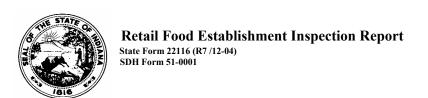
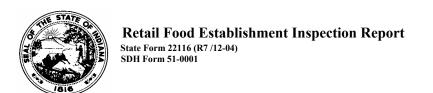


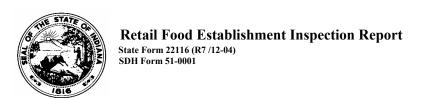
Establishm	ent Name			Telephone Number Date of Inspection ID #				
Expre		1ar	t	812-228-1077	(mm/dd/yr	,	13240	
			mber and street, city, state, zip code)	() Owner	02/28	/2017	10240	
			Ave, Evansville, Indiana, 47714	Owner				
Owner			, , , , , , , , , , , , , , , , , , , ,	Purpose:	Follow-up	Releas	se Date	
Shree	Maha	ade	ev inc	Routine	No		10/2017	
Owner's Ac	ddress			Follow-up	Summary	of Violation		
13414	Prair	ie	Dr, Evansville, Indiana, 47725	Complaint		_	_	
Person in C	harge			Pre-Operational	$\bigcup_{i \in \mathcal{U}} U_i$	NC ($\int_{\mathbf{R}} 0$	
Shree	Maha	ade	ev inc		C	NC		
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	tional page)	
				HACCP		\sim		
Certified F				Other (list)	1 2	\bigcirc 3 \bigcirc	<u> 1405</u> 0	
Not ye	t need	aea						
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
			No violations					
Received by	(name and	title 1	printed):	Inspected by (name and title p	rinted):			
Andy	,			David Horni				
Received by				Inspected by (signature):	19			
Acceived by	(Signature)	,.		inspected by (signature).				
					T			
cc:			cc:		cc:			



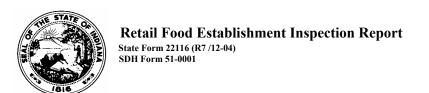
Establishm		nar	Scoop Shoppe	Telephone Number (812-202-0136)	Date of Ins (mm/dd/yr)		тр# 13185
			mber and street, city, state, zip code)	1	03/03/	/2017	13103
			in St, Evansville, Indiana, 47712	⁽ 812-202-0136			
Owner John /	A Did	ia		Purpose:	Follow-up NO		se Date /13/2017
Owner's A		a		Routine			
		nkli	in St, Evansville, Indiana, 47712	Follow-up Complaint	Summary	_	
Person in C		_		Pre-Operational	$_{\rm c}$ U	NC ($\frac{1}{R}$
John /				Temporary			
Responsible	e Person's	E-ma	d .	НАССР	Menu Typ	e (See addi	tional page)
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}$	\bigcirc_3	O_5
N/A							
• 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
			No noted violation	ons.			
Received by Alish				Inspected by (name and title p Ricardo Zac			
Received by	(signature):		Inspected by (signature):			
cc:			сс:		cc:		



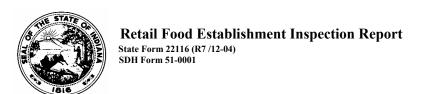
Establishm	ent Name			Telephone Number Date of Inspection ID #				
Embr	oider	y F	Plus Specialty Popcorn Kiosh		(mm/dd/yr	,	12296	
Establishm 800 N	ent Addres Gree	s (nu	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	() Owner	03/03	/2017		
Owner Gale H				Purpose:	Follow-up	Release Date 03/13/2017		
Owner's Ac	ddress			Follow-up	Summary	of Violation	ns:	
Person in C	harge			Complaint	0	,,, (0_{R}	
Gale I		r		Pre-Operational Temporary		NC_	R	
Responsible	e Person's	E-ma	1	HACCP	Menu Typ	e (See addi	tional page)	
Certified F	ood Handle	er		Other (list)	102	(•) ₃ ()4()5()	
Gale F					1	<u> </u>	<u> </u>	
• CRITICAL	ITEMS AF	E IDE	NTIFIED 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 violations					
Received by Gale	*			Inspected by (name and title p				
Received by				Inspected by (signature):				
		_						
cc:			cc:		cc:			



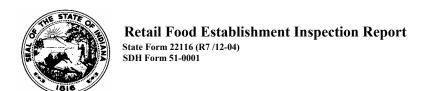
			<u> </u>	•			
Establishm McAli		s C	Deli	Telephone Number (812-618-2050	Date of Insp (mm/dd/yr))	1D# 12175
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	(aa)Owner	02/27/	/2017	
Owner LLD Ir	nvestr	ne	nts, Inc.	Purpose:	Follow-up NO		se Date /09/2017
Owner's Ac 1141		Gat	te Rd, Evansville, IN, 47725	Follow-up Complaint	Summary	of Violation	•
	nvestr		nts, Inc.	Pre-Operational Temporary	_c_ U _	NC_	J _R U
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	itional page)
Certified F			 rth	Other (list)	$1 \bigcirc 2$	<u>3</u> ©)4050
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUN	MMARY OF VIOLATIONS" AN	D IN THE NA		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by Clifto				Inspected by (name and title policy Holzm			
Received by	y (signature):		Inspected by (signature):			
cc:			cc:		cc:		



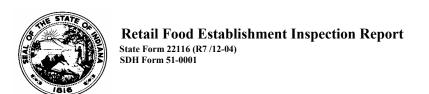
Establishm			_	Telephone Number	Date of Insp	ection	ID#
Vend	air V	en	ding @ Berry Plastics	812-425-2621	(mm/dd/yr)	2047	12137
			mber and street, city, state, zip code)	⁽ 812-425-2621	03/03/	2017	
101 O	akley	St	, Evansville, IN, 47710	812-425-2621			
Owner		٠.,		Purpose:	Follow-up		se Date
Venda		ndı	ng	✓ Routine	No	03/	13/2017
Owner's Ad		^	E 'II IN 47744	Follow-up	Summary o	f Violation	ns:
		s <i>P</i>	ve, Evansville, IN, 47711	Complaint	\cap	() ()
Person in C		الم ما:		Pre-Operational	$_{\rm C}$ \cup	NC_	J _R U
Venda				Temporary	-		
Responsible	e Person's	E-ma	il	НАССР	Menu Type	: (See addi	tional page)
Certified F	1 11 11			Other (list)	$1 \cdot \bigcirc \cdot ($	\bigcirc	\bigcirc
Certified F	ood Handi	er			$1 \bigcirc 2 \bigcirc$	<u> </u>	<u> </u>
• CRITICAL	LITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	AARKED "C"			
• VIOLATIO		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 violations				
							-
]						
Received by		_	•	Inspected by (name and title p			
Alice	Seil)e	rt l	David Horni	ng		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



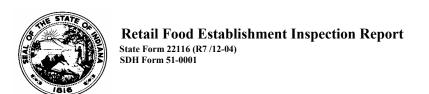
Establishm Culing		no	vations by April Boeke, LLC	Telephone Number	Date of Ins (mm/dd/yr		1D# 12083
			mber and street, city, state, zip code)	1	03/02	/2017	12003
			lin St, Evansville, IN, 47712	⁽ 812-228-7626			
Owner	ر مام م	امر	. Dooles	Purpose:	Follow-up		se Date
Owner's Ac		JCK	k-Boeke	Routine	No		12/2017
		los	eph Rd, Evansville, IN, 47713	Follow-up		of Violation	_
Person in C	Charge		•	Complaint Pre-Operational	$\begin{bmatrix} 0 \end{bmatrix}$	NC ($\frac{1}{R}$
April S	Schmi	uck	k-Boeke	Temporary		NC	K
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
Certified Fo	and Handl	0.14		Other (list)	100	\bigcirc),(),()
April B		eı			1 <u>02</u>	<u></u>	<u> </u>
		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 April	*			Inspected by (name and title properties of the Ricardo Zac			
Received by				Inspected by (signature):			
cc:			cc:		cc:		



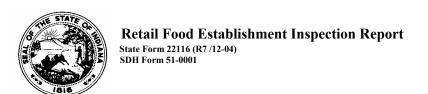
Establishm		rto	szone Pizza & Pub LLC	Telephone Number Date of Inspection (mm/dd/yr) 110				
			mber and street, city, state, zip code)	812-425-7729	03/03	/2017	11934	
			n Ave, Evansville, IN, 47711	812-550-3921				
Owner	/ 1/'	1		Purpose:	Follow-up		se Date	
Lyle V		er		Routine	No	03/	13/2017	
Owner's A		رجاء	ey, Evansville, IN, 47710	Follow-up	-	of Violation		
Person in C		CIC	2y, Evansvine, 114, 477 10	Complaint	1	,,, (
Lyle V		er		Pre-Operational	C	NC_	R	
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)	
				HACCP				
Certified F Donald				Other (list)	1 2	<u>J</u> 3	<u> 1405</u>	
			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	
136	С	R	Employee smoking in t	he kitchen.		Co	rrected	
Received by Lyle			orinted):	Inspected by (name and title processed in Coudr				
Received by				Inspected by (signature):	<u> </u>			
		•						
cc:			cc:		cc:			



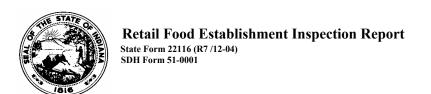
			• • • • • • • • • • • • • • • • • • • •	-			
Vend		ΔŊ	ding	Telephone Number	Date of Ins (mm/dd/yr		ID#
				812-425-2621	03/03	/2017	11892
			mber and street, city, state, zip code) AVE, Evansville, IN, 47711	⁽ 812-425-2621			
Owner Venda	air Ve	ndi	na	Purpose: Routine	Follow-uj		se Date /13/2017
Owner's Ac				Follow-up		of Violation	
810 N	Fare	s A	ve, Evansville, IN, 47711	Complaint	Summary	_	_
Person in C	harge		· · · · · · · · · · · · · · · · · · ·	Pre-Operational	$\begin{bmatrix} C \end{bmatrix}$	NC_	\mathbf{J} \mathbf{b} \mathbf{U}
Venda	air Ve	ndi	ng		<u> </u>	NC	K
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	tional page)
				HACCP		\sim	
Certified Fo	ood Handl	er		Other (list)	1 2	<u> </u>	<u>)4</u> 050
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	RELOW AS "R"
Section#	C/NC	R	Narrative	MINIMART OF VIOLATIONS AN	D IN THE I		orrected By
Section#	C/NC	K	No violations	<u> </u>		то ве С	Trected by
			INO VIOIATIONS). 			
		L					
Received by	(name and	l title •	orinted):	Inspected by (name and title p	rinted):		
Alice				David Horni			
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		
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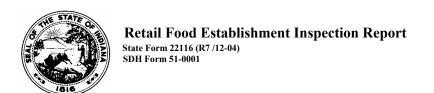
			<u> </u>	•			
Establishm Mama		ma	is Pizza Express	Telephone Number (812-477-6262)	Date of Ins (mm/dd/yr)		тр# 11761
			mber and street, city, state, zip code)		02/27	/2017	11701
3115			ive, Evansville, IN, 47714	812-549-7350			
Owner Nimisl	h Sha	h		Purpose:	Follow-up		se Date //09/2017
Owner's A				✓ Follow-up		of Violation	
3115	Cove	rt A	ve, Evansville, IN, 47714	Complaint	Summary	_	•
Person in C Nimisl	Charge			Pre-Operational	c_0	NC_	$\frac{\mathbf{J}}{\mathbf{R}}$
Responsible			ii	Temporary	Menu Typ	e (See addi	itional page)
F				НАССР		<u> </u>	
Certified Fo		er		Other (list)	$1 \bigcirc 2$	<u>3</u>	<u>)</u> 4 <u>0</u> 5 <u>0</u>
		DE IDE	ENTERED IN THE CHECKLIST AND NADDATIVE COLUMNS N	MADKED "C"			
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N.		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			All violation from 02/03/20	017 corrected.			
Received by Nimis				Inspected by (name and title properties Kelly Holzm			
Received by	(signature):		Inspected by (signature):	J		
cc:			cc:		cc:		



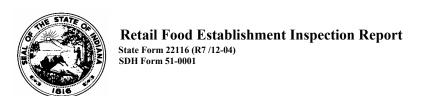
Establishm	ont Name			Telephone Number Date of Inspection ID #				
Albio		lον	ve	=	(mm/dd/yr			
				812-422-9372	02/28	/2017	11677	
			mber and street, city, state, zip code) Evansville, IN, 47713	() Owner				
Owner	JUSUI	', L	.varisville, 111, 477 15	Purpose:	Follow-uj	Releas	se Date	
KATH	У М	IRF	RAY	Routine	No		10/2017	
Owner's Ac		1 (1	V VI	 				
		64	, Evansville, IN, 47731	Follow-up	-	of Violation		
Person in C		0 1	, Evanovino, irv, 17701	Complaint		($0_{\rm R}$	
KATH		IRF	RAY	Pre-Operational	c_ C _	NC_	R	
Responsible				Temporary	Menu Tvr	e (See addi	tional page)	
•				НАССР				
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}$	$(\bullet)_3($	$)_{4}\bigcirc_{5}\bigcirc$	
n/a						<u> </u>		
• CRITICAL	, ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N			
Section#	C/NC	R	Narrative			To Be Co	orrected By	
			No violations no	ted.				
								
Received by	*			Inspected by (name and title pr				
Kath	v Mu	rra	av l	David Horni	na			
Received by			<i>J</i>	Inspected by (signature):	<u> </u>			
	. 5			1 3 (3).				
co:			201		cc:			
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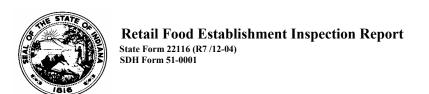
Establishm Darm		l Ir		Telephone Number Date of Inspection (mm/dd/yr) 1D #						
			II I mber and street, city, state, zip code)	812-867-7300	03/02	2/2017	11543			
			adt Rd, Evansville, IN, 47725	812-708-0118						
Owner				Purpose:	Follow-u		se Date			
		nn	edy - JLK Bar Holdings II Inc.	✓ Routine	Yes	03/	12/2017			
Owner's Ac 10833		Pa	d Rd, Elberfeld, IN, 47613	Follow-up		of Violation				
Person in C	Charge			Complaint Pre-Operational	$\begin{bmatrix} 0 \end{bmatrix}$	NC 4	$\frac{2}{R}$			
			edy - JLK Bar Holdings II Inc.	Temporary						
Responsible	e Person's	E-ma	il	НАССР	Menu Tyj	oe (See addi	tional page)			
Certified F	ood Handl	er		Other (list)	1(),	\bigcirc_3	$)_4\bigcirc_5\bigcirc$			
Rick K					1	<u> </u>	<u> </u>			
• CRITICAI	L ITEMS AI	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	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"			
Section#	C/NC	R	Narrative			To Be Co	orrected By			
199	NC		Improper thawing meth	nods used.		Co	rrected			
218	NC	R	Reach in beer cooler by bar area, temp. above 41 F	ch in beer cooler by bar area, temp. above 41 F and in need of cleaning, soiled walls						
			and bottom part. Water pooling is visible	e in the inside of the	cooler.					
Received by	*			Inspected by (name and title properties of the Ricardo Zac		<u> </u>				
Received by	(signature):		Inspected by (signature):						
cc:			cc:		cc:					



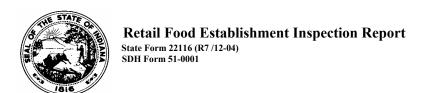
Establishm	ent Name			Telephone Number Date of Inspection ID #				
			OMES SWIRCA	() Establishment	(mm/dd/yr) 02/27/		11503
			mber and street, city, state, zip code) quare, Evansville, IN, 47715	() Owner	02/21/	2017	
Owner				I	Purpose:	Follow-up	Releas	e Date
Horizo		me	es	_ _	Routine	No		09/2017
Owner's Ac					Follow-up	Summary o	of Violation	ns:
1450 I	Luthe	r S	q.	F	Complaint	o Î		_
Person in C				▔╠	Pre-Operational	CU	NC_($\bigcup_{\mathbf{R}} \mathbf{U}$
Horizo	n Ho	me	es es	╠	Temporary	<u> </u>	1,10	_ ~
Responsible	e Person's	E-ma	il	┰┝	=	Menu Type	(See addi	tional page)
				┷	HACCP			
Certified Fo	ood Handl	er		_	Other (list)	1 <u>0</u> 2	<u> </u>	<u> 14050</u>
	. ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMN	S MAF	RKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE	SUMM	MARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted viola	ation	IS.			
Received by			printed):		spected by (name and title pr	rinted):		
Julie	<u>Osh</u>	a			Colin Ward			
Received by	(signature):		In	spected by (signature):			
cc:			cc:			cc:		



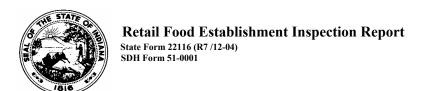
Establishm		ıth	west Grill	Telephone Number Date of Inspection (mm/dd/yr) 114				
			mber and street, city, state, zip code)	812-491-6637	03/02	2/2017	11499	
6401 E			xpressway, Evansville, IN, 47715	⁽ 770-817-1950				
Owner Brian	Ferris	3		Purpose:	Follow-u		se Date 12/2017	
Owner's A				Follow-up		of Violation		
1867-0	C McF	arla	and Pkwy, Alpharetta, GA, 30005	Complaint	-			
Person in C				Pre-Operational	\mathbf{c}^{-1}	NC (0_{R}	
Brian				Temporary				
Responsible	e Person's	E-ma	il	HACCP	Menu Tyj	oe (See addi	tional page)	
				Other (list)		\bigcirc		
Certified F Khaled			a		1 2	$\bigcirc 3 \bigcirc$	<u>/45</u>	
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "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	
118	С		Food establishment does not have a cert	tified food safety em	oloyee.	04/2	27/2017	
Received by Khale	*			Inspected by (name and title p Colin Ward	rinted):			
Received by				Inspected by (signature):				
cc:			cc:		cc:			



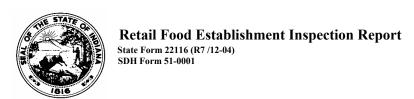
Establishme Crazy		f _O t		Telephone Number	Date of Ins (mm/dd/yr		ID#
			mber and street, city, state, zip code)	812-437-8833	03/02	/2017	11494
			rdt Rd, Evansville, IN, 47715	⁽ 812-437-8833			
Owner Fei En	Pan			Purpose:	Follow-uj		te Date 12/2017
Owner's Ad				#			
		v [Or, EVANSVILLE, IN, 47711	Follow-up	_ `	of Violation	_
Person in Cl		<u>, -</u>	,,,,	Complaint	$\begin{bmatrix} 0 \end{bmatrix}$	NG ($\frac{0}{R}$
Fei En	Pan			Pre-Operational	<u> </u>	NC_	R
Responsible	Person's	E-ma	il	Temporary	Menu Typ	e (See addi	tional page)
				HACCP		\sim	
Certified Fo				Other (list)	1 <u>0</u> 2	<u> </u>	<u> 14©5</u> <u></u>
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			Follow-up from inspection on 2/2/17.	All violations corr	ected.		
			·				
Received by Feier			printed):	Inspected by (name and title processing Ward	rinted):		
Received by	(signature)).'		Inspected by (signature):			
cc:			cc:		cc:		



Establishm JAZZ		IS	79404005	Telephone Number (812-488-2952)	Date of Ins (mm/dd/yr)	j	1D# 11471
Establishm	ent Addre	s (nu	mber and street, city, state, zip code)	(866-372-3035			
	Linco	n A	Ave, Evansville, IN, 47722				
		rvic	ces of Indiana LLP	Purpose: Routine	Follow-up No		se Date 109/2017
	OX 35	52,	Buffalo, NY, 14240	Follow-up Complaint		of Violation	
Person in C Sode		rvic	ces of Indiana LLP	Pre-Operational	$C \cup C$	NC_	$\frac{1}{R}$
Responsibl	e Person's	E-ma	il	Temporary HACCP	Menu Typ	e (See addi	itional page)
Certified F				Other (list)	$1 \bigcirc 2$	<u>3</u>	$\underline{)}_{4}\underline{\bigcirc}_{5}\underline{\bigcirc}$
James	vveite	en					
• CRITICAI	L ITEMS AF	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	MARKED "C"			
• VIOLATIO		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			
Received by				Inspected by (signature):	<u>-, -, -, -, -, -, -, -, -, -, -, -, -, -</u>		
201			T:				
cc:			cc:		cc:		



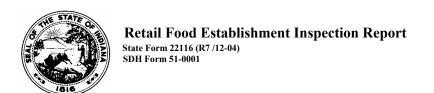
Establishm Chuc		Fo	od Mart #26	Telephone Number (812-475-0493)	Date of Ins (mm/dd/yr)	1D# 11470
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	(a.)Owner a a a a a	03/02	/2017	
16013	s vvei	nba	ach Ave., Evansville, IN, 47714				
Owner C E T	AYLC	R	OIL INC	Purpose:	Follow-uj		se Date /12/2017
Owner's Ac	ddress			Follow-up	Summary	of Violation	ne:
10105	Hed	der	n Rd, Evansville, IN, 47725		_ `	_	
Person in C		<u> </u>	,,,,	Complaint		. ($0_{\rm R}$
)R	OIL INC	Pre-Operational	C	NC_	<u> </u>
Responsible				Temporary	Menu Tyr	ne <i>(See addi</i>	tional page)
Responsible	c i cison s	L-III4		НАССР	iviciiu 1 y	e (Bee adai	nonai page)
Certified F	1 11 11			Other (list)	100	\bigcirc . \bigcirc	\bigcirc
Certified F	оой панию	er			1 2	\bigcirc 3 \bigcirc	<u> </u>
• CRITICAL	L ITEMS AR	E 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
Sections	0/1/0		No noted violation	anc .		10200	nreced By
			INO HOLEG VIOIALIC	JI18.			
	<u> </u>						
Received by	*			Inspected by (name and title p			
Andr	ea F	en	wick	Kelly Holzm	ever		
Received by				Inspected by (signature):	<i>J</i> -		
				1 3 (0 /			
cc:			cc:		cc:		



Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#
Zesto)			812-424-1416	02/27		11460
			mber and street, city, state, zip code)	(o.4)Owner	02/21/	2017	
1	/ Fran	IKII	n St, EVANSVILLE, IN, 47710				<u> </u>
Owner Big Co	ne Ir) C		Purpose:	Follow-up NO		se Date 709/2017
Owner's A		ю.		Follow-up			
		uck	ky Ave, Evansville, IN, 47714	Complaint	Summary	of Violation	
Person in C	Charge			Pre-Operational	$\begin{bmatrix} 0 \end{bmatrix}$	NC_	1 _R 1
Big Co				Temporary			
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)
Certified F	ood Handl	or		Other (list)	102	\odot_3),(),()
Kay M					1 2 2	<u></u>	<u>/4030</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "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
431	NC	R	Microwave and cart shelving in	n cook area soiled.		02/2	28/2017
			<u> </u>				
Received by	(name and	l title p	printed):	Inspected by (name and title p	rinted):		
Sher	ri Ho	ffr	nann	David Horni	ng		
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



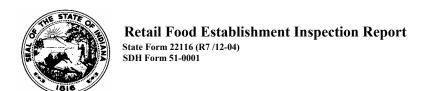
			<u> </u>				
Establishm Walm		4 13	 341	Telephone Number (812-424-5475)	Date of Ins (mm/dd/yr))	то# 11430
Establishm	ent Addre	ss (nu	mber and street, city, state, zip code)	479-204-4738	03/03	/2017	11100
	Rea	ва	nk Rd, Evansville, IN, 47712		7.11		
Owner Wal-m	nart S	tor	es East, LP	Purpose: Routine	Follow-up No		se Date /13/2017
Owner's Ad		, C:	t Pontonvillo AP 72716 0500	Follow-up	Summary	of Violation	ns:
Person in C		ان	t, Bentonville, AR, 72716-0500	Complaint	\cap	NC_(
		tor	es East, LP	Pre-Operational	c_ O	NC_	<u> R</u> <u>C</u>
Responsible	e Person's	E-ma	il	Temporary HACCP	Menu Typ	e (See addi	tional page)
Certified F	ood Handl	er		Other (list)	1)2	\bigcirc_3 (\bullet	$)_4\bigcirc_5\bigcirc$
Kristin					1	<u> </u>	<u> </u>
• CRITICAL	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 "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 Danie	`			Ricardo Zac		;	
Received by				Inspected by (signature):			
cc:			cc:		cc:		



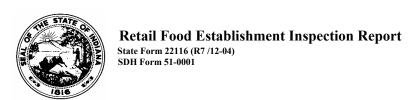
			<u> </u>							
Establishm CAFÉ		UF	RT 79404001	Telephone Number (812-488-2952	Date of Ins (mm/dd/yr))	1D# 11418			
			mber and street, city, state, zip code) Ave., Evansville, IN, 47722	866-372-3035						
Owner Sodex	o Se	rvic	ces of Indiana LLP	Purpose:	Follow-up No		se Date 09/2017			
4	OX 35	52,	Buffalo, NY, 14240	Follow-up Complaint	Summary	of Violation	•			
	o Se		ces of Indiana LLP	Pre-Operational Temporary	c_ U	NC(
Responsible	e Person's	E-mai	.1	НАССР	Menu Typ	e (See addi	itional page)			
Certified For James				Other (list)	1 2	<u>3</u>	<u>)4</u> 05 <u></u>			
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI		ND IN THE N.	ARRATIVE	BELOW AS "R"			
Section#	C/NC	R	Narrative			To Be Co	orrected By			
			No noted violat	ions.						
			THE HOUSE VIOLE.							
Received by James		_		Inspected by (name and title p						
Received by	y (signature):		Inspected by (signature):						
cc:			cc:	l	cc:					



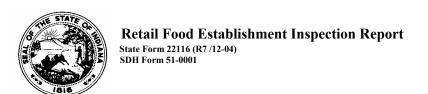
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Una-	Tu-Pi	ΖZ	a	812-424-8400		2017	11417
			mber and street, city, state, zip code)	(812-424-8400	02/27/	2017	
709 N	Gove	ern	or St., Evansville, IN, 47711	812-424-8400			
Owner				Purpose:	Follow-up		se Date
Kevin				✓ Routine	No	03/	09/2017
Owner's Ad				Follow-up	Summary o	f Violatio	ns:
		ern	or, Evansville, IN, 47710	Complaint	\cap	() ()
Person in C Kevin				Pre-Operational	$_{\rm C}$	NC_	\mathcal{L}_{R}
Responsible			:1	Temporary	Manu Trma	(Coo addi	tional page)
Kesponsible	e r erson s	L-ma	11	НАССР	Menu Type	(see aaai	nonai page)
Certified F	ood Handle	er		Other (list)	1(),(•)3($)_4\bigcirc_5\bigcirc$
Brando	on Bu	rke	s and one more to get		1	<u> </u>	<u> </u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE NA	RRATIVE	RELOW AS "R"
Section#	C/NC	R	Narrative	MINIMI OF VIOLATIONS AND			orrected By
Sectiona	Cite	IX	No violations	•		I U DC C	Trected By
			140 Violations)			
					+		
Received by	(name and	title p	printed):	Inspected by (name and title pr			
Denr	nis			David Horni	ng		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



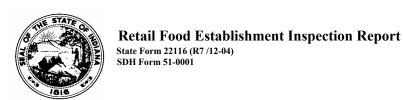
Establishm CARI		EΙ	HOUSE SWIRCA	Telephone Number () Establishment Date of Inspection (mm/dd/yr) 02/27/2017 ID # 1137					
Establishm 5300	ent Addres Carria	ss (nui	mber and street, city, state, zip code) Dr., EVANSVILLE, IN, 47715	8124647800		2017			
Owner SWIR	CA			Purpose: Routine	Follow-up No		se Date 09/2017		
	Virgir	nia	St, Evansville, IN, 47710	Follow-up Complaint	Summary o	_			
Person in C SWIR				Pre-Operational Temporary	c_U	NC_			
Responsible	e Person's	E-mai	1	HACCP	Menu Type	: (See addi	tional page)		
Certified For N/a	ood Handl	er		Other (list)	1 2	<u>•</u> 3 <u>C</u>	<u>)</u> 4 <u>U</u> 5 <u>U</u>		
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE NA	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative			To Be Co	orrected By		
			No noted violation	ons					
				0.101					
Denr	,			Inspected by (name and title p	rinted):				
Received by	(signature):		Inspected by (signature):					
cc:			cc:		cc:				



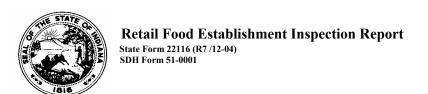
Establishm				Telephone Number	Date of Insp		ID#	
Xces	S			$\begin{array}{ c c c c c c c c c c c c c c c c c c c$				
			mber and street, city, state, zip code)	() Owner	03/03/	2017		
201B	S Ful	ton	Ave, Evansville, IN, 47708					
Owner				Purpose:	Follow-up		se Date	
Jason		ısh		✓ Routine	No	03/	13/2017	
Owner's A		14	. A EVANOVIII E IN 47700	Follow-up	Summary of	of Violation	ıs:	
4		itor	n Ave, EVANSVILLE, IN, 47708	Complaint	\cap	() (
Person in C Jason		ich		Pre-Operational	$_{\rm C}$	NC_(\mathcal{L}_{R}	
Responsible				Temporary	Manu Tyn	. (Saa addi	tional page)	
Kesponsion	e i eison s	L-IIIa	ш	НАССР	Wichu Typo	. (see aaar	nonai page)	
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}($	\bullet ₃ \subset	$)_{4}\bigcirc_{5}\bigcirc$	
n/a					1	<u> </u>	<u></u>	
• CRITICAI	L ITEMS AI	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"	<u> </u>			
• VIOLATIO	ON(S) REPE	EATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				orrected By	
	0.0.0		No noted violation	ns				
			THO HOLDER VIOLATIO	5110.				
Received by	/ (name and	l title i	printed):	Inspected by (name and title p	rinted):			
dawr	_			Ricardo Zac				
Received by	(signature	:):		Inspected by (signature):				
cc:			cc:		cc:			
			1					



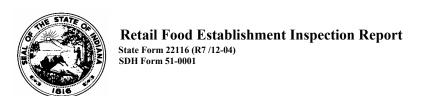
Establishm Resu		ion	School		elephone Number	Date of In (mm/dd/yr		то# 11282
			mber and street, city, state, zip code)	1 ,	312-963-5556	03/03	3/2017	11202
5301 N			nony Rd., EVANSVILLE, IN, 47720) Owner			
Owner RESU	IRRE	СТ	ION SCHOOL		irpose: Routine	Follow-u No		se Date /13/2017
Owner's Ac				Ë	Follow-up	Summary	of Violatio	
				⊨	Complaint	Summary	_	_
Person in C		CT	ION SCHOOL		Pre-Operational	c_0	NC_	$\frac{\mathbf{J}}{\mathbf{R}}$
Responsible				L	Temporary	Menu Tv	oe (See addi	itional page)
•					НАССР			
Certified For Shari			 [:] el	_	Other (list)	102	\bigcirc_3	<u>)</u> 4 <u>0</u> 5 <u>0</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARI	KED "C"			
						D IN THE A		DELOW AS (DE
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUN	MMA	ARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violation	ons	S			
Received by Kath				_	pected by (name and title pricardo Zac		3	
Received by	(signature):		Insp	pected by (signature):			
cc:			cc:			cc:		



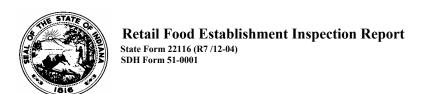
Establishm				Telephone Number	Date of Ins (mm/dd/yr		ID#	
China	a Exp	re	SS	(812-428-3838 (03/02/2017 1114				
			mber and street, city, state, zip code)	502-510-5655	03/02	./2017		
1	S Gov	/er	nor St., Evansville, IN, 47713					
Owner Quan	Tran			Purpose:	Follow-uj		se Date /12/2017	
Owner's A				Routine				
		SWO	ood Dr, Evansville, IN, 47713	Follow-up		of Violation		
Person in C			200.21, 210.1010,,	Complaint	$\begin{bmatrix} 1 \end{bmatrix}$	NC 4	$\frac{2}{R}$	
Quan	Tran			Pre-Operational	L	. NC	_ K	
Responsible	e Person's	E-ma	il	Temporary HACCP	Menu Typ	e (See addi	tional page)	
				Other (list)				
Certified F		er			1 2	\bigcirc_3	<u>/405</u>	
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MADVED "C"				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ADDATIVE	RELOWAS "D"	
Section#	C/NC	R	Narrative	MINIARI OF VIOLATIONS AN	DIN THE I		orrected By	
431	NC	R	Facility and hood vents in n	eed of cleaning			05/2017	
426	NC	R	Storing personal items		03/05/2017			
173	<u> </u>						02/2017	
			33 - 11 - 11 - 11 - 11 - 11 - 11 - 11 -					
Received by Quar	·	_	orinted):	Inspected by (name and title proposed Horning)				
Received by	y (signature):		Inspected by (signature):				
cc:			ee:		cc:			



					_			
Establishm		. ~	#110	Telephone Number	Date of Ins (mm/dd/yr	ID#		
Burge			# I I I I I I I I I I I I I I I I I I I	812-479-5968	03/01	/2017	11117	
			Ne, EVANSVILLE, IN, 47714	⁽ 315-424-0513				
Owner			, ,	Purpose:	Follow-u		se Date	
Carrol	s, LL	$C_{\underline{}}$		✓ Routine	No	03/	11/2017	
Owner's Ac		<u> </u>	0 NN/ 40040	Follow-up	Summary	of Violation	ns:	
		St,	Syracuse, NY, 13212	Complaint	1	(1	
Person in C		\sim		Pre-Operational	$_{\rm C}$ 1	NC_	J _R I	
Carrol			2	Temporary) (T	/C 11:	· 1	
Responsible	e Person's	E-ma	II	НАССР	Menu Ty	se (See addi	tional page)	
Certified F	ood Handle	ar .		Other (list)	10,	(•) ₂ (),(),()	
Clarke					1 2	<u> </u>	<u> </u>	
			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 Corrected By		
324	С	R	Manifest of grease trap cleaning	could not be show	n.	03/0	02/2017	
Paggivad I-	(nome or 1	+i+1~ -	arintad):	Inspected by (name and title	rintad):			
Received by Clark				Inspected by (name and title proposed Horning				
				Inspected by (signature):				
III Served by	(=-0	,.		Sr SJ (S.B).				
cc:			cc:		cc:			
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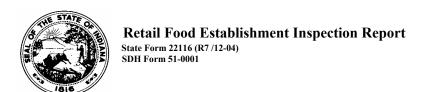
				T			T:
Establishm		37		Telephone Number	Date of Ins (mm/dd/yr	1D# 11047	
Hucks # 337 Establishment Address (number and street, city, state, zip code)				(812-477-5232	03/02	/2017	11047
			River Rd, Evansville, IN, 47715	618-382-2334			
Owner				Purpose:	Follow-up		se Date
		BA	YLEY INC	✓ Routine	No	03/	12/2017
Owner's Ac		o+ N	Main Carmi II 62921	Follow-up	Summary	of Violation	ns:
Person in C		SU	Main, Carmi, IL, 62821	Complaint		(O_{R}
		BA	YLEY INC	Pre-Operational	C	NC_	7 R C
Responsible				Temporary	Menu Tyr	oe (See addi	tional page)
				HACCP		\bigcirc G	
Certified F				Other (list)	1 2	\bigcirc_3	<u> 1405</u>
Meliss					<u> </u>		
• CRITICAL	L ITEMS AR	E IDE	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				Inspected by (name and title pr			
Melissa Beard				Kelly Holzm	<u>ey</u> er		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		
ĺ					1		



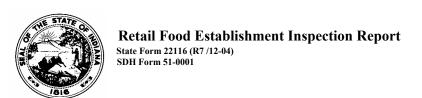
Establishment Highlai		Ξle	mentary School	Telephone Number (812-867-2428	Date of Ins (mm/dd/yr)		то# 11028
Establishment	Addres	s (nui	mber and street, city, state, zip code)	(-, 10wner, 1	03/02	/2017	
Owner	arms	tac	dt Rd., EVÂNSVILLE, IN, 47725	Purpose:	Follow-up	Palage	se Date
	ille \	/ar	nderburgh School Corp.	Routine	No		12/2017
Owner's Addr	ress			Follow-up	Summary		
4		St	, Evansville, IN, 47713	Complaint		() ()
Person in Cha		/ar	nderburgh School Corp.	Pre-Operational	$C_{\overline{\mathbf{C}}}$	NC_	7 R U
Responsible P				Temporary	Menu Typ	e (See addi	itional page)
G 10 17				HACCP Other (list)			1.0.0
Certified Food						<u> </u>	<u> 1405</u>
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
• VIOLATION(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	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by (n. Louise		_		Inspected by (name and title p Carol Coudr			
Received by (si	ignature)	:		Inspected by (signature):			
cc:			ec:		cc:		



Establishm		٧A	nient Store	Telephone Number	(mm/dd/vr)			
			mber and street, city, state, zip code)	(812-488-2952)	02/21	/2017	11015	
1800 I	Lincol	n A	Ave., Evansville, IN, 47722	(866-372-3035				
Owner Sodex	o Se	rvic	ces of Indiana LLP	Purpose: Routine	Follow-up No		se Date 09/2017	
Owner's Ad PO BO		52,	Buffalo, NY, 14240	Follow-up Complaint	`	of Violation		
Person in C	harge		ces of Indiana LLP	Pre-Operational	c_0	NC_	$\frac{0}{R}$	
Responsible	e Person's	E-ma	il	Temporary HACCP	Menu Typ	e (See addi	tional page)	
Certified Fo	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}$	\bigcirc_3	$)_4$ \bigcirc_5 \bigcirc	
James	Welfe	en						
• CRITICAL	ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"				
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI	JMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
			No noted violati	ons.				
Received by	(name and	title 1	printed):	Inspected by (name and title p	rinted):			
Jame	*			Kelly Holzm				
Received by				Inspected by (signature):				
cc:			cc:		cc:			



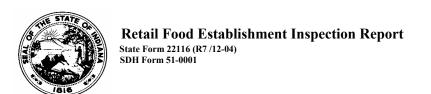
Establishm				Telephone Number Date of Inspection (mm/dd/yr)			
EL RIO MEXICAN RESTAURANT				812-471-1400	02/27		10942
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	() Owner	02/21/	2017	
Owner Gusta	vo Sc	oto		Purpose:	Follow-up		se Date 09/2017
Owner's Ad		٥n	Divor Dd Evensville IN 47745	Follow-up	Summary	of Violation	ns:
		en	River Rd, Evansville, IN, 47715	Complaint	\cap	() ()
Person in C Gusta		oto		Pre-Operational	C	NC_	0_{R}
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР			
Certified For Gusta				Other (list)	1 2	<u>3</u>	<u>)4</u> 050
• CRITICAL	ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N.	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by				Inspected by (name and title property Holzman			
Received by				Inspected by (signature):	<u>-, -, </u>		
				-			
cc:			cc:		cc:		



Establishm		<u> </u>	•	Telephone Number Date of Inspection (mm/dd/yr)				
Jimmy John's Establishment Address (number and street, city, state, zip code)				812-402-5653	02/27	13619		
	330 Main St. Unit A, Evansville, IN, 47708							
Owner		•	7, <u></u>	Purpose:	Follow-u	p Releas	se Date	
Ken S	tinler			Routine	No	03/	09/2017	
Owner's A			2 0 1 1 1 1 1 1 1 1 1	Follow-up	Summary	of Violatio	ns:	
		<u>en (</u>	Dak Ct, Newburgh, IN , 47630	Complaint	1	() ()	
Person in C				Pre-Operational	C	NC_	0_{R}	
Responsible		F_ma	ii	Temporary	Menu Tvr	se (Saa addi	tional page)	
Responsible	c i ci son s	L-ma		П НАССР	wichu Typ	oc (see aaai	nonui puge)	
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}$	\odot_3	$_{4}O_{5}O$	
Will ge	et.							
• 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	
345	С		Handwashing sink obstructed	d with container.		Co	rrected	
			<u> </u>					
Received by Ange				Inspected by (name and title proposed Hornic				
Received by				Inspected by (signature):	J			
cc:			cc:		cc:			



Establishm	ent Name			Telephone Number	Date of Ins	nection	ID#
Ginmiya Asian Diner				812-471-8100	(mm/dd/yr	10815	
			mber and street, city, state, zip code)		03/03	/2017	10010
4827 D	avis L	.ant	Drive Ste F, Evansville, IN, 47715	⁽ 812-213-5177			
Owner	.: \/			Purpose:	Follow-up		se Date
De Hu				Routine	No		13/2017
Owner's Ac		·rv	Lane Dr, Evansville, IN, 47715	Follow-up	_	of Violation	
Person in C		<u>y</u>	Land Di, Evanovino, iiv, 17710	Complaint	. 0	($0_{\rm R}$
De Hu				Pre-Operational		NC_	_ R
Responsible	e Person's	E-mai	il	Temporary	Menu Typ	e (See addi	tional page)
				HACCP			
Certified For De Hu		er		Other (list)	1 2		<u> 14U5U</u>
					<u> </u>		
• CRITICAL	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by				Inspected by (name and title p			
De H	lui Y	u		Kelly Holzm	eyer		
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		
ĺ					1		



Establishm		arr	n Farms	Telephone Number O 1 DEFENDED Date of Inspection (mm/dd/yr) 137			
			mber and street, city, state, zip code)	812-550-1085	00/02	/2017	13700
			d, Evansville, IN, 47715	812-550-1085			
Owner Chris	Wintr	ner		Purpose:	Follow-up		se Date /12/2017
Owner's A				Follow-up		of Violation	
10818	Deca	atur	Ct., Evansville, Indiana, 47725	Complaint		_	
Person in C				Pre-Operational		NC_	$J_{B}U_{I}$
Chris	Wintr	ner				NC	K
Responsibl	e Person's	E-mai	a a	Temporary	Menu Typ	e <i>(See addi</i>	itional page)
				HACCP			
Certified F	ood Handl	er		Other (list)	1 2	<u>3</u>	<u>)4U5U</u>
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	MARKED "C"	l		
• 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
			Approved for oper	ration.			
			•				
Received by Chris				Inspected by (name and title p Colin Ward	rinted):		
Received by			-	Inspected by (signature):			
cc:			cc:		cc:		