



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 Unplugged Ale House		Telephone Number (812-401-0175)	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 12961
Establishment Address (number and street, city, state, zip code) 329 Main St, Vanderburgh, Indiana, 47708		(812-401-0175)		
Owner Adam Kunkle	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 03/18/2017	
Owner's Address 329 Main St, Vanderburgh, Indiana, 47708		Summary of Violations: C <u>0</u> NC <u>3</u> R <u>1</u>		
Person in Charge Matt Camp		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 Cory Statler				

- 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
218	NC		Three compartment sink and mechanical warewashing sanitizing dispensers need repair.	03/15/2017
402	NC		Floor by fryers needs smooth and cleanable surface.	03/29/2017
324	NC	R	Bar sink faucet leak needs reappear	03/15/2017

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



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Establishment Name China Experience & Yihi Japan		Telephone Number (513) 709-1190	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 11710
Establishment Address (number and street, city, state, zip code) 800 N Green River Rd, Evansville, IN, 47715		(513) 709-1190		
Owner Lin, Jie	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 03/18/2017	
Owner's Address 7908 Cincinnati Dayton Rd #A, West Chester, OH, 45069		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Lin, Jie		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 Urbano Rojas				

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Section#	C/NC	R	Narrative	To Be Corrected By
			Violation from 1/31/2017 corrected.	

Received by (name and title printed): Urbano Rojas	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name United Methodist Youth Home	Telephone Number (812-479-7535)	Date of Inspection (mm/dd/yr) 03/09/2017	ID # 11625
Establishment Address (number and street, city, state, zip code) 2521 N Burkhardt Rd, Evansville, IN, 47715	Owner (812-479-7535)	Follow-up No	
Owner United Methodist Youth Home	Purpose: <input checked="" type="checkbox"/> Routine	Release Date 03/19/2017	
Owner's Address 2521 N Burkhardt Rd, Evansville, IN, 47715	<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 0 R 0	
Person in Charge United Methodist Youth Home	<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 type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler Deshay Smith	<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): Deshay Smith	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Las Americas Tiendas Restaurant	Telephone Number (812-483-3483)	Date of Inspection (mm/dd/yr) 03/09/2017	ID # 11580
Establishment Address (number and street, city, state, zip code) 1016-A S Weinbach Ave, Evansville, IN, 47714	(812-475-3483)		
Owner Jose Miranda	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 03/19/2017
Owner's Address 1016-A S Weinbach Ave, Evansville, IN, 47715		Summary of Violations: C 0 NC 0 R 0	
Person in Charge Jose Miranda		Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Responsible Person's E-mail			
Certified Food Handler Jose Miranda			

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Section#	C/NC	R	Narrative	To Be Corrected By
			All violations from 02/22/2017 corrected.	

Received by (name and title printed): Jose Miranda	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Darmstadt Inn		Telephone Number (812-867-7300) <small>(Owner)</small> (812-708-0118)	Date of Inspection (mm/dd/yr) 03/10/2017	ID # 11543
Establishment Address (number and street, city, state, zip code) 13130 Darmstadt Rd, Evansville, IN, 47725		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	Release Date 03/20/2017
Owner Richard Kennedy - JLK Bar Holdings II Inc.			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Owner's Address 10833 Lilly Pad Rd, Elberfeld, IN, 47613			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 Richard Kennedy - JLK Bar Holdings II Inc.				
Responsible Person's E-mail				
Certified Food Handler Rick Kennedy				

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Section#	C/NC	R	Narrative	To Be Corrected By
			All violations from 03-02-17 corrected.	

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



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Establishment Name Cold Stone Creamery #2123		Telephone Number (812-461-0100) (812-454-0156)	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 11542
Establishment Address (number and street, city, state, zip code) 5435 Pearl Dr, Evansville, IN, 47712		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 03/18/2017
Owner Wayne Kinney			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Owner's Address 9210 Petersburg Rd, Evansville, IN, 47725			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 Wayne Kinney		Responsible Person's E-mail		
Certified Food Handler Jennifer Dillard				

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

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



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Establishment Name Starbucks Coffee Co #9759		Telephone Number (812-476-7385)	Date of Inspection (mm/dd/yr) 03/10/2017	ID # 11505
Establishment Address (number and street, city, state, zip code) 504 N Green River Rd, Evansville, IN, 47715		(206-318-8705)		
Owner Starbucks Coffee Company	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 03/20/2017	
Owner's Address PO Box 34442-Tax2, SEATTLE, WA, 98124		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Starbucks Coffee Company		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 Amanda Sibrel				

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

Received by (name and title printed): Tracee Griggs	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Gary's Parkway Pizza		Telephone Number (812-423-3339)	Date of Inspection (mm/dd/yr) 03/07/2017	ID # 11482
Establishment Address (number and street, city, state, zip code) 3911 Broadway Ave, Evansville, IN, 47712		(812-746-9717)		
Owner Gary Schnell	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 03/17/2017	
Owner's Address 1916 S Redbank Rd, Evansville, IN, 47712-4057		Summary of Violations: C 0 NC 0 R 0		
Person in Charge Gary Schnell		Menu Type (<i>See additional page</i>) 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 Gary Schnell				

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

Received by (name and title printed): Victor Hill	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):
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.

Form with fields for Establishment Name (Wolf's BBQ), Telephone Number (812-424-8891), Date of Inspection (03/09/2017), ID # (11454), Establishment Address (6600 First Ave, Evansville, IN, 47710), Owner (TERRY J WOLF & KIM L WOLF), Owner's Address (6600 N 1st Ave, Evansville, IN, 47710), Person in Charge (TERRY J WOLF & KIM L WOLF), Responsible Person's E-mail, Certified Food Handler (Ryan Wolf), Purpose (Routine checked), Follow-up, Complaint, Pre-Operational, Temporary, HACCP, Other (list), Follow-up No, Release Date (03/19/2017), Summary of Violations (C 0, NC 1, R 0), Menu Type (See additional page).

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Table with 4 columns: Section#, C/NC, R, Narrative, To Be Corrected By. Row 1: 234, NC, Improper storage of in-use utensils., Corrected.

Received by (name and title printed): Kim Wolf
Inspected by (name and title printed): Carol Coudret

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

cc: (three empty fields)



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Establishment Name Wendy's #327		Telephone Number (812-474-1184)	Date of Inspection (mm/dd/yr) 03/10/2017	ID # 11438
Establishment Address (number and street, city, state, zip code) 550 N Green River Rd, Evansville, IN, 47715		Owner (812-482-3212)	Follow-up No	
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)		Release Date 03/20/2017	
Owner's Address 4201 Mannheim Rd Suite A, Jasper, IN, 47546	Person in Charge SERVUS, Inc.		Summary of Violations: C 0 NC 0 R 0	
Responsible Person's E-mail			Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Certified Food Handler Nichole D Jones				

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

Received by (name and title printed): Nichole Jones	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Stans Original Una Pizza		Telephone Number (812-424-8882)	Date of Inspection (mm/dd/yr) 03/09/2017	ID # 11345
Establishment Address (number and street, city, state, zip code) 1101 Harmony Way, Evansville, IN, 47720		() Owner		
Owner Judy Roach	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 03/19/2017	
Owner's Address 10622 FERGUSON LN, Newburgh, IN, 47630		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Judy Roach	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 Judy Roach				

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

Received by (name and title printed): Judy Roach		Inspected by (name and title printed): Kelly Holzmeyer	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name University Food Mart		Telephone Number (812-473-3567)	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 11311
Establishment Address (number and street, city, state, zip code) 1701 Lincoln Ave, Evansville, IN, 47714		(812-473-3567)		
Owner Deveer Inc. d/b/a University Food Mart	Purpose: <input checked="" type="checkbox"/> Routine	Follow-up No	Release Date 03/18/2017	
Owner's Address 1701 Lincoln Ave, Evansville, IN, 47714	<input type="checkbox"/> Follow-up	Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Deveer Inc. d/b/a University Food Mart	<input type="checkbox"/> Complaint			
Responsible Person's E-mail	<input type="checkbox"/> Pre-Operational			
Certified Food Handler Romil Patel	<input type="checkbox"/> Temporary	Menu Type (See additional page)		
	<input type="checkbox"/> HACCP	1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
	<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): pkpatel	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc:



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Form with fields: Establishment Name (Reliable Adult Care), Telephone Number (812-477-1707), Date of Inspection (03/08/2017), ID # (11280), Establishment Address (5130 Vogel Rd #130, EVANSVILLE, IN, 47715), Owner (Chloericketts Inc), Purpose (Routine), Follow-up (0), NC (0), R (0), Person in Charge (Chloericketts Inc), Certified Food Handler (Chloe Ricketts).

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

Received by (name and title printed): Chloe Ricketts
Inspected by (name and title printed): Colin Ward
Received by (signature):
Inspected by (signature):
cc:



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Establishment Name Red Lobster # 0058		Telephone Number (812-477-9227)	Date of Inspection (mm/dd/yr) 03/06/2017	ID # 11278
Establishment Address (number and street, city, state, zip code) 4605 Bellemeade Ave., Evansville, IN, 47714		Owner (407-734-9652)	Follow-up No	
Owner Red Lobster Restaurants, LLC		Purpose: <input checked="" type="checkbox"/> Routine	Release Date 03/16/2017	
Owner's Address PO Box 6508, Orlando, FL, 32802-6508		<input type="checkbox"/> Follow-up	Summary of Violations: C 1 NC 0 R 0	
Person in Charge Red Lobster Restaurants, LLC		<input type="checkbox"/> Complaint		
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	Menu Type (See additional page)	
Certified Food Handler Kevin Warren		<input type="checkbox"/> Temporary	1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

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Section#	C/NC	R	Narrative	To Be Corrected By
187	C		Food not held at 41 degrees Fahrenheit or less at front server line and kitchen line.	Corrected

Received by (name and title printed): Kevin Warren	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Crazy Sake		Telephone Number (812-471-8886)	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 11221
Establishment Address (number and street, city, state, zip code) 5720 E Virginia St., Evansville, IN, 47715		(812-204-8279)		
Owner Yong Hua Liu	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 03/18/2017	
Owner's Address 3228 Oaklyn Dr, Evansville, IN, 47711		Summary of Violations: C <u>2</u> NC <u>1</u> R <u>0</u>		
Person in Charge Yong Hua Liu		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 Ting Wang				

- 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 back cooler.	Corrected
345	C		Hand sinks used for purposes other than hand washing.	Corrected
257	NC		Food temperature measuring device missing in various cooler units throughout kitchen.	03/08/2017

Received by (name and title printed): Yin Wan Lee		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
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Vanderburgh County Department of Health
Telephone 812-435-5695
Fax 812-435-5871

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Establishment Name Cork 'N Cleaver		Telephone Number (812-479-6974)	Date of Inspection (mm/dd/yr) 03/06/2017	ID # 11170
Establishment Address (number and street, city, state, zip code) 650 S Hebron Ave, Evansville, IN, 47714		(812-760-1435)		
Owner STEVEN M BENNETT	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 03/16/2017	
Owner's Address 1608 BROOKSIDE DR, Evansville, IN, 47714		Summary of Violations: C <u>2</u> NC <u>2</u> R <u>3</u>		
Person in Charge STEVEN M BENNETT			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				

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Section#	C/NC	R	Narrative	To Be Corrected By
187	C		Food not held at 41 degrees Fahrenheit or less within grill cooler.	Corrected
295	C	R	Soda dispenser in server area soiled.	03/07/2017
218	NC	R	Grill cooler in need of maintenance.	03/10/2017
431	NC	R	Back wall of kitchen area soiled.	03/07/2017

Received by (name and title printed): Billy Shirel	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 Chopstick House		Telephone Number (812-473-5551)	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 11151
Establishment Address (number and street, city, state, zip code) 5412 E Indiana St, Evansville, IN, 47715		Owner (812-473-5551)	Follow-up	Release Date 03/18/2017
Owner Eddie & Karen Kung		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 5 NC 2 R 2	
Owner's Address 5412 E Indiana St, Evansville, IN, 47715			Menu Type (See additional page)	
Person in Charge Eddie & Karen Kung			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				

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Section#	C/NC	R	Narrative	To Be Corrected By
118	C		Establishment does not have a certified food safety employee.	04/08/2017
204	C		Cooked chicken stored in ice with standing water. Removed.	Corrected
173	C		Improper storage of raw animal product in walk-in and reach-in coolers.	Corrected
191	C		Lacking date marking on food items in walk-in cooler.	03/08/2017
303	C	R	Sanitizing bucket not provided for food preparation line.	Corrected
245	NC	R	Rags for sanitizing stored outside of bucket when not in use.	Corrected
430	NC		Gap in threshold at back door.	03/15/2017

Received by (name and title printed): Eddie Kung		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Central High School		Telephone Number (812-435-8297)	Date of Inspection (mm/dd/yr) 03/09/2017	ID # 11137
Establishment Address (number and street, city, state, zip code) 5400 First Ave, EVANSVILLE, IN, 47710		(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 03/19/2017	
Owner's Address 951 Walnut St, Evansville, IN, 47713		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Evansville Vanderburgh School Corp.		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 Cindy Crabtree				

- 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): Cindy Crabtree	Inspected by (name and title printed): Carol Coudret
--	--

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

cc:	cc:	cc:
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Establishment Name Caze School K-5		Telephone Number (812-469-5080)	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 11134
Establishment Address (number and street, city, state, zip code) 2013 S Green River Rd, EVANSVILLE, IN, 47710		(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 03/18/2017
Owner's Address 951 Walnut St, Evansville, IN, 47713			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge Evansville Vanderburgh School Corp.		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 Lisa Shutt				

- 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
			No violations.	

Received by (name and title printed): Lisa Shutt		Inspected by (name and title printed): Kelly Holzmeier	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Leroy's Tavern		Telephone Number (812-464-8300)	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 11081
Establishment Address (number and street, city, state, zip code) 2659 Mt. Vernon Ave., Evansville, IN, 47712		(812-228-6454)		
Owner Terri Carl	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 03/18/2017	
Owner's Address 2659 Mt Vernon Ave, Evansville, IN, 47712		Summary of Violations: C 0 NC 0 R 0		
Person in Charge Terri Carl		Menu Type (See additional page) 1 0 2 0 3 ● 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler Sandy Miller				

- 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
			No noted violations.	

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



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Establishment Name HOLY ROSARY SCHOOL		Telephone Number () Establishment	Date of Inspection (mm/dd/yr) 03/09/2017	ID # 11038
Establishment Address (number and street, city, state, zip code) 1301 S Green River Rd, EVANSVILLE, IN, 47715		() Owner		
Owner HOLY ROSAY SCHOOL		Purpose: <input checked="" type="checkbox"/> Routine	Follow-up No	Release Date 03/19/2017
Owner's Address 1301 S Green River Rd, Evansville, IN, 47715		<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 0 R 0	
Person in Charge HOLY ROSAY SCHOOL		<input type="checkbox"/> Complaint		
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	Menu Type (See additional page)	
Certified Food Handler Lora Schutzius		<input type="checkbox"/> Temporary	1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input 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"
- 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): Lora Schutzius		Inspected by (name and title printed): Kelly Holzmeyer	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Holiday Retirement Village		Telephone Number (812-429-0701)	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 11035
Establishment Address (number and street, city, state, zip code) 1200 W Buena Vista, EVANSVILLE, IN, 47710		(812-429-0715)		
Owner Derek Dunigan	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 03/18/2017	
Owner's Address 1202 W Buena Vista Rd, Evansville, IN, 47710		Summary of Violations: C 0 NC 1 R 0		
Person in Charge Derek Dunigan		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 Brenda Potts				

- 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
291	NC		Chlorine test strips needed.	Corrected

Received by (name and title printed): Brenda Potts		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



Retail Food Establishment Inspection Report

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Establishment Name AIS 1st Ave		Telephone Number (812) 435-8611	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 11021
Establishment Address (number and street, city, state, zip code) 3013 First Ave, EVANSVILLE, IN, 47710		Owner (812) 435-8611		
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 03/18/2017
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 0 2 1 3 0 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Lechia Burkhart				

- 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): Barb Morehead	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Hardees		Telephone Number (812-477-6743)	Date of Inspection (mm/dd/yr) 03/09/2017	ID # 11008
Establishment Address (number and street, city, state, zip code) 1501 N Boeke Rd., Evansville, IN, 47711		Owner (812-477-5569)	Follow-up No	
Owner Sandy's Associates 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) _____	Release Date 03/19/2017	
Owner's Address 1503 N Boeke Rd, Evansville, IN, 47711			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge Sandy's Associates 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 Rita Lowry				

- 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
			All violation from 02/24/2017 corrected.	

Received by (name and title printed): Rita Lowery		Inspected by (name and title printed): Kelly Holzmeyer	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Happy Garden		Telephone Number (812-479-8933)	Date of Inspection (mm/dd/yr) 03/10/2017	ID # 11007
Establishment Address (number and street, city, state, zip code) 1927 Pollack Ave., Evansville, IN, 47714		() Owner		
Owner Zu Xing Zhang	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	Release Date 03/20/2017	
Owner's Address 1927 Pollack Ave, Evansville, IN, 47714		Summary of Violations: C 2 NC 1 R 0		
Person in Charge Zu Xing Zhang		Menu Type (See additional page) 1 <input 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 Yajuan Zheng				

- 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
191	C		Potentially hazardous food lacking date mark.	03/10/2017
431	NC		Fans in walk in cooler in need of cleaning.	03/16/2017
173	C		Food in walk in cooler unprotected from cross contamination.	03/10/2017

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



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Establishment Name Hacienda #8		Telephone Number (812-474-1635)	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 11001	
Establishment Address (number and street, city, state, zip code) 990 S Green River Rd, Evansville, IN, 47715		(574-272-5922)			
Owner HMR Acquisition Company, 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 03/18/2017	
Owner's Address 1501 N Ironwood Dr, SOUTH BEND, IN, 46635			Summary of Violations: C 1 NC 2 R 0		
Person in Charge HMR Acquisition Company, Inc.			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 Raquel Romoser					

- 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
293	NC		Ware washing sink used for hand washing.	Corrected
214	NC		Cutting board needs replaced.	03/15/2017
205	C		Tray poor condition.	Corrected

Received by (name and title printed): Pam Arvin		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Eagle Valley Golf Course		Telephone Number (812-867-7888)	Date of Inspection (mm/dd/yr) 03/10/2017	ID # 10938
Establishment Address (number and street, city, state, zip code) 10350 Petersburg Rd., Evansville, IN, 47725		Owner (812-867-7888)	Follow-up No	
Owner EAGLE VALLEY GOLF COURSE/DEAN BRINKER		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 03/20/2017	
Owner's Address 10350 Petersburg Rd, Evansville, IN, 47725			Summary of Violations: C 0 NC 0 R 0	
Person in Charge EAGLE VALLEY GOLF COURSE/DEAN BRINKER			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"
- 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): Shawn Spears	Inspected by (name and title printed): Kelly Holzmeyer
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Gardo's Italian Oven		Telephone Number (812-868-8071)	Date of Inspection (mm/dd/yr) 03/10/2017	ID # 10898
Establishment Address (number and street, city, state, zip code) 13220 Darmstadt Rd., Evansville, IN, 47725		Owner (812-454-7141)		
Owner Andy Guard		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 03/20/2017
Owner's Address 1050 W Bnvl-NH Rd, Evansville, IN, 47725			Summary of Violations: C 0 NC 0 R 0	
Person in Charge Andy Guard			Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Andy Guard				

- 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): Andy Guard		Inspected by (name and title printed): Ricardo Zacarias	
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 Buffalo Wild Wings #50		Telephone Number (812-423-9464)	Date of Inspection (mm/dd/yr) 03/06/2017	ID # 10888	
Establishment Address (number and street, city, state, zip code) 5405 Pearl Dr, Evansville, IN, 47712		Owner (952-593-9943)	Follow-up No		
Owner Buffalo Wild Wings		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 03/16/2017		
Owner's Address 5500 Wayzata Blvd Ste 1600, Minneapolis, MN, 55416			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Buffalo Wild Wings			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 Cathy Robison/Dan					

- 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): Cathy Robison	Inspected by (name and title printed): Ricardo Zacarias
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Biaggi's		Telephone Number (812-421-0800)	Date of Inspection (mm/dd/yr) 03/08/2017	ID # 10863	
Establishment Address (number and street, city, state, zip code) 6401 E Lloyd Expressway, Evansville, IN, 47715		(309-445-6632)			
Owner Biaggis Restaurante Italiano 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 Yes	Release Date 03/18/2017	
Owner's Address 1705 Clearwater Ave, Bloomington, IL, 61704			Summary of Violations: C <u>1</u> NC <u>0</u> R <u>1</u>		
Person in Charge Biaggis Restaurante Italiano 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 Cory Halbig					

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Section#	C/NC	R	Narrative	To Be Corrected By
294	C	R	Bar dish machine not properly dispensing sanitizer. Called for service.	03/10/2017

Received by (name and title printed): Adam Plocik		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	cc:



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Establishment Name Biaggi's		Telephone Number (812-421-0800)	Date of Inspection (mm/dd/yr) 03/10/2017	ID # 10863
Establishment Address (number and street, city, state, zip code) 6401 E Lloyd Expressway, Evansville, IN, 47715		Owner (309-445-6632)		
Owner Biaggis Restaurante Italiano LLC		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 No	Release Date 03/20/2017
Owner's Address 1705 Clearwater Ave, Bloomington, IL, 61704			Summary of Violations:	
Person in Charge Biaggis Restaurante Italiano LLC			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 Cory Halbig		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		

- 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
			Follow-up from inspection on 3/8/17. All violations corrected.	

Received by (name and title printed): Sonya Burkhart	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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Vanderburgh County Department of Health
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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 Spudz N Stuff		Telephone Number (812-228-1068)	Date of Inspection (mm/dd/yr) 03/06/2017	ID # 13402
Establishment Address (number and street, city, state, zip code) 3904 N First Ave, Evansville, IN, 47710		Owner (812-480-0344)	Follow-up	Release Date 03/16/2017
Owner Craig Wargel	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 0 NC 0 R 0		
Owner's Address 9015 Old State Rd, Evansville, IN, 47711		Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0		
Person in Charge Craig Wargel	Responsible Person's E-mail			
Certified Food Handler Vanessa Jones				

- 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
			Violation from 1-20-17 corrected.	

Received by (name and title printed): Craig Wargel	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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Telephone 812-435-5695
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Establishment Name: Home 2
Telephone Number: 812-303-1200
Date of Inspection: 03/07/2017
ID #: 13702
Establishment Address: 7901 E. Walnut St, Evansville, IN, 47715
Owner: Dunn Hospitality Group
Purpose: Routine
Follow-up: No
Release Date: 03/17/2017
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: Approved for operation.

Received by (name and title printed): Bruce Byrd
Inspected by (name and title printed): Colin Ward

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

cc: fields for distribution list