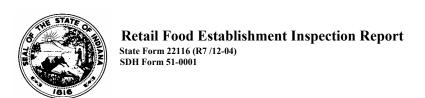


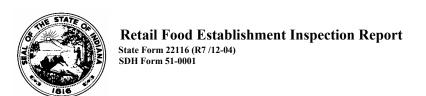
Establishm	ent Name			Telephone Number	Date of Ins		ID#
Gale's	s Spe	eci	alty Popcorn	812-454-5880	(mm/dd/yr	,	13324
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	(04) Owner 4 5000	04/17	/2017	
800 N.	Greer	ı Ri	ver Rd., Evansville, Indiana, 47715	<sup>(</sup> 812 <sup>-</sup> 454-5880			
Owner				Purpose:	Follow-up		se Date
Gale I		r		Routine	No	04/	27/2017
Owner's A		110	adous Dr. Evanovilla Indiana 47705	Follow-up	Summary	of Violation	ns:
		ivie	adows Dr., Evansville, Indiana, 47725	Complaint	$\cap$	(	) ()
Person in C Gale H		r		Pre-Operational	C	NC_	0 R 0
Responsible			ii	Temporary	Menu Tyr	ne <i>(See addi</i>	tional page)
responsible	er erson s		•	НАССР	- Mena 1yp		nonui puge)
Certified F	ood Handl	er		Other (list)	$1\bigcirc_2$	$\bigcirc_3$ $\bigcirc$	$_{4}\bigcirc_{5}\bigcirc$
Gale V	V. Har	pe	r			<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				orrected By
Sections	Circ		No violations			10 20 00	Arected By
			140 Violations	•			
-							
Received by		_		Inspected by (name and title p			
Gale	Har	pe	r	Kelly Holzm	eyer		
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm McAli		<u>.</u> Г	)eli	Telephone Number	Date of Ins (mm/dd/yr		тр# 13318
			mber and street, city, state, zip code)	812-228-4222	04/21	/2017	13310
5301	Pearl	Dr	Ste 100, Evansville, IN, 47712	812-319-1714			
Owner	nvestr	nΔ	nts, Inc.	Purpose:	Follow-up No		se Date 01/2017
Owner's A		110	1113, 1110.	Routine			
		Gat	te, Evansville, IN, 47725	Follow-up Complaint		of Violation	
Person in C	Charge			Pre-Operational	$\begin{bmatrix} c \end{bmatrix}$	$_{\rm NC}$ (	$\frac{1}{R}$
			nts, Inc.	Temporary			
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)
Certified F	ood Handl	er		Other (list)	10,0	$\bigcirc_{3}$	$)_{4}\bigcirc_{5}\bigcirc$
Mitch I			ng	<u> </u>		<u></u>	<u> </u>
Î			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
			No noted violation	ons.			
Received by Mitch			printed): erlong	Inspected by (name and title p Ricardo Zao			
Received by			J	Inspected by (signature):			
cc:			cc:		cc:		



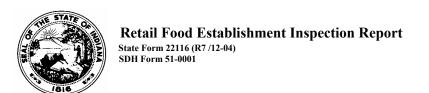
Establishm		na	Kitchen LLC "Chef Bruce Li"	Telephone Number	Date of Ins (mm/dd/yr		ID#
			mber and street, city, state, zip code)	812-618-6816	U <del>4</del> /11	/2017	13198
			race, Evansville, Indiana, 47715	812-618-6816			
Owner				Purpose:	Follow-up		se Date
Hu Li Owner's A	J J			Routine	No		27/2017
		r T	race, Evansville, IN, 47715	Follow-up		of Violatio	
Person in C			,	Complaint Pre-Operational	$\mathbf{L}_{\mathbf{C}}\mathbf{U}$	NC (	$\frac{1}{R}$
Hu Li				Temporary	<u> </u>	NC	K
Responsibl	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
			_	Other (list)	-		$\bigcap$
Certified F Hu Li	ood Handl	er			1 2	<u> </u>	<u>/405</u>
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATEL	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
			All violations from 4/10/20	17 corrected.			
Received by	_ `	l title j		Inspected by (name and title policy Holzm			
Received by	-	):		Inspected by (signature):	- <u> </u>		
				•			
cc:			cc:		cc:		



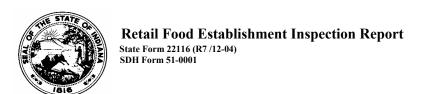
Fireh		Sı	ıbs	Telephone Number (812-401-0670	Date of Ins (mm/dd/yr)	j	тр# 12148
			mber and street, city, state, zip code)		U T/ Z I	/2017	12110
222 S			nk Rd, Evansville, IN, 47712	812-794-1080			
Owner	40 CF		0.5	Purpose:	Follow-up		se Date
Aman		ıav	<u>er                                    </u>	Routine	No	05/	01/2017
Owner's Ac		t, E	Evansville, IN, 47715	Follow-up Complaint	Summary	of Violation	_
Person in C		21/	er.	Pre-Operational	$c_{\rm C}$	NC_	$\frac{\mathbf{J}}{\mathbf{R}}$
Responsible				Temporary	Menu Tyn	e (Soo addi	tional page)
Kesponsible	c i cison s	L-ma	u	HACCP	wienu ryp	c (Bee uuui	nonai page)
Certified Fo				Other (list)	$1 \bigcirc 2$	$\bigcirc_3$	$)_4$ $\bigcirc_5$ $\bigcirc$
John S	mave						
• CRITICAL	LITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	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
			No noted violation	ons.			
D' 11	(	4:41	original Div	T	i44)		
Received by Chris	,		Keene	Ricardo Zac		;	
Received by				Inspected by (signature):			
cc:			cc:		cc:		



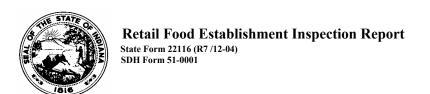
			<u> </u>				
Establishme		ام	eum Inc.	Telephone Number	Date of Ins (mm/dd/yr		то# 12086
				812-402-8210	04/20	/2017	12000
		,	mber and street, city, state, zip code) ON Ave, Evansville, IN, 47712	<sup>(</sup> 812 <sup>-</sup> 774-0946			
Owner				Purpose:	Follow-uj	p Releas	se Date
Jagir S	Singh			<b>✓</b> Routine	No	04/	30/2017
Owner's Ac	ddress			Follow-up	Summary	of Violation	ns:
5424 (	Chest	ert	on PI, Indianapolis, IN, 46237	Complaint	4		
Person in C			•	Pre-Operational		NC_	<b>3</b> , 3
Jagir S	Singh				C	. NC	K
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР		$\sim$	
Certified Fo	ood Handl	er		Other (list)	1 <u>0</u> 2	<u>3</u>	<u>)4U5U</u>
n/a							
• CRITICAL	L ITEMS AF	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	N(S) REPE	ATEL	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
346	NC	R	Back room hand sink lacki	ng hand soap.		Co	rrected
347	NC	R	Back room hand sink lacking of	disposable towels.		Co	rrected
347	NC	R	Self service sink lacking dis	posable towels.		Co	rrected
438	С		Containers used for powder deterge	nt lacking product	label.	Co	rrected
Received by	(name and	title	printed):	Inspected by (name and title p			
harry	sing	gh		Ricardo Zac	arias	3	
Received by				Inspected by (signature):			
cc:			cc:		cc:		



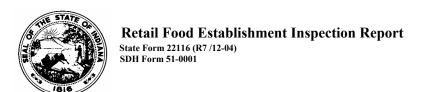
Establishm				Telephone Number	Date of Insp	ection	ID#
MJ´s	Café			812-402-6313	(mm/dd/yr)	2047	11902
			mber and street, city, state, zip code)	(812-459-4517	04/19/	2017	
801 S	t Mar	y´S	Dr, Evansville, IN, 47714	812-459-4517			
Owner	<i>.</i> 10 F		LICAAANINI	Purpose:	Follow-up		se Date
		3K	UGMANN	<b>✓</b> Routine	No	04/	29/2017
Owner's A			Od Evenoville INL 47700	Follow-up	Summary o	f Violation	is:
		a r	Rd, Evansville, IN, 47720	Complaint	$\cap$	(	) (
Person in C		3RI	UGMANN	Pre-Operational	C	NC_	P R U
Responsible	e Person's	E-ma	il	Temporary	Menu Type	(See addi	tional page)
				HACCP		\ G	
Certified For Rache			r Baysinger	Other (list)	1 <u>0</u> 2	<u>3</u>	<u> 14050</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
					ID IN THE NA		DELOW AC 4D*
			PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No violations	•			
							_
Received by	(name and	title 1	orinted):	Inspected by (name and title p	rinted):		
-		_		Kelly Holzm			
Received by			, ,	Inspected by (signature):			
cc:			сс:		cc:		



Establishm Harbo		1 v	Vorth	Telephone Number (812-423-0050	Date of Ins (mm/dd/yr	·j	то# 11899
			mber and street, city, state, zip code)		04/20	/2017	11000
		,	e, Evansville, IN, 47710	812-426-0133			
Owner	Ptiolo:			Purpose:	Follow-u		se Date
Paul S				Routine	No		30/2017
		Αv	e, EVANSVILLE, IN, 47710	Follow-up	Summary	of Violatio	
Person in C	Charge		<u> </u>	Complaint Pre-Operational	$\begin{bmatrix} 0 \end{bmatrix}$	NC_	l <sub>b</sub> 1
Paul S				Temporary	C		
Responsibl	e Person's	E-mai	il	НАССР	Menu Typ	oe (See addi	tional page)
Certified F	ood Handl	er		Other (list)	$10^{\circ}$	$\bigcirc_3$ ( $\bullet$	$)_4\bigcirc_5\bigcirc$
Mark S						<u></u>	<u>/ 4                                   </u>
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"	•		
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	UMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
430	NC	R	Counter tops in wait station	in need of repair.		05/2	22/2017
Received by M. Li	_	-		Inspected by (name and title p			
Received by			<u> </u>	Inspected by (signature):			
cc:			cc:	<u> </u>	cc:		



			• • •	•			
Head Head		Pizz	za	Telephone Number (812-437-4343	Date of Insp (mm/dd/yr)		1D# 11881
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	812-437-4343	04/19/	/2017	
	3 N F	ırsı	t Ave, Evansville, IN, 47710				<u> </u>
Owner Dougl	as Hu	ınte	er	Purpose:  Routine	Follow-up		se Date //29/2017
Owner's Ac	ddress			Follow-up	Summary		
4120 l	N 1st	A۷	e, Evansville, IN, 47710	Complaint	•	_	_
Person in Cougli		ınta	ar .	Pre-Operational	$c_{\underline{U}}$	NC_	$\frac{1}{R}$
Responsible				Temporary	Menu Tyn	e (See addi	tional page)
Responsible	c i cison s	L-1114		НАССР	wienu Typ	c (See addi	nonui puge)
Certified Fo				Other (list)	$_{1}\bigcirc_{2}$	$\bigcirc_3$ $\bigcirc$	$)_4\bigcirc_5\bigcirc$
James	Benr	<u>iing</u>	yton				
• CRITICAL	LITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
• VIOLATIC	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI	UMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violati	ions.			
Received by	(name and	title 1	printed):	Inspected by (name and title p	rinted):		
Jay É		_		Carol Coudr			
Received by		•	<del>y</del>	Inspected by (signature):			
cc:			cc:	<u>I</u>	cc:		



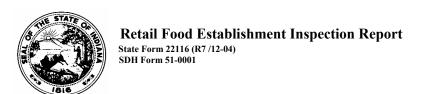
			• •					
Establishmo Mann		edi	terranean Grill	Telephone Number 812-473-70	$\cap E$	Date of Inspec (mm/dd/yr) 04/17/2		11749
			mber and street, city, state, zip code) Ave, Evansville, IN, 47714	(812-476-76		04/17/2	017	
Owner Amjac	l Man	na		Purpose:	]	Follow-up No		ne Date 27/2017
Owner's Ad		າ, E	Evansville, IN, 47715	Follow-up Complaint	5	Summary of	_	
Person in C		na		Pre-Operational  Temporary	•	<u>c_U</u>	NC_	$\frac{1}{R}$
Responsible	e Person's	E-ma	il	HACCP	1	Menu Type (	See addii	tional page)
Certified Fo			manna	Other (list)	1	1 <u>0</u> 2 <u></u>	<u>)</u> 3 <u>•</u>	<u>)</u> 4 <u>U</u> 5 <u>U</u>
• CRITICAL	ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS					_
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	UMMARY OF VIOLATIONS	" AND			
Section#	C/NC	R	Narrative			T	o Be Co	orrected By
			No noted violat	ions.				
Received by	(name and	title	printed):	Inspected by (name and ti	itle prin	itad):		
Amja				Kelly Holz	_			
Received by	(signature	):		Inspected by (signature):				
cc:			cc:	1	(	cc:		



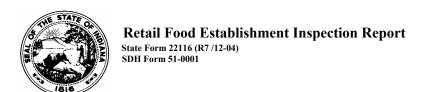
Establishment Name Stop & Go  Establishment Address (number and street, city, state, zip code) 520 S Barker Ave, Evansville, IN, 47712  Owner Sumit Patel  Owner's Address 670 Lincoln Ave, Evansville, IN, 47713  Person in Charge Sumit Patel  Responsible Person's E-mail  Certified Food Handler  Telephone Number (812-421-8190 (847-909-8833)  Purpose:  Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u Yes Summary	p Release 04/	11521 11521 See Date 130/2017 Ins:
Establishment Address (number and street, city, state, zip code) 520 S Barker Ave, Evansville, IN, 47712  Owner Sumit Patel  Owner's Address 670 Lincoln Ave, Evansville, IN, 47713  Person in Charge Sumit Patel  Responsible Person's E-mail  Responsible Person's E-mail  Responsible Person's E-mail  Responsible Person's E-mail	Follow-u Yes Summary	P Release 04/	se Date 30/2017 ns:
520 S Barker Ave, Evansville, IN, 47712  Owner Sumit Patel  Owner's Address 670 Lincoln Ave, Evansville, IN, 47713  Person in Charge Sumit Patel  Responsible Person's E-mail  Pre-Operational  Temporary  HACCP	Follow-u Yes Summary C_1	of Violation	(30/2017 ns:
Owner Sumit Patel  Owner's Address 670 Lincoln Ave, Evansville, IN, 47713  Person in Charge Sumit Patel  Responsible Person's E-mail  Purpose:  Routine  Follow-up  Complaint  Pre-Operational  Temporary  HACCP	Yes Summary C_1	of Violation	(30/2017 ns:
Owner's Address 670 Lincoln Ave, Evansville, IN, 47713  Person in Charge Sumit Patel  Responsible Person's E-mail  Follow-up Complaint Pre-Operational Temporary HACCP	Summary  C_1	of Violatio	ns:
670 Lincoln Ave, Evansville, IN, 47713  Person in Charge Sumit Patel  Responsible Person's E-mail  Pre-Operational Temporary HACCP	c_1	NC_	
Person in Charge Sumit Patel  Responsible Person's E-mail  Pre-Operational Temporary HACCP			$\frac{3}{R}$
Responsible Person's E-mail  Responsible Person's E-mail  HACCP			$R_{\rm R}$
Responsible Person's E-mail  HACCP	Menu Tyj	na (Caa addi	
HACCP		be isee aaai	tional page)
Contified Food Handler Other (list)			
Certifica Food Hallater	$1 \bigcirc 2$	$\bigcirc_3$	<u>)4050</u>
Fastilia Decastro			
• 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" A	ND IN THE N		
Section# C/NC R Narrative			orrected By
256 NC Back room reach in freezer thermometer not working, need fix or place a the	rmometer	04/2	27/2017
inside the unit.			
173 C Improper storage of chicken and meat while thawir	ng.	Co	rrected
146 NC Lack of labeling of hazardous food in the back room reach in	cooler.	Co	rrected
256 NC Back room reach in cooler lacking temperature measuring	device.	04/2	27/2017
Received by (name and title printed):  Inspected by (name and title printed)			
parmod solanki Ricardo Zad	carias	3	
Received by (signature):  Inspected by (signature):			
cc: cc:	cc:		



Establishm		عطا	nouse	Telephone Number	Date of Ins (mm/dd/yr		ID#
			mber and street, city, state, zip code)	812-477-7427		/2017	11393
7900	Eagle	Cı	rest, EVANSVILLE, IN, 47716	(502-855-5512			
Owner				Purpose:	Follow-uj		se Date
Texas		dha	ouse	Routine	No	05/	01/2017
Owner's A		ุกล	ns Ln , LOUISVILLE, KY, 40205	Follow-up		of Violation	
Person in C		Πα	110 211, 20010 11222, 111, 10200	Complaint	2		$\frac{2}{R}$
Texas	Road	dho	ouse	Pre-Operational Temporary	<u>C —</u>	. NC_=	_ R
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	oe (See addi	tional page)
Certified F	1 77 11			Other (list)	100	$\bigcirc$	$\bigcap_{i}$
Rod P						<u> </u>	<u>/4050</u>
• CRITICAI	L ITEMS AF	RE IDI	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 Co	orrected By
294	С		Chemical sanitizer for wiping	cloths too weak.		Co	rrected
345	С		Hand sink at bar area used for purposes	s other than hand wa	ashing.	Co	rrected
422	NC		Improper storage of persona	al clothing item.		Co	rrected
430	NC		Grouting near ware-washing are	ea in need of repai	r.	05/1	12/2017
						- I	
						- I	
						·	
Received by Matt				Inspected by (name and title policy Colin Ward	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



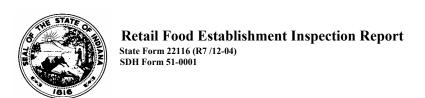
Establishm				Telephone Number	Date of Insp		ID#
Talk d	of the	T (	own Pizza Bar	812-402-8696	(mm/dd/yr)		11387
			mber and street, city, state, zip code)	(812-453-6350	1 07/21/	2017	
1200 l	Edgaı	-, E	Evansville, IN, 47710	812-453-6350			
Owner				Purpose:	Follow-up		se Date
Tott P		<u> </u>	j.	Routine	No	05/	01/2017
Owner's Ac	ddress			Follow-up	Summary o	of Violation	ns:
				Complaint	$\cap$	1	
Person in C Kira Ir				Pre-Operational	$_{\rm C}$	NC_	$R_{\underline{U}}$
Responsible		E ma	:1	Temporary	Manu Trin		tional page)
Kesponsibio	e rerson's	c-ilia	II	HACCP	Menu Type	(see aaai	uonai page)
Certified F	ood Handle	er		Other (list)	1()2(	$\bigcirc_3$ ( $\bullet$	$)_4\bigcirc_5\bigcirc$
			otaining	Change ofownership	1	<u></u>	<u> </u>
•			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	AARKED "C"			
					ID IN THE N	DD ATIME	DELOW AC "D"
			PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MIMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative	and a Sala	<del></del>		orrected By
346	NC		Lacking soap at ha	na sink.			rrected
					<del></del>		
					$\longrightarrow$		
Steve Steve	`	-		Inspected by (name and title processed in Coudr			
Received by				Inspected by (signature):			
cc:			cc:		cc:		



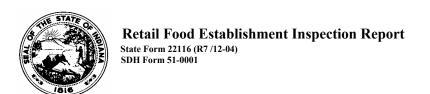
Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#
			#28904	812-423-8226	04/20/		11380
			mber and street, city, state, zip code) and St, Evansville, IN, 47712	(503-722-2825	04/20/	2017	
Owner	ا ما ا			Purpose:	Follow-up		se Date
Bell In		<u>} Ll</u>		<b>✓</b> Routine	No		30/2017
		)7	WEST LINN, OR, 97068	Follow-up	Summary o	of Violation	ns:
Person in C		,,		Complaint	1.0	NC_(	) , ()
Bell In		a Ll	∟C	Pre-Operational		NC_	R
Responsible	e Person's	E-mai	il	Temporary HACCP	Menu Type	: (See addi	tional page)
				Other (list)	$1\bigcirc_2$		
Certified For Thoma					1 2	<u>3</u> C	<u> 1405</u>
• CRITICAL	L ITEMS AF	RE IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"	1		
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by	y (mama and	l titlo a	anista D.	Inspected by (name and title pr	mintad):		
Thon	nas I	Ha		Ricardo Zac			
Received by	/ (signature	):		Inspected by (signature):			
cc:			ec:		cc:		



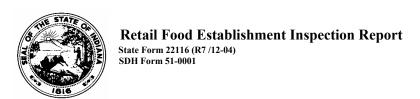
Establishm			hinese Restaurant	Telephone Number	Date of Ins (mm/dd/yr		ID#	
Alexander of the second of the			mber and street, city, state, zip code)	(812-479-7600	04/19	/2017	11379	
669 N	Gree	n F	River Rd, Evansville, IN, 47715	<sup>(</sup> 812-479-7600				
Owner	, Caa	۸۵	accietes Inc	Purpose:	Follow-u		se Date	
Owner's A		AS	ssociates, Inc.	Routine	Yes		29/2017	
		n F	River Rd, Evansville, IN, 47715	Follow-up	_	of Violation		
Person in C	harge		· · · · · · · · · · · · · · · · · · ·	Complaint Pre-Operational	6	NC S	$\frac{5}{2}$ R $\frac{6}{2}$	
			ssociates, Inc.	Temporary				
Responsible	e Person's	E-mai	1	HACCP	Menu Tyj	oe (See addi	itional page)	
Certified F	ood Handl	er		Other (list)	1()2	$\bigcirc_3(\bullet)$	$)_4\bigcirc_5\bigcirc$	
Kim M					)	<u> </u>	<u>- 1                                   </u>	
• CRITICAI	LITEMS AI	RE IDE	NTIFIED 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 Co	orrected By	
438	С	R	Spray bottles not la	abeled.		Co	rrected	
173	С	R	Improper storage of raw a	nimal product.		Corrected		
441	С		Sanitizer concentration too strong.				rrected	
177	С	R	Food products not c	overed.		04/	19/2017	
229	С		Food contact surface of mic	crowave soiled.		Co	rrected	
191	С		Food items in walk-in lacking	g date marking.		Co	rrected	
144	С		Not utilizing food-grade materia	als for food storage		04/19/2017		
187	С	R	Eggs not stored at 41 degrees F	ahrenheit or lower		Co	rrected	
218	NC	R	Seals need replacing on v	walk-in doors.		04/2	24/2017	
232	NC		Non-food contact surfaces of equi	pment need clean	ng.	04/	19/2017	
310	NC		Hood vents in need of	-		04/2	21/2017	
431	NC	R	Walls throughout in need	l of cleaning.		04/	19/2017	
426	NC		Remove any items not needed t	<del>-</del>	S.	04/2	23/2017	
			-					
Received by Kim		l title p	orinted):	Inspected by (name and title processing Ward	rinted):			
Received by		):		Inspected by (signature):				
cc:			cc:		cc:			



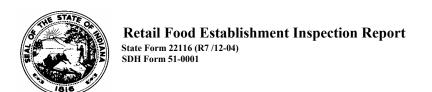
					1		
Establishm				Telephone Number Date of Inspection (mm/dd/yr)			
Subw				812-429-0090		/2017	11361
			mber and street, city, state, zip code)	812-573-7777	04/21	72017	
	V LIOY	a E	xpressway, Evansville, IN, 47712				
Owner PATH	IL AN	1IN		Purpose:	Follow-uj		se Date 701/2017
Owner's A				Follow-up		of Violation	
10082	STON	EC	REEK CIR, NEWBURGH, IN, 47630	Complaint	-		
Person in C				Complaint		NC (	$0_{R}$
PATH	IL AN	ΊN		Pre-Operational	L	NC	R
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	oe (See addi	tional page)
				НАССР			
Certified F				Other (list)	1 2	<u> </u>	<u>)4050</u>
Piyush	n Pate						
• 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
177	С		Ready to eat food (catering order) stored on	the floor in the walk in	cooler.	Co	rrected
			, , ,				
							_
D : 11	<u> </u>			Y			
Received by Mich	*			Inspected by (name and title policy Ricardo Zac		8	
Received by				Inspected by (signature):			
cc:			cc:		cc:		



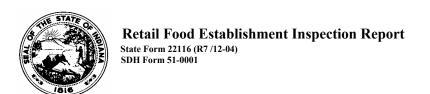
			<u> </u>	•			
Establishm Reitz		ı S	chool	Telephone Number (812-435-8208	Date of Ins (mm/dd/yr	j	то# 11279
Establishm	ent Addres	ss (nu	mber and street, city, state, zip code)	<b>1</b>	04/20	/2017	•
	reier	Blv	d., EVANSVILLE, IN, 47712	812-435-8453			
Owner	ا مااند	/or	adorburah School Corn	Purpose:	Follow-up		se Date /30/2017
Owner's A		v ai	nderburgh School Corp.	Routine			
		St	, Evansville, IN, 47713	Follow-up Complaint	Summary	of Violatio	
Person in C	Charge			Pre-Operational	$_{\rm c}$ U	NC (	$\mathcal{J}_{\mathbf{R}} \mathbf{U}$
			nderburgh School Corp.	Temporary			
Responsible	e Person's	E-ma	il .	НАССР	Menu Typ	e (See addi	itional page)
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}$	$\bigcirc_3$	$)_{4}$ $)_{5}$ $)_{6}$
Patti S	Steinka	amp	)		)	<u> </u>	
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	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 C	orrected By
			No noted violation	ons.			
Received by Patti				Inspected by (name and title p		,	
Received by			-	Inspected by (signature):			
cc:			ec:		cc:		



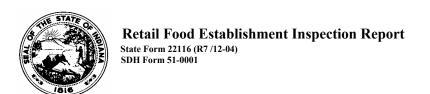
Establishm				Telephone Number	Date of Ins		ID#
The F	Pie P	an		812-425-2261	`	)/2017	11255
			mber and street, city, state, zip code)	812 <sup>-42</sup> 5-2261	04/18	/2017	
	ortn i	ar	k Dr, Evansville, IN, 47710				
Owner Elizab	oth I	021	ę	Purpose:	Follow-up Yes		se Date // 29/2017
Owner's A		Cai		Routine			
		<sup>o</sup> ra	rk, Evansville, IN, 47710	Follow-up Complaint	Summary	of Violation	
Person in C	Charge				[ 1	NC_S	3 <sub>b</sub> 1
Elizab	eth L	eai	ſ	Pre-Operational Temporary	C	. NC	K
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
				Other (list)		$\bigcirc$	
Certified Fe Libby 1		er			1 2	$\bigcirc 3 \bigcirc$	<u> 1405</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
415	С		Insect activity pre	esent.		04/1	19/2017
234	NC		In-use utensils improperly st	Corrected			
431	NC	R	Increase cleaning around & u	04/1	19/2017		
402	NC		Remove or elevate items to assist in	cleaning & pest c	ontrol.	04/1	19/2017
Received by	` ` _		printed):	Inspected by (name and title p			
Libby	/ Lea	ar		Carol Coudr	<u>'et</u>		
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



			<u> </u>				
Establishm Memo		Hig	gh School/Aramark	Telephone Number (812-476-4973)	Date of Ins (mm/dd/yr)	i	то# 11211
Establishm	ent Addres	s (nu	mber and street, city, state, zip code) Ave., EVANSVILLE, IN, 47714	<sup>(</sup> 812-476-4973	04/19	/2017	
Owner			IIGH SCHOOL/Aramark	Purpose:	Follow-up		se Date /29/2017
	Lincol	ln <i>A</i>	Ave, Evansville, IN, 47714	Follow-up Complaint	Summary	of Violatio	•
	DRIAL		IIGH SCHOOL/Aramark	Pre-Operational Temporary	c_ <b>U</b>	NC_(	
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	itional page)
Certified Fo			ery	Other (list)	1 2	<u>3</u>	<u>)</u> 4 <u>U</u> 5 <u>U</u>
• CRITICAL	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "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.			
	Ļ						
Tina				Inspected by (name and title properties)  Kelly Holzm			
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



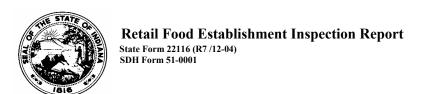
Establishm	ont Name			Telephone Number	Date of Ins	nection	ID#
Corne		r &	. Grill	_	(mm/dd/yr		11171
			mber and street, city, state, zip code)	812-425-5059	U <del>4</del> /∠ I	/2017	''''
			on Ave., Evansville, IN, 47712	812-449-6988			
Owner				Purpose:	Follow-up		se Date
Thoma	as A I	Die	hl	<b>✓</b> Routine	No	05/	01/2017
Owner's Ac			D   E 'II   IN 47700	Follow-up	Summary	of Violation	ns:
		JDL	ırn Rd, Evansville, IN, 47720	Complaint		(	) ()
Person in C		٦: <sub>^</sub>	hl	Pre-Operational	$_{\rm C}$	NC_	$0_{\rm R}$
Thoma				Temporary			
Responsible	e Person's	E-ma	ıl	НАССР	Menu Typ	e (See addi	tional page)
Certified Fo	ood Handle	D. M.		Other (list)	100	$\bigcirc$	$)_{4}\bigcirc_{5}\bigcirc$
Samar			on			<u></u>	<u> </u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	LARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		ID IN THE N	ADDATIVE	' RELOWAS "D"
Section#	C/NC	R	Narrative	WINIARI OF VIOLATIONS AN	DIN THE N		orrected By
Section#	C/IC	K	No noted violation	200		10 Ве С	Trected by
			No noted violation	JUS.			
Received by	(name and	title 1	printed):	Inspected by (name and title p	rinted):		
Brian				Ricardo Zac		:	
Received by				Inspected by (signature):	arias	,	
Acceived by	(Signature	,.		inspected by (signature).			
cc:			ec:		cc:		
CC.			cc.				



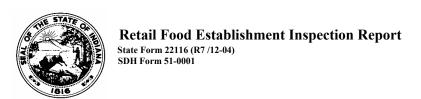
Establishm		ınt	try Corner	Telephone Number	Date of Ins (mm/dd/yr		тр# 11162
Establishm	ent Addres	ss (nu	mber and street, city, state, zip code)	(812-428-4593		/2017	11102
	N St.J	los	eph Ave, Évansville, IN, 47720				
Owner SUPE	RIOF	R A	G RESOURCES	Purpose:	Follow-uj		se Date //30/2017
Owner's A		<u>م</u> ر	JUNITINICALIAC IN 47542	Follow-up	Summary	of Violation	ns:
Person in C		J, I	HUNTINGBURG, IN, 47542	Complaint	. 0		$1_{R}0$
		RA	G RESOURCES	Pre-Operational		NC	R
Responsible	e Person's	E-ma	il	Temporary HACCP	Menu Typ	e (See addi	tional page)
Certified F	ood Handl	or		Other (list)	$10^{\circ}$	$\bigcirc_{2}$	),()_5()
NA	oou manur	CI			1 2	<u></u>	<u> </u>
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
• VIOLATIO	ON(S) REPE	ATEL	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
218	NC		Domestic crock pot being used, commercial crock po	ot is required for rapid hea	ting and	Co	rrected
			temperature holding of so	up and gravy.			
Joan				Inspected by (name and title policy Ricardo Zac		5	
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



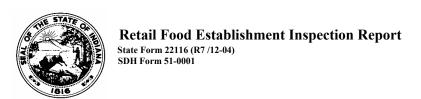
					Date of Ins		_
Establishm		uffe	at/Tranicana Hatal/Conforance Contor	Telephone Number	ID#		
I .			et/Tropicana Hotel/Conference Center  mber and street, city, state, zip code)	1012 100 1000	04/17	/2017	11132
			side Dr, Evansville, IN, 47708	<sup>(</sup> 812-433-4034			
Owner Aztar In	diana (	Gan	ning Co LLC / dba Tropicana Evansville	Purpose:	Follow-uj		se Date /27/2017
Owner's Ac				Follow-up	Summary	of Violatio	
		ver	side Dr, Evansville, IN, 47708	Complaint		_	
Person in C		<b>-</b>	ning Co LLC / dba Tropicana Evansville	Pre-Operational	$_{\rm C}$ $_{\rm C}$	NC_	$\frac{0}{\mathbf{R}}$
Responsible				Temporary	Manu Tvr	sa (Saa addi	itional page)
Kesponsibio	e i eison s	L-IIIa	11	<b>П</b> НАССР	Wichu Ty	c (see aaa	tional page)
Certified For Chuck				Other (list)  Re-opening	102	<u></u>	<u>)4O5O</u>
• CRITICAL	LITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
• VIOLATIO	ON(S) REPE	ATEL	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
			Ok to re-open. Part of buffet line to remain close	ed awaiting sneeze guar	d install.		
Received by				Inspected by (name and title p  David Horni			
Received by				Inspected by (signature):	· <u> </u>		
cc:			cc:		cc:		
					I		



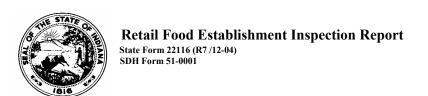
Establishm		. ~	<b>#120</b>	Telephone Number	pection )	ID#	
Burge				812-426-0303	04/20	/2017	11116
			mber and street, city, state, zip code) e, Evansville, IN, 47710	<sup>(</sup> 315 <sup>-</sup> 424-0513			
Owner		_		Purpose:	Follow-up		se Date
Carrol		<u>C</u>		<b>✓</b> Routine	No	04/	30/2017
Owner's A		O1	C NV 40040	Follow-up	Summary	of Violation	ns:
		<u>کڙ</u>	, Syracuse, NY, 13212	Complaint	$\cap$		) 1
Person in C Carrol		$\sim$		Pre-Operational	$_{\rm C}$	NC_	$\frac{2}{2} = \frac{1}{R}$
Responsible	-		;i	Temporary	Manu Tym	a (Saa addi	tional page)
Kesponsibil	e i eison s	L-IIIa	11	HACCP	wienu ryp	c (See addi	nonai page)
Certified F	ood Handl	er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3$ $\bigcirc$	$)_4\bigcirc_5\bigcirc$
Rache			ght		<u> </u>	<u> </u>	<u></u> ,
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	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
324	NC		Faucet at mop sink in ne	eed of repair.		04/2	24/2017
431	NC	R	Increased cleaning needed under	· & around equipme	ent.	04/2	20/2017
				· ·			
Received by	(name and	l title 1	printed):	Inspected by (name and title p	rinted):		
-			twright	Carol Coudr			
Received by			J	Inspected by (signature):			
cc:			cc:		cc:		



Establishm				Telephone Number	Date of Insp	ection	ID#	
El Ch	arro			812-421-1986 04/21/2017 10				
			mber and street, city, state, zip code) g Ave, Evansville, IN, 47712	812-421-1986				
Owner				Purpose:	Follow-up		se Date	
Andre	s Cor	rea	1	<b>✓</b> Routine	No	05/	01/2017	
Owner's A		- 1 -	- A F	Follow-up	Summary o	f Violation	ns:	
		าเล	g Ave, Evansville, IN, 47712	Complaint	$\cap$	(	) (	
Person in C Andre		roc	,	Pre-Operational	$_{\rm C}$	NC_(	$\mathcal{L}_{R}$	
Responsible				Temporary	Manu Tyna	(Saa addi	tional page)	
Responsible	c i ci son s	L-ma	•	НАССР	wienu Type	(See aaan	nonui puge)	
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}($	$)_3$ $\bullet$	$_{4}O_{5}O$	
Jose F	Ramire	θZ				<u>_</u>		
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"				
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				orrected By	
			No noted violati	ons.			,	
			_					
Received by	v (name and	l title r	printed):	Inspected by (name and title pr	rinted):			
Jose		_		Ricardo Zac				
Received by	y (signature	):		Inspected by (signature):				
cc:			cc:		cc:			
I					i			



Establishm				Telephone Number	spection ·)	ID#	
Gatrio				812-401-0061	I ` .	/2017	13722
			mber and street, city, state, zip code)	812-604-3218		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	ncoir	A	ve, Evansville, IN, 47713			l n ı	<u> </u>
Owner Gary I	Boyd			Purpose:	Follow-u		se Date 730/2017
Owner's A				Routine			
		bei	rry St., Evansville, IN, 47714	Follow-up		of Violation	
Person in C			., -, -, -, -, -, -, -, -, -, -, -, -, -,	Complaint	1, 1	NC	$\frac{1}{R}$
Gary I	Boyd			Pre-Operational	C	. NC	R
Responsible		E-mai	il	Temporary	Menu Tyj	oe (See addi	tional page)
				НАССР		$\bigcirc$ G	
Certified F				Other (list) Opening	$1 \bigcirc 2$	$\bigcirc_3$	<u> 1405</u>
Owner	to ob	taır	<u>)                                    </u>				
• 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
324	NC		3 compartment sink fau	icet leaking.		Co	rrected
187	С		Salad bar not holding proper cold	holding temperatu	ıre.	Co	rrected
			<u> </u>	<u> </u>			
Received by Gary	-		orinted):	Inspected by (name and title p  David Horni			
Received by				Inspected by (signature):	<u>''</u> ਤ		
				, , ,			
cc:			cc:		cc:		



Tune		ad	Cafe	Telephone Number (812-568-6192)	Date of Inspection (mm/dd/yr)		13723
Establishm	ent Addres	s (nu	mber and street, city, state, zip code) CKY, Evansville, IN, 47713	812-647-0543	04/20	/2017	
Owner				Purpose:	Follow-u		se Date
Jai Co				Routine	Yes	04/	30/2017
Owner's Ac 1010		ntu	cky, Evansville, IN, 47713	Follow-up Complaint	Summary	of Violation	_
Person in Co				Pre-Operational	$_{\rm C}$	NC_	$\frac{\mathbf{J}}{\mathbf{R}}$
Responsible		E-ma	il	Temporary	Menu Tvr	ne (See addi	tional page)
P				НАССР			
Certified Fo			months	Other (list)	102	<u>3</u>	<u>0</u> 4 <u>0</u> 5 <u>0</u>
• 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 Co	orrected By
			Ok to open.				•
			2 22 20				
				Inspected by (name and title printed):  David Horning			
Received by			. [2 - 3.1 - 19.	Inspected by (signature):			
cc:			ce:		cc:		