo Zacarias	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Casey's General Store #2228		Telephone Number (812-473-3523)	Date of Inspection (mm/dd/yr) 01/19/2017	ID # 11130
Establishment Address (number and street, city, state, zip code) 1900 Oak Hill Rd., Evansville, IN, 47711		Owner ()		
Owner CASEY'S MARKETING CO	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 01/29/2017	
Owner's Address PO Box 3001, Ankeny, IA, 50021		Summary of Violations: C 0 NC 1 R 0		
Person in Charge CASEY'S MARKETING CO		Menu Type (See additional page) 1 0 2 1 3 0 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler Charity Adams				

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Section#	C/NC	R	Narrative	To Be Corrected By
431	NC		Back freezer has ice build-up.	01/20/2017

Received by (name and title printed): Crystal McKinney		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Casey's General Store #2296		Telephone Number (812) 423-2804	Date of Inspection (mm/dd/yr) 01/17/2017	ID # 11131
Establishment Address (number and street, city, state, zip code) 3100 N St. Joseph Ave, EVANSVILLE, IN, 47720		Owner (515) 965-6555	Follow-up No	
Owner CASEY'S MARKETING CO		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 01/27/2017	
Owner's Address PO Box 3001, Ankeny, IA, 50021			Summary of Violations: C 0 NC 0 R 0	
Person in Charge CASEY'S MARKETING CO			Menu Type (See additional page) 1 0 2 1 3 0 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Kim Kinchell				

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

Received by (name and title printed): Kim Kinchell	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name McDonalds #5774		Telephone Number (812-422-8717)	Date of Inspection (mm/dd/yr) 01/17/2017	ID # 11199
Establishment Address (number and street, city, state, zip code) 909 N St. Joseph Ave, Evansville, IN, 47720		Owner (812-480-4770)	Follow-up No	
Owner P & L ENTERPRISES		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 01/27/2017	
Owner's Address PO BOX 6109, EVANSVILLE, IN, 47719			Summary of Violations: C 0 NC 1 R 0	
Person in Charge P & L ENTERPRISES			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 Ira Hester				

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Section#	C/NC	R	Narrative	To Be Corrected By
422	NC		Personal belongings stored in food preparation area.	Corrected

Received by (name and title printed): Ira Hester		Inspected by (name and title printed): Ricardo Zacarias	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	cc:



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Establishment Name Merry-Go-Round		Telephone Number (812-423-6388)	Date of Inspection (mm/dd/yr) 01/17/2017	ID # 11212
Establishment Address (number and street, city, state, zip code) 2101 N Fares Ave., Evansville, IN, 47711		Owner (812-423-6388)		
Owner ERIC RAEBER	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 01/27/2017	
Owner's Address 14400 Petersburg Rd, Evansville, IN, 47725		Summary of Violations: C 1 NC 0 R 0		
Person in Charge ERIC RAEBER		Menu Type (See additional page) 1 0 3 4 5		
Responsible Person's E-mail				
Certified Food Handler Cameron Raeber				

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Section#	C/NC	R	Narrative	To Be Corrected By
437	C		Spray bottles not marked with contents.	Corrected

Received by (name and title printed): Chevy Raeber	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Motomart #3206		Telephone Number (812-477-5036)	Date of Inspection (mm/dd/yr) 01/19/2017	ID # 11219
Establishment Address (number and street, city, state, zip code) 3221 Mariner Dr., Evansville, IN, 47713		Owner ()		
Owner FKG Oil Co	Purpose: <input checked="" type="checkbox"/> Routine	Follow-up No	Release Date 01/29/2017	
Owner's Address 721 W Main Street PO Box 122, Belleville, IL, 62222	<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 1 R 1		
Person in Charge FKG Oil Co	<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	<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
431	NC	R	Counter tops under drink dispensers in need of cleaning.	01/19/2017

Received by (name and title printed): james prater		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	cc:



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Establishment Name Circle Nine		Telephone Number (812-430-7838)	Date of Inspection (mm/dd/yr) 01/19/2017	ID # 11272
Establishment Address (number and street, city, state, zip code) 1526 Judson St, Evansville, IN, 47713		(812-550-3577)		
Owner Amit Arora	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 01/29/2017	
Owner's Address 7588 Young Ct, Newburgh, IN, 47630		Summary of Violations: C 0 NC 0 R 0		
Person in Charge Amit Arora		Menu Type (See additional page) 1 0 2 1 3 0 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler Gurpreet-Kaur				

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Section#	C/NC	R	Narrative	To Be Corrected By
			Violations corrected.	

