



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 Mary & Martha's		Telephone Number (812-602-5220)	Date of Inspection (mm/dd/yr) 03/23/2017	ID # 13151
Establishment Address (number and street, city, state, zip code) 1334 N. Green River Rd., Evansville, Indiana, 47715		Owner (812-589-6090)	Follow-up No	
Owner Ava Demps	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 04/02/2017	
Owner's Address 655 Line St., Evansville, Indiana, 47713			Summary of Violations: C 0 NC 0 R 0	
Person in Charge Ava Demps			Menu Type (See additional page) 1 0 2 0 3 ● 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Ava Demps				

- 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): Jonathan Holland		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)
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 J's Sportsbar & Grill	Telephone Number (812) 401-2268 (812) 401-2268	Date of Inspection (mm/dd/yr) 03/21/2017	ID # 12281
Establishment Address (number and street, city, state, zip code) 1602 S Vann Ave, Evansville, IN, 47714		Follow-up <div style="display: flex; justify-content: space-between;"> No Release Date 03/31/2017 </div>	
Owner John Higgins			
Owner's Address PO Box 5154, Evansville, IN, 47716		Summary of Violations: <div style="display: flex; justify-content: space-around; font-size: 2em;"> C <u>0</u> NC <u>0</u> R <u>0</u> </div>	
Person in Charge John Higgins			
Responsible Person's E-mail		Menu Type (See additional page) <div style="display: flex; justify-content: space-around;"> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> </div>	
Certified Food Handler Skylar Werne			

- 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
			Violation from 2/17/2017 fixed.	

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



Retail Food Establishment Inspection Report

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

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

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

Establishment Name Raffi's Oasis Café and Mediterranean Grille		Telephone Number (812-602-3660)	Date of Inspection (mm/dd/yr) 03/20/2017	ID # 12258
Establishment Address (number and street, city, state, zip code) 5702 E Virginia St, Evansville, IN, 47715		Owner (812-473-4529)	Follow-up No	
Owner Raffi Manna	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 03/30/2017		
Owner's Address 3819 E Mulberry St, Evansville, IN, 47714	Person in Charge Raffi Manna		Summary of Violations: C 0 NC 0 R 0	
Responsible Person's E-mail	Certified Food Handler		Menu Type (See additional page) 1 0 2 0 3 ● 4 0 5 0	

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

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

Received by (name and title printed): Raffi Manna	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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

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

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 Highland Inn		Telephone Number (812-909-1500)	Date of Inspection (mm/dd/yr) 03/22/2017	ID # 12126	
Establishment Address (number and street, city, state, zip code) 6620 N First Ave, Evansville, IN, 47710		Owner (812-909-1500)	Follow-up No		
Owner Rodney & Paige Miller		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 04/01/2017		
Owner's Address 6620 N 1st Ave, Evansville, IN, 47710			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Rodney & Paige Miller			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 A Miller					

- 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): Paige Miller		Inspected by (name and title printed): Carol Coudret	
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 Crazy Buffet II		Telephone Number (812-437-5050)	Date of Inspection (mm/dd/yr) 03/24/2017	ID # 12048
Establishment Address (number and street, city, state, zip code) 5435 Pearl Dr Ste 3D, Evansville, IN, 47712		Owner (917-770-4643)	Follow-up Yes	
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)		Release Date 04/03/2017	
Owner's Address 2433 Waterfront Way, Evansville, IN, 47715	Person in Charge Yong Hua Liu		Summary of Violations: C 3 NC 2 R 5	
Responsible Person's E-mail	Certified Food Handler Yao Chen		Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	

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

Section#	C/NC	R	Narrative	To Be Corrected By
191	C	R	Potentially hazardous food in walk in cooler lacking date marking.	03/24/2017
187	C	R	Cold food not being maintained at the required temperature.	03/24/2017
413	NC	R	Kitchen back screen door needs proper seal and self-closure device.	03/24/2017
177	C	R	Food in walk in freezer not stored 6-inch off the floor.	Corrected
234	NC	R	Bulk container scoop lacking proper handle.	Corrected

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



Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
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 Firehouse Subs		Telephone Number (812-477-2141)		Date of Inspection (mm/dd/yr) 03/23/2017		ID # 12009	
Establishment Address (number and street, city, state, zip code) 1031 N Green River Rd. #102, Evansville, IN, 47715				Owner (812-774-1080)			
Owner Amanda Shaver		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 04/02/2017		Release Date 04/02/2017	
Owner's Address 6131 Knight Dr, Evansville, IN, 47715		Person in Charge Amanda Shaver		Summary of Violations: C 1 NC 1 R 0			
Responsible Person's E-mail				Menu Type (<i>See additional page</i>) 1 0 2 0 3 1 4 0 5 0			
Certified Food Handler John Shaver		<ul style="list-style-type: none"> • 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
303	C		Chemical sanitizer bucket not provided for wiping cloths at front line.	Corrected
245	NC		No wiping cloths available for sanitizing buckets.	Corrected

Received by (name and title printed): Rob Gibson	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)
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 Cheddars		Telephone Number (812-491-9976)	Date of Inspection (mm/dd/yr) 03/21/2017	ID # 11993
Establishment Address (number and street, city, state, zip code) 2100 N Green River Rd, Evansville, IN, 47715		(859-269-1966)		
Owner Mint Julep Rest Opr LLC		Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 03/31/2017
Owner's Address 866 Malabu Dr #250, Lexington, KY, 40502			Summary of Violations: C 0 NC 2 R 1	
Person in Charge Mint Julep Rest Opr 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 Dee A Merry				

- 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
256	NC	R	Reach in coolers lacking thermometer.	Corrected
341	NC		Reach in cooler in need of cleaning.	Corrected

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



Retail Food Establishment Inspection Report

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

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

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

Establishment Name North Jr High School 7-8	Telephone Number (812-435-0976)	Date of Inspection (mm/dd/yr) 03/23/2017	ID # 11973
Establishment Address (number and street, city, state, zip code) 15325 N Highway 41, Evansville, IN, 47725	Owner (812-435-8453)	Follow-up No	
Owner Evansville Vanderburgh School Corp.	Purpose: <input checked="" type="checkbox"/> Routine	Release Date 04/02/2017	
Owner's Address 951 Walnut St, Evansville, IN, 47713	<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 0 R 0	
Person in Charge Evansville Vanderburgh School Corp.	<input type="checkbox"/> Complaint	Menu Type (See additional page)	
Responsible Person's E-mail	<input type="checkbox"/> Pre-Operational	1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler Donna Weber	<input type="checkbox"/> Temporary		
	<input type="checkbox"/> HACCP		
	<input type="checkbox"/> Other (list)		

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

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

Received by (name and title printed): donna weber	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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

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

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

Establishment Name Cleavers		Telephone Number (812-473-0001)	Date of Inspection (mm/dd/yr) 03/20/2017	ID # 11958
Establishment Address (number and street, city, state, zip code) 5501 E Indiana St, Evansville, IN, 47715		Owner (812-459-2068)		
Owner Richard Flores	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 03/30/2017	
Owner's Address 14 S Thomas Ave, Evansville, IN, 47714		Summary of Violations: C 2 NC 1 R 2		
Person in Charge Richard Flores		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
303	C	R	Chemical sanitizer bucket not provided for wiping cloths.	Corrected
295	C	R	Can opener and vegetable slicer soiled.	03/20/2017
389	NC		Refuse area not properly maintained.	03/21/2017

Received by (name and title printed): Rick Flores	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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

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

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 Taj Mahal		Telephone Number (812-476-5000)	Date of Inspection (mm/dd/yr) 03/22/2017	ID # 11724
Establishment Address (number and street, city, state, zip code) 900 E Tutor Ln, Evansville, IN, 47715		Owner (309-533-5322)	Follow-up No	
Owner Harjit Singh		Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Release Date 04/01/2017	
Owner's Address 3788 Trey Ct, Newburgh, IN, 47630			Summary of Violations: C 3 NC 0 R 3	
Person in Charge Harjit Singh			Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Dharminder Singh				

- 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
191	C	R	Food items in walk-in cooler lacking date marking.	03/22/2017
177	C	R	Food items in walk-in cooler not covered.	Corrected
294	C	R	Dish machine not dispensing sanitizer. Called for repairs.	03/24/2017

Received by (name and title printed): Harjit Singh	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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

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

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 Thunderbolt Pass Golf Course		Telephone Number (812-426-2166)	Date of Inspection (mm/dd/yr) 03/21/2017	ID # 11719
Establishment Address (number and street, city, state, zip code) 6901 Petersburg Rd, Evansville, IN, 47711		() Owner		
Owner Evansville Vanderburgh Airport Authority		Purpose: <input checked="" type="checkbox"/> Routine	Follow-up No	Release Date 03/31/2017
Owner's Address 7801 BUSSING DR, Evansville, IN, 47725		<input type="checkbox"/> Follow-up	Summary of Violations:	
Person in Charge Evansville Vanderburgh Airport Authority		<input type="checkbox"/> Complaint	C <u>0</u> NC <u>0</u> R <u>0</u>	
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	Menu Type (See additional page)	
Certified Food Handler Patrick Montgomery		<input type="checkbox"/> Temporary	1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input 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 noted violations.	

Received by (name and title printed): Patrick Montgomery		Inspected by (name and title printed): Carol Coudret	
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 Madeleines		Telephone Number (812-491-8611)	Date of Inspection (mm/dd/yr) 03/23/2017	ID # 11500
Establishment Address (number and street, city, state, zip code) 423 SE Second Street, Evansville, IN, 47713		(812-459-4124)		
Owner Tyra Sikkink	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 04/02/2017
Owner's Address 300 CHANDLER #A, EVANSVILLE, IN, 47713			Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>	
Person in Charge Tyra Sikkink			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 Cullen Ruddell				

- 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 noted.	

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



Retail Food Establishment Inspection Report

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

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

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

Establishment Name Wesselmans Sonntag		Telephone Number (812-424-3549)	Date of Inspection (mm/dd/yr) 03/23/2017	ID # 11442
Establishment Address (number and street, city, state, zip code) 700 Sonntag Ave., EVANSVILLE, IN, 47712		(812-479-0993)		
Owner WINKLER 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	Release Date 04/02/2017	
Owner's Address 5011 Washington Ave #6, Evansville, IN, 47715		Summary of Violations: C <u>2</u> NC <u>0</u> R <u>0</u>		
Person in Charge WINKLER INC		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler John Helfrich				

- 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
187	C		Hot food not maintained at required temp.	Corrected
191	C		Items in reach in deli case lacking date marking	Corrected

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



Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
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 Washington School 6-8		Telephone Number (812-469-5090)	Date of Inspection (mm/dd/yr) 03/21/2017	ID # 11432
Establishment Address (number and street, city, state, zip code) 1801 Washington Ave., EVANSVILLE, IN, 47714		Owner (812-435-8453)	Follow-up No	
Owner Evansville Vanderburgh School Corp.		Purpose: <input checked="" type="checkbox"/> Routine	Release Date 03/31/2017	
Owner's Address 951 Walnut St, Evansville, IN, 47713		<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 0 R 0	
Person in Charge Evansville Vanderburgh School Corp.		<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 Jo McQuilling		<input type="checkbox"/> Temporary		
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

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

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

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



Retail Food Establishment Inspection Report

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

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

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

Establishment Name KFC/TACO BELL #C119005		Telephone Number (812-422-2153)	Date of Inspection (mm/dd/yr) 03/20/2017	ID # 11384
Establishment Address (number and street, city, state, zip code) 4422 W Lloyd Expressway, Evansville, IN, 47712		(812-422-2153) Owner (503-722-2525)		
Owner Bell Indiana LLC		Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 03/30/2017
Owner's Address PO BOX 507, WEST LINN, OR, 97068			Summary of Violations: C 0 NC 1 R 1	
Person in Charge Bell Indiana LLC			Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Responsible Person's E-mail				
Certified Food Handler Robert Williams				

- 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
431	NC	R	Floors soiled or holding water throughout, new cleaning procedures are being established per new management.	Corrected

Received by (name and title printed): David Benjamin		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 Stockwell Inn	Telephone Number (812) 476-2384	Date of Inspection (mm/dd/yr) 03/20/2017	ID # 11355
Establishment Address (number and street, city, state, zip code) 4001 E Eichel Ave., EVANSVILLE, IN, 47715		Owner (812) 483-7504	
Owner Ricjo, Inc dba Stockwell Inn	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 03/30/2017
Owner's Address 3155 GRACELAND CT, NEWBURGH, IN, 47630	Summary of Violations: C <u>2</u> NC <u>1</u> R <u>0</u>		
Person in Charge Ricjo, Inc dba Stockwell Inn	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 Robin Beaven			

- 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
303	C		No sanitizing container provided for wipe cloths.	Corrected
431	NC		Stainless steel wall/barrier by fryer and grill soiled.	03/24/2017
204	C		Can & bottle drinks submerged in melted ice water. Needs drained.	Corrected

Received by (name and title printed): Robin Beaven	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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

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

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 Sonic Drive-In #106		Telephone Number (812-473-4310)	Date of Inspection (mm/dd/yr) 03/21/2017	ID # 11330
Establishment Address (number and street, city, state, zip code) 830 N Burkhardt Rd, Evansville, IN, 47715		Owner (316-462-5135)	Follow-up No	Release Date 03/31/2017
Owner Sonic Drive-In of Evansville 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) _____	Summary of Violations: C 2 NC 2 R 2	
Owner's Address 208 S Maize Rd, WICHITA, KS, 67209			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 Sonic Drive-In of Evansville Inc				
Responsible Person's E-mail				
Certified Food Handler Aaron Market				

- 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
295	C	R	Beverage dispensers show signs of soil build-up.	03/21/2017
431	NC	R	Hood vents soiled.	03/21/2017
389	NC		Refuse area not properly maintained.	03/22/2017
324	C		Grease trap information log not maintained.	03/30/2017

Received by (name and title printed): Aaron Market		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)
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 Sam's Club #8123		Telephone Number (812-473-2518)	Date of Inspection (mm/dd/yr) 03/20/2017	ID # 11294
Establishment Address (number and street, city, state, zip code) 6700 E Virginia St., Evansville, IN, 47715		() Owner 479-204-4738		
Owner Sam's East 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 03/30/2017	
Owner's Address 508 SW 8th St, Bentonville, AR, 72716-0500		Summary of Violations: C 0 NC 0 R 0		
Person in Charge Sam's East Inc.		Menu Type (See additional page) 1 0 2 0 3 ● 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler Trina Friedlund				

- 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): Billy Mickel		Inspected by (name and title printed): Colin Ward	
Received by (signature):		Inspected by (signature):	
cc:	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 Carrousel		Telephone Number (812-479-6388)	Date of Inspection (mm/dd/yr) 03/21/2017	ID # 11129
Establishment Address (number and street, city, state, zip code) 5115 Monroe Ave., Evansville, IN, 47715		Owner (812-479-6388)		
Owner Dilip Patel	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 03/31/2017	
Owner's Address 5115 Monroe Ave, Evansville, IN, 47715		Summary of Violations: C 0 NC 3 R 2		
Person in Charge Dilip Patel		Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0		
Responsible Person's E-mail				
Certified Food Handler Jeff Cline				

- 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
256	NC	R	Temperature measuring devices missing from walk-in coolers.	03/22/2017
347	NC		Lacking proper hand drying provisions at sink.	03/22/2017
218	NC	R	Seals on walk-in units in disrepair.	03/24/2017

Received by (name and title printed): Misty Hudson		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)
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 Domino's Pizza #2574		Telephone Number (812-423-5511)	Date of Inspection (mm/dd/yr) 03/22/2017	ID # 10922
Establishment Address (number and street, city, state, zip code) 5714 First Ave, Evansville, IN, 47710		() Owner		
Owner E`-VILLE PIZZA, INC	Purpose: <input checked="" type="checkbox"/> Routine	Follow-up No	Release Date 04/01/2017	
Owner's Address 1021 Broadway, BOWLING GREEN, KY, 42104	<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 1 R 0		
Person in Charge E`-VILLE PIZZA, INC	<input type="checkbox"/> Complaint			
Responsible Person's E-mail	<input type="checkbox"/> Pre-Operational			
Certified Food Handler Terry Hester	<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)			

- 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
138	NC		Beard guards not available.	03/23/2017

Received by (name and title printed): Bo Cline	Inspected by (name and title printed): Carol Coudret
Received by (signature):	Inspected by (signature):
cc:	cc:



Retail Food Establishment Inspection Report

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

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

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

Establishment Name Denny's #244		Telephone Number (812-473-1063)	Date of Inspection (mm/dd/yr) 03/20/2017	ID # 10902
Establishment Address (number and street, city, state, zip code) 351 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 03/30/2017	
Owner's Address 4201 Mannheim Rd Suite A, Jasper, IN, 47546			Summary of Violations: C 0 NC 1 R 1	
Person in Charge SERVUS, Inc.			Menu Type (See additional page)	
Responsible Person's E-mail			1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler Steve Grove				

- 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
295	NC	R	Inside of reach-in cooler soiled.	03/21/2017

Received by (name and title printed): Steve Grove	Inspected by (name and title printed): Colin Ward
Received by (signature):	Inspected by (signature):
cc:	cc:

