



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 Herradura		Telephone Number () Establishment 8124020355	Date of Inspection (mm/dd/yr) 02/14/2017	ID # 12298
Establishment Address (number and street, city, state, zip code) 4610 Bellemeade Ave, Evansville, IN, 47714		() Owner		
Owner Luis Antonio Perez	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 02/24/2017	
Owner's Address 4610 Bellemeade Ave, Evansville, IN, 47714		Summary of Violations: C 4 NC 2 R 0		
Person in Charge Luis Antonio Perez		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 Helen E. Robertson				

- 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
415	C		Fruit flies present at server station and bar area. Pest controll called.	02/21/2017
191	C		Items in walk-in coolers lacking date marking.	02/14/2017
324	C		Sink in employee restroom in need of repair.	02/21/2017
345	C		Hand sinks utilized for purposes other than hand washing.	02/14/2017
347	NC		Hand towels not provided for hand washing sinks at bar and back prep area.	Corrected
346	NC		Hand soap not provided in employee restroom.	Corrected

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



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Establishment Name TJ Maxx Cafe		Telephone Number (812-465-4985)	Date of Inspection (mm/dd/yr) 02/16/2017	ID # 11167
Establishment Address (number and street, city, state, zip code) 3301 Maxx Rd, EVANSVILLE, IN, 47711		Owner (270-683-2471)	Follow-up No	Release Date 02/26/2017
Owner CANTEEN Service 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) _____	Summary of Violations: C 2 NC 0 R 1	
Owner's Address PO Box 1785, Owensboro, KY, 42302			Menu Type (See additional page)	
Person in Charge CANTEEN Service Company			<input type="radio"/> 1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5	
Responsible Person's E-mail				
Certified Food Handler Paula Amspaugh				

- 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
344	C	R	Hand washing sink inaccessible.	Corrected
173	C		Ready to eat food unprotected from cross contamination.	Corrected

Received by (name and title printed): Rose Barnett		Inspected by (name and title printed): Carol Coudret	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	