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



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Establishment Name Sonic Drive-In #109		Telephone Number (812-471-0800) () Owner	Date of Inspection (mm/dd/yr) 01/18/2017	ID # 11327
Establishment Address (number and street, city, state, zip code) 881 S Green River Rd, Evansville, IN, 47714		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 01/28/2017
Owner Sonic Drive-In of Evansville Inc			Summary of Violations: C 1 NC 1 R 1	
Owner's Address 208 S Maize Rd, WICHITA, KS, 67209		Menu Type (See additional page)		
Person in Charge Sonic Drive-In of Evansville Inc		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 Michael Garnett				

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Section#	C/NC	R	Narrative	To Be Corrected By
334	C	R	Three compartment sink hose lacking air gap.	02/01/2017
431	NC		Reach in cooler in need of cleaning.	Corrected

Received by (name and title printed): Loura Frost	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name AMC Theatres Evansville 16	Telephone Number (812) 423-7566	Date of Inspection (mm/dd/yr) 01/17/2017	ID # 11344
Establishment Address (number and street, city, state, zip code) 5600 Pearl Dr, Evansville, IN, 47712	(913) 213-2000		
Owner American Multi-Cinema, 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 01/27/2017
Owner's Address 11500 Ash St, Leawood, KS, 66211-7804		Summary of Violations:	
Person in Charge American Multi-Cinema, Inc.		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 Josh McBride		1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	

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

Received by (name and title printed): Josh Boze	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Subway #15691		Telephone Number (812-425-7585)	Date of Inspection (mm/dd/yr) 01/20/2017	ID # 11366
Establishment Address (number and street, city, state, zip code) 631 Walnut St, Evansville, IN, 47708		(812-774-6689) Owner		
Owner Larry 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 01/30/2017	
Owner's Address 725 Lancelot Dr, Evansville, IN, 47711		Summary of Violations: C 0 NC 0 R 0		
Person in Charge Larry Patel		Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler Larry Patel				

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

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



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Establishment Name TACO BELL #28907		Telephone Number (812-422-4705)	Date of Inspection (mm/dd/yr) 01/17/2017	ID # 11381
Establishment Address (number and street, city, state, zip code) 1500 N Willow Rd, Evansville, IN, 47711		(812-422-4705) (503-722-2825)		
Owner Bell 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) _____	Follow-up No	Release Date 01/27/2017	
Owner's Address PO Box 507, West Linn, OR, 97068		Summary of Violations: C 0 NC 0 R 0		
Person in Charge Bell Indiana LLC		Menu Type (See additional page) 1 0 2 0 3 0 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler Austin Moll				

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

Received by (name and title printed): Austin Moll		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Taste Of China		Telephone Number (812-422-1260)	Date of Inspection (mm/dd/yr) 01/17/2017	ID # 11390
Establishment Address (number and street, city, state, zip code) 4579 University Dr., Evansville, IN, 47712		(812-422-1260)		
Owner Wai Tak Lam	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 01/27/2017	
Owner's Address 4579 University Dr, Evansville, IN, 47712		Summary of Violations: C 3 NC 0 R 2		
Person in Charge Wai Tak Lam		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 Wai Tak Lam				

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Section#	C/NC	R	Narrative	To Be Corrected By
177	C	R	Items not properly covered.	01/17/2017
177	C	R	Items in walk in cooler not stored 6 inches off the ground.	
189	C		Food cooled improperly.	01/17/2017

Received by (name and title printed): Wai Tak Lam		Inspected by (name and title printed): Ricardo Zacarias	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name: Turoni's Forget Me Not Inn
Telephone Number: (812) 477-7500
Date of Inspection: 01/20/2017
ID #: 11415
Establishment Address: 4 N Weinbach Ave., EVANSVILLE, IN, 47711
Owner: Turoni's Pizza Inc/Jerry Turner
Purpose: Routine
Follow-up: No
Release Date: 01/30/2017
Owner's Address: 5709 Spring Lake Dr, Evansville, IN, 47711
Person in Charge: Turoni's Pizza Inc/Jerry Turner
Summary of Violations: C 0 NC 1 R 0
Menu Type: 1 2 3 4 5

- 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: 185, NC, Improper use of crockpots for reheating, Corrected.

Received by (name and title printed): Sharon Cruse
Inspected by (name and title printed): Carol Coudret
Received by (signature):
Inspected by (signature):
cc: fields



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 Wendy's #346	Telephone Number (812-401-7126)	Date of Inspection (mm/dd/yr) 01/18/2017	ID # 11439
Establishment Address (number and street, city, state, zip code) 401 S Boehne Camp Rd., Evansville, IN, 47712	(812-482-3212)		
Owner SERVUS, Inc.	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 01/28/2017
Owner's Address 4201 Mannheim Rd Suite A, Jasper, IN, 47546	Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge SERVUS, Inc.	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 MACKENZIE MATTINGLY			

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

Section#	C/NC	R	Narrative	To Be Corrected By
			All violation from 01-09-17 corrected.	

Received by (name and title printed): MACKENZIE MATTINGLY	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
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Establishment Name Zesto		Telephone Number (812) 423-5961		Date of Inspection (mm/dd/yr) 01/19/2017	ID # 11461
Establishment Address (number and street, city, state, zip code) 920 E Riverside Dr, Evansville, IN, 47713		(812) 853-8978			
Owner Daniel Hardesty		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 01/29/2017
Owner's Address 7533 Chapel Hill Ct, Newburgh, IN, 47630				Summary of Violations: C <u>1</u> NC <u>0</u> R <u>0</u>	
Person in Charge Daniel Hardesty				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 Dan Hardesty					

- 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
294	C		Sanitizer concentration for wipe rag low.	01/20/2017

Received by (name and title printed): Jim Ward		Inspected by (name and title printed): David Horning	
Received by (signature): _____		Inspected by (signature): _____	
cc:	cc:	cc:	



Retail Food Establishment Inspection Report

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Establishment Name The Wine Vault		Telephone Number (812-401-9463)	Date of Inspection (mm/dd/yr) 01/20/2017	ID # 11558
Establishment Address (number and street, city, state, zip code) 230 N Burkhardt Rd, Evansville, IN, 47715		(812-589-9507)		
Owner Justak Wine & Retail Group	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 01/30/2017	
Owner's Address 1020 Oak Trace, Evansville, IN, 47725		Summary of Violations: C 0 NC 0 R 0		
Person in Charge Justak Wine & Retail Group		Menu Type (<i>See additional page</i>) 1 0 2 1 3 0 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler Anthony Justak				

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

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

Received by (name and title printed): Ronald Hull	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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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 Southern Indiana Career Technical Ctr Culinary Arts		Telephone Number () Establishment 812-435-8453	Date of Inspection (mm/dd/yr) 01/18/2017	ID # 11564
Establishment Address (number and street, city, state, zip code) 1901 Lynch Rd, Evansville, IN, 47711		() Owner		
Owner Evansville Vanderburgh School Corp.	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 01/28/2017	
Owner's Address 951 Walnut St, Evansville, IN, 47713		Summary of Violations: C 0 NC 0 R 0		
Person in Charge Evansville Vanderburgh School Corp.		Menu Type (<i>See additional page</i>) 1 0 2 0 3 0 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler Ed Ellis				

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

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

Received by (name and title printed): Ed Ellis	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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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: Evansville Youth Care Center
Telephone Number: (812)421-3800
Date of Inspection: 01/19/2017
ID #: 11571
Establishment Address: 300 SE Martin Luther King Blvd, Evansville, IN, 47713
Owner: Evansville Rescue Mission
Owner's Address: 500 E Walnut, Evansville, IN, 47713
Person in Charge: Evansville Rescue Mission
Responsible Person's E-mail:
Certified Food Handler: Matthew Gresock
Purpose: Routine
Follow-up: No
Release Date: 01/29/2017
Summary of Violations: C 0 NC 0 R 0
Menu Type: 1 2 3 4 5

- 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 discrepancies.

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



Retail Food Establishment Inspection Report

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Establishment Name Donut Bank		Telephone Number (812-401-4111)	Date of Inspection (mm/dd/yr) 01/17/2017	ID # 11658
Establishment Address (number and street, city, state, zip code) 1200 Lincoln Ave, Evansville, IN, 47711		(812-426-0011)		
Owner CHRIS KEMPF	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 01/27/2017	
Owner's Address 1031 Diamond Ave, Evansville, IN, 47711		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</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				

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

Section#	C/NC	R	Narrative	To Be Corrected By
			All violations from 1/10/2017 corrected.	

Received by (name and title printed): sabine madden	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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Establishment Name United HBA Corp-Marathon		Telephone Number (812-421-1460)	Date of Inspection (mm/dd/yr) 01/18/2017	ID # 11740
Establishment Address (number and street, city, state, zip code) 1905 W Franklin St, Evansville, IN, 47712		(812-421-1460)		
Owner HARBHJAN SINGH	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 01/28/2017	
Owner's Address 3800 E Morgan Ave, Evansville, IN, 47715		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge HARBHJAN SINGH	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 N/A				

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

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

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



Retail Food Establishment Inspection Report

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Establishment Name Major Munch	Telephone Number (812-499-0160)	Date of Inspection (mm/dd/yr) 01/18/2017	ID # 11816	
Establishment Address (number and street, city, state, zip code) 101 NW 1st St Ste 100, Evansville, IN, 47708	(812-499-0160)	Follow-up No		
Owner David Siewert	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 01/28/2017
Owner's Address 1915 Powell, Henderson, KY, 42420	Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		Menu Type (See additional page) 1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Person in Charge David Siewert				
Certified Food Handler David Siewert				

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

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

Received by (name and title printed): David Siewert	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 Residence Inn	Telephone Number (812-471-7191)	Date of Inspection (mm/dd/yr) 01/19/2017	ID # 11831
Establishment Address (number and street, city, state, zip code) 8283 E Walnut, Evansville, IN, 47715	(972-778-9316)		
Owner ASHFORD TRS EVANSVILLE III 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 01/29/2017
Owner's Address 14185 Dallas Pkwy Ste 1150, DALLAS, TX, 75254		Summary of Violations: C 0 NC 0 R 0	
Person in Charge ASHFORD TRS EVANSVILLE III LLC		Menu Type (See additional page) 1 0 2 1 3 0 4 0 5 0	
Responsible Person's E-mail			
Certified Food Handler			

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

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

Received by (name and title printed): Michele Royster	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Los Portales Grill, Inc.	Telephone Number (812) 475-0566 (812) 625-2079	Date of Inspection (mm/dd/yr) 01/17/2017	ID # 11961
Establishment Address (number and street, city, state, zip code) 3339 N Green River Rd, Evansville, IN, 47715		Follow-up: No Release Date: 01/27/2017	
Owner Mario Jacobo	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) _____	Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Owner's Address 7617 Bayard Pk Dr, Evansville, IN, 47715		Menu Type (See additional page) 1 ○ 2 ○ 3 ● 4 ○ 5 ○	
Person in Charge Mario Jacobo		Responsible Person's E-mail 	
Certified Food Handler Mario Jacobo			

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

Section#	C/NC	R	Narrative	To Be Corrected By
			All violations from 01-10-17 corrected.	

Received by (name and title printed): Mario Jacobo	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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Establishment Name New Tech Institute		Telephone Number (812-598-5604	Date of Inspection (mm/dd/yr) 01/18/2017	ID # 12001
Establishment Address (number and street, city, state, zip code) 1901 Lynch Rd, Evansville, IN, 47711		Owner (812-435-8453		
Owner Evansville Vanderburgh School Corp.	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 01/28/2017	
Owner's Address 951 Walnut St, Evansville, IN, 47713		Summary of Violations: C 0 NC 0 R 0		
Person in Charge Evansville Vanderburgh School Corp.		Menu Type (See additional page) 1 ○ 2 ● 3 ○ 4 ○ 5 ○		
Responsible Person's E-mail				
Certified Food Handler Sharon Wadkins				

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

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

Received by (name and title printed): Sharon Wadkins	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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Establishment Name Bandana`s Bar-B-Q		Telephone Number (812-401-9922)	Date of Inspection (mm/dd/yr) 01/18/2017	ID # 12053
Establishment Address (number and street, city, state, zip code) 6636 Logan Dr, Evansville, IN, 47715		Owner (636-537-8200)	Follow-up 01/28/2017	
Owner Bandana`s Missouri, 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 01/28/2017	
Owner's Address 16141 Swingley Ridge Rd Ste 205, Chesterfield, MO, 63017			Summary of Violations: C 0 NC 0 R 0	
Person in Charge Bandana`s Missouri, LLC			Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Spencer Peaugh				

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

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

Received by (name and title printed): Belinda Rapp	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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Establishment Name Jimmy Johns		Telephone Number (812-402-9944)	Date of Inspection (mm/dd/yr) 01/20/2017	ID # 12075
Establishment Address (number and street, city, state, zip code) 130 N St Joe Ave, Evansville, IN, 47712		Telephone Number (812-319-1558)		
Owner KEN BUTLER, II	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up Yes	Release Date 01/30/2017	
Owner's Address PO Box 1172, Evansville, IN, 47706		Summary of Violations: C 1 NC 0 R 0		
Person in Charge KEN BUTLER, II		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler				

- 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
118	C		Unable to verify food safety person.	01/20/2017

Received by (name and title printed): Bethanie Durham		Inspected by (name and title printed): Ricardo Zacarias	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



Retail Food Establishment Inspection Report

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Establishment Name Jason`s Deli		Telephone Number (812-471-9905)	Date of Inspection (mm/dd/yr) 01/18/2017	ID # 12134
Establishment Address (number and street, city, state, zip code) 943 N Green River Rd, Evansville, IN, 47715		() Owner (409-951-5600)		
Owner Jay Tortorice	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 01/28/2017	
Owner's Address 2455 Broadway, Beaumont, TX, 77702		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Jay Tortorice		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 Alexa Haskell				

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

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

Received by (name and title printed): Darek Conley		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



Retail Food Establishment Inspection Report

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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 Zuki	Telephone Number (812) 423-9854	Date of Inspection (mm/dd/yr) 01/18/2017	ID # 12201
Establishment Address (number and street, city, state, zip code) 222 Main St, Evansville, IN, 47708	(812) 677-0564		
Owner Rosabel Manalo-Ibay	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 01/28/2017
Owner's Address 8548 Cape Cod Cir, Evansville, IN, 47725		Summary of Violations: C <u>1</u> NC <u>0</u> R <u>1</u>	
Person in Charge Joe Ibay	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 Marvin Abadick			

- 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	R	Storage of refrigerated food not protected from possible cross contamination in upstairs cooler.	Corrected

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



Retail Food Establishment Inspection Report

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

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

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

Establishment Name: Meijer Store #287
Telephone Number: (812) 647-2200
Date of Inspection: 01/20/2017
ID #: 13006
Establishment Address: 2622 Menards Drive, Evansville, IN, 47715
Owner: Meijer Stores Limited Partnership
Purpose: Routine
Follow-up: Yes
Release Date: 01/30/2017
Owner's Address: 2929 Walker Ave NW, Grand Rapids, MI, 49544
Person in Charge: Meijer Stores Limited Partnership
Summary of Violations: C 2 NC 1 R 0
Menu Type: 1 2 3 4 5

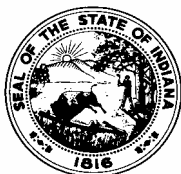
- CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Table with 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Contains violations 187, 334, and 324.

Received by (name and title printed): Gordon Venema
Inspected by (name and title printed): Kelly Holzmeyer

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

cc: fields for distribution list



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 Sushi Maru Express @ Meijer		Telephone Number (201-654-0422)	Date of Inspection (mm/dd/yr) 01/20/2017	ID # 13012
Establishment Address (number and street, city, state, zip code) 2622 Menards Dr, Evansville, IN, 47715		(201-654-0422)		
Owner Sushi Maru Express 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 01/30/2017
Owner's Address 65 Challenger Rd Ste 202, Ridgefield Pk, NJ, 07660			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge Sushi Maru Express Inc			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 Sui Mang				

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

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

Received by (name and title printed): Sui Mang		Inspected by (name and title printed): Kelly Holzmeyer	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



Retail Food Establishment Inspection Report

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

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

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

Establishment Name: Spudz N Stuff
Telephone Number: (812) 228-1068
Date of Inspection: 01/20/2017
ID #: 13402
Establishment Address: 3904 N First Ave, Evansville, IN, 47710
Owner: Craig Wargel
Owner's Address: 9015 Old State Rd, Evansville, IN, 47711
Person in Charge: Craig Wargel
Responsible Person's E-mail:
Certified Food Handler: Vanessa Jones
Purpose: [X] Routine
Follow-up: []
Complaint: []
Pre-Operational: []
Temporary: []
HACCP: []
Other (list): []
Follow-up: Yes
Release Date: 01/30/2017
Summary of Violations: C 0 NC 1 R 0
Menu Type: 1 2 3 4 5

- 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: 430, NC, , Roof in need of repair., 01/20/2017

Received by (name and title printed): Andrea Clark
Inspected by (name and title printed): Carol Coudret
Received by (signature):
Inspected by (signature):
cc: