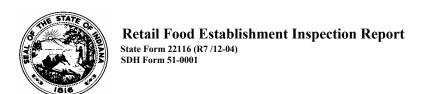
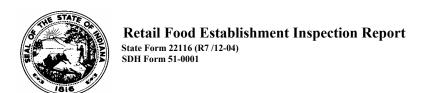


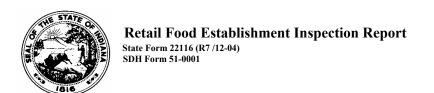
Establishm			1	Telephone Number	Date of Ins (mm/dd/yr		ID#
Missi Establishm			mber and street, city, state, zip code)	(317-378-9565	11/13	/2017	12393
			iver Rd, Evansville, Indiana, 47715	31 <del>7</del> -378-9565			
Owner			Evansville, LLC	Purpose:	Follow-up		se Date 25/2017
Owner's Ac				Follow-up		of Violation	
		or R	titchie Hwy, Glen Burnie, MD, 21061	Complaint	-		
Person in C		QΙ	Evansville, LLC	Pre-Operational	c_ <b>U</b>	NC_	I R U
Responsible			•	Temporary HACCP	Menu Typ	e (See addi	tional page)
~				Other (list)			$\bigcirc$
Certified For Valerie					1 2	<u> </u>	<u>/4_5_</u>
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
174	NC		Bulk container of sugar lacking	g common name.		Co	rrected
Received by Vale				Inspected by (name and title p			
Received by			13	Inspected by (signature):	<u> </u>		
	( <u>0</u>			¥ 7 ( 0			
cc:			cc:		cc:		



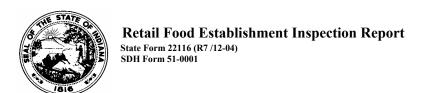
			• • • • • • • • • • • • • • • • • • • •		_			
Nach Nach	_	rill	Mexican Restaurant	Telephone Number (812-459-3871	Date of Ins (mm/dd/yr	•)	1D# 12377	
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	(a. )Owner a a = a a	11/13	3/2017		
Owner Jose N	M Mo:	squ	ueda-Lopez	Purpose:	Follow-uj		e Date 23/2017	
Owner's Ac 825 S		n F	River Rd, Evansville, IN, 47716	Follow-up Complaint	_ `	of Violation		
Person in C Jose N		squ	ueda-Lopez	Pre-Operational Temporary	c_3	NC_	) <sub>R</sub> 1	
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	oe (See addi	tional page)	
Certified Fo	ood Handl	er		Other (list)	1 2	<u>3</u>	<u>)</u> 4 <u>U</u> 5 <u>U</u>	
• CRITICAL	ADD ATIVE	RELOWAS "D"						
			P FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	WIMART OF VIOLATIONS AN	DIN THE I			
Section#	C/NC	R	Narrative	ath ar than hand wa	ahin a		rrected By	
345	C	Ъ	Hand washing sink used for purpose of			Corrected Corrected		
187	С	R	Hot food not being maintained at the	•	iture.	Corrected		
136	C		Employee eating in food	· · ·		Co	rected	
			Ice bin guard and lack of thermometer violations fro	m 11/6/2017 Inspection co	orrectea.			
Received by Jose	•			Inspected by (name and title properties)  Kelly Holzme				
Received by				Inspected by (signature):	J			
cc:			cc:		cc:			



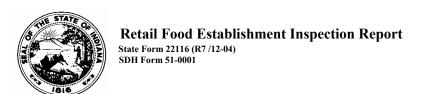
Establishm Fredo		ro	zen Custard of Evansville	Telephone Number (812-909-4395)	Date of Ins (mm/dd/yr)		то# 12291
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	(a., )Owner a	11/16	/2017	
Owner Indian	a Cu	sta	rd Co	Purpose:	Follow-up No		se Date //26/2017
	lain S	t S	te 36, Evansville, IN, 47708	Follow-up Complaint	Summary		
Person in C Indian	a Cu			Pre-Operational Temporary			$\frac{1}{2}$
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)
Certified For Andrev				Other (list)	1 2	<u></u>	)4050
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N.		
Section#	C/NC	R	Narrative				orrected By
294	С	R	Chemical dishwasher no	ot sanitizing.		11/	17/2017
Received by Koell				Inspected by (name and title possible Holzm			
Received by				Inspected by (signature):	J		
cc:			cc:		cc:		



			<u> </u>				
Establishm El Sa	_	$\cap$		Telephone Number	Date of Insp (mm/dd/yr)		ID#
				240-245-2202	11/14/	2017	12274
			mber and street, city, state, zip code) NVE, Evansville, IN, 47714	<sup>(</sup> 240-245-2202			
Owner Xioms	ara \/	Pa	reja Villatoro	Purpose:	Follow-up NO		se Date /24/2017
Owner's A		ra	reja villatoro	Routine			
		inb	ach Ave, Evansville, IN, 47714	Follow-up Complaint	Summary		
Person in C		Pa	reja Villatoro	Pre-Operational	c	NC_	$I_{R}$
Responsible				Temporary	Menu Type	: (See addi	itional page)
				НАССР			
Certified Fo	ood Handl	er		Other (list)	102	<u>3</u>	<u>)4</u> <u>0</u> 5 <u>0</u>
	ITEMS AI	e ini	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IADKED "C"			
					D IN THE N	DD ATIME	DELOW AC "D"
			O FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUN	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Jose				Inspected by (name and title properties of the p			
Received by	y (signature	):		Inspected by (signature):			
cc:			cc:		cc:		



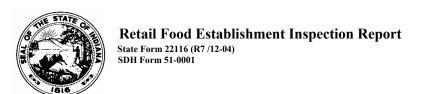
Establishm El Sa		^		Telephone Number	ID#		
			mber and street, city, state, zip code)	(240-245-2202	11/15	/2017	12274
			ve, Evansville, IN, 47714	(240-245-2202			
Owner				Purpose:	Follow-up		se Date
		Pa	reja Villatoro	<b>✓</b> Routine	No	11/	24/2017
Owner's A		inh	ach Ave, Evansville, IN, 47714	Follow-up	Summary	of Violation	ns:
Person in C				Complaint	$\begin{bmatrix} 0 \end{bmatrix}$		$0_{\rm R}$
			reja Villatoro	Pre-Operational Temporary	<u> </u>	NC	R
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
Certified F	ood Handl	or		Other (list)	1(1)	$\bigcirc_2$	),(),()
n/a	oou manur	CI			1 <u> </u>	<u></u>	<u> </u>
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUM	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 Jose				Inspected by (name and title pricardo Zac			
Received by				Inspected by (signature):	J 10.0		
cc:			cc:		cc:		



Establishm The F		ct	Plan To Go	Telephone Number (812-471-9599	Date of Inspe (mm/dd/yr)		1D# 12087
			mber and street, city, state, zip code)	<b>1</b>	11/13/	2017	12007
			ver Rd Ste 310, Evansville, IN, 47715	<sup>(</sup> 812-598-5222			
Owner				Purpose:	Follow-up		se Date
Sean		n		<b>✓</b> Routine	No	11/	23/2017
Owner's A		clo	y Ct, Evansville, IN, 47725	Follow-up	Summary o	f Violatio	as:
Person in C		316	y Ct, Evalisville, IIV, 47725	Complaint	$\cap$	(	$0_{R}$
Sean		n		Pre-Operational	C	NC_	R C
Responsible			il	Temporary Temporary	Menu Type	(See addi	tional page)
responsion	0 1 015011 5		-	НАССР			
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}($	$)_3$ ( $\bullet$	$)_{4}\bigcirc_{5}\bigcirc$
Sean I	Melvir	)				<u> </u>	
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		,	To Be Co	orrected By
			No violations				
Received by Toni	*		orinted):	Inspected by (name and title p			
Received by				Inspected by (signature):	<u> </u>		
	, ,	•		, ,			
cc:			cc:		cc:		



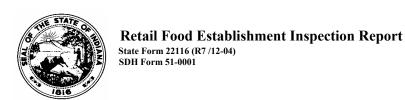
Establishm Craz		fot	I	Telephone Number Date of Inspection (mm/dd/yr)				
	·		mber and street, city, state, zip code)	812-437-5050	1 1/10/	/2017	12048	
			Ste 3D, Evansville, IN, 47712	<sup>(</sup> 91 <del>7</del> -770-4643				
Owner Yong	Hua I	iu		Purpose:	Follow-up NO		se Date /26/2017	
Owner's A				✓ Follow-up				
		rfro	nt Way, Evansville, IN, 47715	Complaint	Summary	_	_	
Person in C	Charge		,	Pre-Operational	$\mathbf{I}_{c}\mathbf{U}$	NC (	$0_{\rm R}$	
Yong	Hua l	_iu				NC	K	
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	itional page)	
				HACCP		$\sim$ $\sim$		
Certified For Yao C		er		Other (list)	1 <u>U</u> 2	<u>3</u>	<u> 14<b>0</b>5</u> 0	
• 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 C	orrected By	
			No noted violation	ons.				
D : 11	<u> </u>			Y				
Yao	,			Inspected by (name and title p Colin Ward	rinted):			
Received by				Inspected by (signature):				
cc:			cc:		cc:			



Establishm Kitch		nk	Pizza's of Evansville	Telephone Number (812-305-4412	Date of Insp (mm/dd/yr)		тр# 11918
			mber and street, city, state, zip code)		11/13/	2017	11010
			n, Evansville, IN, 47711	812-305-4412			
Owner Kathy	Grov	20		Purpose:	Follow-up		e Date 23/2017
Owner's A		CS		Routine			
		hav	ven Dr, Evansville, IN, 47710	Follow-up	Summary o	_	
Person in C			<u> </u>	Complaint	()	,,, (	$\frac{0}{R}$
Kathy		es		Pre-Operational	<u> </u>	NC_	R
Responsible			il	Temporary	Menu Type	(See addi	tional page)
				НАССР			
Certified F				Other (list)	1 <u>0</u> 2	<u> </u>	<u>)4</u> 050
• CRITICAI	L ITEMS AI	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 NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by Kath	*			Inspected by (name and title p			
Received by				Inspected by (signature):			
					I		
cc:			cc:		cc:		



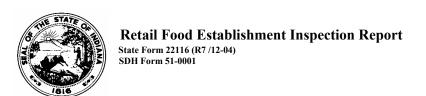
			<u> </u>				
Gas 8		24	Mart	Telephone Number	Date of Ins (mm/dd/yr)		ID#
			IVIGIL mber and street, city, state, zip code)	812-477-2920	11/15	/2017	11692
			Ave, Evansville, IN, 47715	( ) Owner			
Owner				Purpose:	Follow-up		se Date
Shiva		Kha	atri	Routine	No	11/	25/2017
Owner's Ac		n F	Blvd, Evansville, IN, 47714	Follow-up	Summary	of Violation	ns:
Person in C		/I I L	Sivu, Evalisville, IIV, 477 14	Complaint	<b>0</b>	NC_	) $0$
Shiva		Kha	atri	Pre-Operational	c	NC_	- R_
Responsible	e Person's	E-ma	il	Temporary HACCP	Menu Typ	e <i>(See addi</i>	itional page)
				Other (list)	-		1.0.0
Certified Fo	ood Handl	er			$1 \bigcirc 2$	<u> </u>	<u>/405</u>
	ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		Ι		orrected By
			No noted violati	ons.			
Received by Shiva	,		printed):	Inspected by (name and title p			
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		
cc:			cc.		CC.		



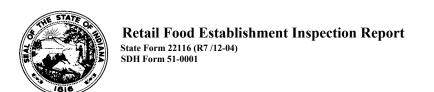
			<u> </u>				
Circle		14:	3	Telephone Number (812-422-7976	Date of Ins (mm/dd/yr	j	тр# 11532
			mber and street, city, state, zip code) ton Ave, Evansville, IN, 47714	(a. )Owner a acce	11/16	/2017	
Owner			nience Store LLC	Purpose:	Follow-up		L se Date /26/2017
		<u> </u>	Herice Store LLC	Routine	INO	1 1/	20/2017
Owner's Ac		7, (	Columbus, IN, 47202	Follow-up  Complaint	Summary	of Violation	_
Person in C Mac's		/er	nience Store LLC	Pre-Operational	C O	NC_	J <sub>R</sub> U
Responsible				Temporary HACCP	Menu Typ	e (See addi	itional page)
Certified Fo	ood Handl	er		Other (list)	$1 \bigcirc 2$	<u>3</u>	$)_4$ $\bigcirc_5$ $\bigcirc$
• CRITICAL	. ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	I IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by Natha				Inspected by (name and title possible Holzm			
Received by	(signature	):		Inspected by (signature):			
cc:			ec:		cc:		



Establishm		_		Telephone Number Date of Inspection (mm/dd/yr)			ID#
Crazy				812-437-8833	11/14/		11494
			mber and street, city, state, zip code)	812-437-8833		2017	
1	Burk	na	rdt Rd, Evansville, IN, 47715			I n i	D.
Owner Fei Er	n Pan			Purpose:	Follow-up		se Date //24/2017
Owner's A				✓ Follow-up	Summary o		
3228	Oakle	y [	Dr, EVANSVILLE, IN, 47711	Complaint	Sullillary	_	_
Person in C				Pre-Operational	$_{\rm c}$ U	NC_	$\int_{R} U$
Fei Er				Temporary			
Responsible	e Person's	E-ma	11	НАССР	Menu Type	(See addi	tional page)
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}($	$\supset_3 \subset$	$)_4 \bigcirc _5 \bigcirc$
Yim W	an Le	e					
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	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			To Be Co	orrected By
			No noted violation	ons.			
Received by Fei E			orinted):	Inspected by (name and title polin Ward	rinted):		
Received by	y (signature	):		Inspected by (signature):			
cc:			cc:		cc:		



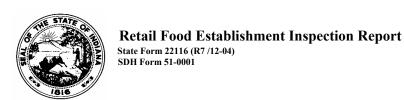
Establishm		adk	nouse	Telephone Number  Date of Inspection (mm/dd/yr)  10 4 4 2 00					
			mber and street, city, state, zip code)	812-477-7427	11/14	/2017	11393		
7900	Eagle	Cı	rest, EVANSVILLE, IN, 47716	502-855-5512					
Owner Texas	Road	dha		Purpose:	Follow-uj		se Date //24/2017		
Owner's A		aric	<del>7430</del>	#==		I			
		ma	ns Ln , LOUISVILLE, KY, 40205	Follow-up Complaint	Summary	of Violation			
Person in C		dha		Pre-Operational	$C_{\rm C}$	NC_(	$\bigcup_{R} \bigcup_{R}$		
Responsible				Temporary	Menu Tva	ne (Saa addi	tional page)		
Kesponsion	c i cison s	L-ma	11	НАССР	iviciiu 1 yr	c (see aaai	nonui puge)		
Certified F				Other (list)	$1 \bigcirc 2$	$\bigcirc_3$	$)_4 \bigcirc _5 \bigcirc$		
Rod P	<u>atmor</u>	e							
• 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		
			Follow-up from inspection on 10/24/1	17. Violations corr	ected.	1			
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Received by Rod		_		Inspected by (name and title p	rinted):				
Received by				Inspected by (signature):					
cc:			cc:		cc:				
			ι						



Establishm TACC		LL	#28898	Telephone Number (812-475-1895)	Date of Ins (mm/dd/yr)		11383
			mber and street, city, state, zip code) e., Evansville, IN, 47714	(503-722-2825	11/10/	/2017	
Owner Bell In				Purpose:	Follow-up NO		se Date 26/2017
Owner's Ad PO BO		)7,	WEST LINN, OR , 97068	Follow-up Complaint	-	of Violation	
Person in C Bell In	Charge			Pre-Operational Temporary	$C_{C}$	NC_	$0_{R}$
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
Certified F			e	Other (list)	$1 \bigcirc 2$	<u>3</u>	)4050
• CRITICAI	L ITEMS AF	RE IDE	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
			No noted violation	ons.			
Received by Roby				Inspected by (name and title properties)  Kelly Holzme			
Received by		<u> </u>		Inspected by (signature):			
cc:			cc:		cc:		
			1 33.				



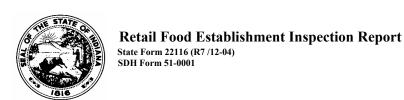
	/ay ent Addres		mber and street, city, state, zip code)	Telephone Number (812-471-5804 (812-228-0454	11/10		11363
	E Moi	rga	n Ave., Evansville, IN, 47715			-	
Owner RT W	OLF I	NC	· ·	Purpose:  Routine	Follow-up No		Se Date 26/2017
Owner's Ac			Dr. C. constille INL 47744	Follow-up	Summary	of Violation	ns:
		yn	Dr, Evansville, IN, 47711	Complaint		(	) ()
Person in C		NC	· ·	Pre-Operational Temporary	$C_{\overline{\mathbf{O}}}$	NC_	P R O
Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
G 10 17				Other (list)			$\bigcirc$
Certified For						<u> </u>	<u>/405</u>
• CRITICAL	LITEMS AF	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	ND IN THE N.	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by Kayla	name and	title p	printed):	Inspected by (name and title p	rinted):		
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



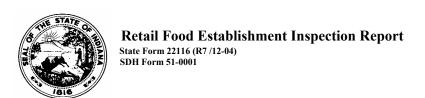
Establishm		<u>~</u> Г		Telephone Number	Date of Ins (mm/dd/yr		ID#
Some	_			812-470-7772	11/17	/2017	11326
930 M			mber and street, city, state, zip code) Evansville, IN, 47708	<sup>(</sup> 812-470-7772			
Owner Belind	la Bre	eivo	ogel	Purpose:	Follow-uj		se Date //27/2017
Owner's A	ddress			Follow-up	Summary	of Violation	ns:
		oar	d Ave, Evansville, IN, 47714	Complaint	$\cap$	(	) (
Person in C Belind		ivc	ngel	Pre-Operational	$_{\rm C}$	NC_	$\frac{0}{\mathbf{R}}$
Responsible				Temporary	Menu Tyr	e (See addi	tional page)
				НАССР			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Certified F	ood Handl	er		Other (list)	1 2	<u>3</u>	<u>)4</u> 050
• CRITICAI	L ITEMS AF	RE IDE	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
			No noted violation	ons.			
Received by Ryar	· _	_		Inspected by (name and title p  David Horni			
Received by				Inspected by (signature):	J		
cc:			cc:		cc:		



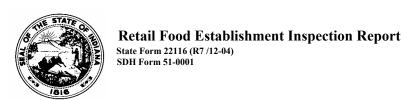
			<u> </u>						
Establishm O'Bri	_	Sp	orts Bar & Grill		lephone Number 12-401-4630	Date of Ins (mm/dd/yr	·j	тр# 11322	
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	(_	12-205-9899	11/15	5/2017		
4	N Gre	en	River Rd, Evansville, IN, 47715						
Owner O'Bria	ans Si	oor	rts Bar & Grill		rpose: Routine	Follow-uj		se Date //25/2017	
Owner's Ac	ddress			7	Follow-up		of Violation		
3900	Timbe	er F	Pte, Evansville, IN, 47715		Complaint				
Person in C		noi	rts Bar & Grill		Pre-Operational	c_ <b>3</b>	NC	+ <sub>R</sub> 4	
Responsible					Temporary	Menu Tyj	se (See addi	tional page)	
					НАССР		$\bigcirc G$		
Certified For Matt M				_	Other (list)	1 <u>0</u> 2	$\bigcirc_3$	<u>)4</u> 05 <u></u>	
• CRITICAL	ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARK	ED "C"				
• VIOLATIO	ON(S) REPE	ATEL	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMA	RY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				To Be Co	orrected By	
430	NC		Wood floor under bar absorbing water. Replac	ce w	ith non-absorbent m	naterial.	02/2	28/2018	
295	С	R	Guard in ice bin so	oile	d.		11/16/2017		
191	С	R	Food in walk in cooler lacking	pro	per date mark.		Corrected		
431	NC	R	Kitchen walls and floors in need of cleaning. Floor	r in b	oar area in need of cl	eaning.	11/2	20/2017	
256	NC	R	Reach in cooler/prep table lacl	king	g thermometer.		11/	16/2017	
294	С		Sanitizer concentration for wipin	ng c	loths too weak.		Corrected		
295	NC		Non-food contact surfa	ace	soiled.		11/	16/2017	
Received by	`	,			ected by (name and title presented by Holzme				
Received by			,		ected by (signature):	<u>, ,</u>			
cc:			cc:			cc:			



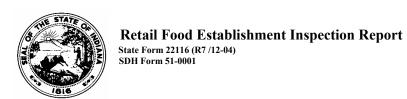
Establishm Skate		Ч		Telephone Number	Date of Ins (mm/dd/yr		ъ# 11321
			mber and street, city, state, zip code)	(812-476-0586	11/16	5/2017	11321
			Dr., EVANSVILLÉ, IN, 47715	<sup>(</sup> 812-305-0580			
Owner	اء امر میں	1	Dill Marrage aver	Purpose:	Follow-u		se Date
Owner's A		ind	c. Bill Werremeyer	Routine	No		26/2017
		e S	St, Clinton, IN, 47842	Follow-up	-	of Violation	
Person in C	Charge			Complaint Pre-Operational	$\frac{2}{2}$	$_{\rm NC}$ (	$0_{R}$
			c. Bill Werremeyer	Temporary			
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	oe (See addi	tional page)
Certified F	ood Handl	er		Other (list)	$1\bigcirc 2$	$\bigcirc_3$	$)_4$ $\bigcirc_5$ $\bigcirc$
					1	<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
118	С		Facility lacking certified food h	andler certificate.		12/	16/2017
324	С		Grease trap information log	not maintained.		11/	16/2017
						1	
						<u> </u>	
Received by Hele		_		Inspected by (name and title p	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



E-4-bE-b	4 N			T-1	Data of Inc	naatian	ID#		
Establishme Show		e C	Cinemas	Telephone Number (812-479-9732)	(mm/dd/yr)				
			mber and street, city, state, zip code) enter Dr., EVANSVILLE, IN, 47715	(a.a.)Owner	11/15	/2017			
Owner			nemas Inc	Purpose:	Follow-uj		se Date 25/2017		
Owner's Ac	ddress		Ave, Evansville, IN, 47710	Follow-up	Summary	of Violation			
Person in C	harge		·	Complaint Pre-Operational	$_{\rm c}$ 1	NC_	$_{\rm R}$ 1		
4			nemas Inc	Temporary					
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)		
Certified Fo	ood Handl	er		Other (list)	1 2	<u>3</u>	<u>)4</u> <u>0</u> 5 <u>0</u>		
• CRITICAL	ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"					
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative			To Be Co	orrected By		
295	С	R	Guard in ice bin s	oiled.		Со	rrected		
Received by Debb				Inspected by (name and title p Kelly Holzm					
Received by				Inspected by (signature):	- <sub>j</sub> - 0 i				
cc:			cc:		cc:				



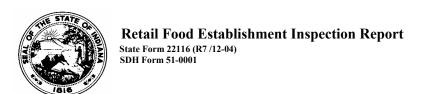
			<u> </u>				
Establishm Circle		24 <sup>-</sup>	 16	Telephone Number (812-479-6491	Date of Ins (mm/dd/yr	)	то# 11245
Establishm	ent Addres	ss (nui	mber and street, city, state, zip code)	(a. )Owner a coop	11/13	/2017	
960 S	Weir	ıba	ch Ave., Evansville, IN, 47714	812-379-9227			
Owner Mac's	Con	ven	ience Store LLC	Purpose:	Follow-up		se Date /23/2017
Owner's A	ddress			Follow-up		of Violation	
PO Bo	$0 \times 34$	7, (	Columbus, IN, 47202	Complaint		_	
Person in C Mac's		ven	ience Store LLC	Pre-Operational	C O	NC_	J <sub>R</sub> U
Responsible	e Person's	E-mai	.1	Temporary HACCP	Menu Typ	e (See addi	itional page)
				Other (list)			$\cap \cap$
Certified For Mary H					1 2	<u>3</u>	<u> 1405</u>
• CRITICAI	L ITEMS AF	RE IDE	NTIFIED 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 C	orrected By
			No noted violation	ons.			
Received by Mary				Inspected by (name and title p			
Received by				Inspected by (signature):	<i>y</i> 2.		
cc:			cc:		cc:		



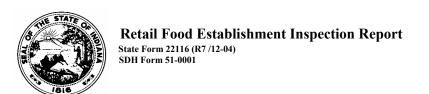
Establishment Name   Circle   S Mart #41   Establishment Address (number and street, city, state, zip code)   11001   Highway 41, Evansville, IN, 47711   Stabilishment Address (number and street, city, state, zip code)   11001   Highway 41, Evansville, IN, 47711   Stabilishment Address (number and street, city, state, zip code)   111/3/2017   Stabilishment Address (number and street, city, state, zip code)   111/3/2017   Stabilishment Address (number and street, city, state, zip code)   111/3/2017   Stabilishment Address (number and street, city, state, zip code)   111/3/2017   Stabilishment Address (number and street, city, state, zip code)   111/3/2017   Stabilishment Address (number and state)   111/3/2017   State)   111/3/2017   State of the control of t								
Establishment Address (number and street, city, state, zip code) 11001 Highway 41, Evansville, IN, 47711    Saiz-547-6435   Sair   Sair			lar	t # <b>Δ</b> 1	Telephone Number			
11001 Highway 41, Evansville, IN, 47711   812-547-6435     Owner   Purpose   Purpose   Purpose   Pollow-up   Release Date     Owner's Address   Pollow-up   Release Date     Owner's Address   Pollow-up   Responsible Person is Camplaint     Person in Charge   Purpose   Pre-Operational   Pre-Operational     Person in Charge   Purpose   Pre-Operational     Person in Charge   Pre-Operational   Pre-Operational     Person in Charge   Pre-Operationa						11/13	/2017	11136
C & S Inc Owner's Address PO Box 39, Tell City, IN, 47586 Preson in Charge C & S Inc Responsible Person's E-mail Certified Food Handler Darlene Johnson  - CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"  - VIOLATIONS) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R" Section® C/NC R Nicrowave in need of cleaning.  To Be Corrected By 11/13/2017  Received by (name and title printed).  Received by (name and title printed).  Received by (signature):  Inspected by (signature):					812-547-6435			
Owner's Address PO Box 39, Tell City, IN, 47586 Person in Charge C & S Inc Responsible Person's E-mail C-mail Itemporary Itacce Darlene Johnson - Certified Food Handler - Dother (list) - Darlene Johnson - Certified Food Handler - Dother (list) - Darlene Johnson - Certified Food Handler - Dother (list) - Darlene Johnson - Certified Food Handler - Dother (list) - Darlene Johnson - Certified Food Handler - Dother (list) - Darlene Johnson - Certified Food Handler - Dother (list) - Darlene Johnson - Certified Food Handler - Dother (list) - Darlene Johnson - Darlene Johnson - Certified Food Handler - Darlene Johnson - Dar		Inc						
PO Box 39, Tell City, IN, 47586  Person in Charge C & S Inc  Responsible Person's E-mail  C-1 NC R  Menu Type (See additional page)  HACCP Darlene Johnson  • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"  • VIOLATIONS) 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  11/13/2017  Microwave in need of cleaning.  Received by (name and title printed):  Received by (name and title printed):  Received by (signature):  Inspected by (signature):					<del>                                     </del>			
Person in Charge C & S   nC Responsible Person's E-mail Responsible Person's E-mail Person on Temporary HACCP Other (list) Darlene Johnson  - CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"  - VIOLATIONS) 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   Microwave in need of cleaning.  11/13/2017    Narrative   Microwave in need of cleaning   Narrative   Na			Te	ell City. IN. 47586		-		
Responsible Person's E-mail    Certified Food Handler						_ 1	NG (	) , 1
Responsible Person's E-mail  Certified Food Handler Darlene Johnson  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						C	NC_	R
Certified Food Handler Darlene Johnson  • 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	Responsible	e Person's	E-ma	il		Menu Typ	e (See addi	tional page)
Darlene Johnson  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 Microwave in need of cleaning. 11/13/2017								
**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					Other (list)	1 2	<u> </u>	<u> </u>
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 Microwave in need of cleaning.      11/13/2017	Darlen	<u>ie Joh</u>	nso	on				
Section# C/NC R Narrative To Be Corrected By 295 C R Microwave in need of cleaning.  11/13/2017	• CRITICAI	L ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
Received by (name and title printed):  Received by (signature):  Inspected by (signature):  Inspected by (signature):  Inspected by (signature):	• 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"
Received by (name and title printed):  Rick Fisher  Received by (signature):  Inspected by (name and title printed):  Claire Will  Inspected by (signature):	Section#	C/NC	R	Narrative			To Be Co	orrected By
Received by (name and title printed):  Rick Fisher  Received by (signature):  Inspected by (name and title printed):  Claire Will  Inspected by (signature):	295	С	R	Microwave in need of	cleaning.		11/	13/2017
Received by (signature):  Claire Will Inspected by (signature):					<u> </u>			
Received by (signature):  Claire Will Inspected by (signature):								
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China		۱۲۵	ee	Telephone Number	Date of Ins (mm/dd/yr		ID#			
			mber and street, city, state, zip code)	812-428-3838	11/14	/2017	11145			
			nor St., Evansville, IN, 47713	(502-510-5655						
Owner				Purpose:	Follow-u		se Date			
Quan	Tran			<b>✓</b> Routine	Yes	:  11/	24/2017			
Owner's Ac			and Dr. Eveneville, IN 47740	Follow-up	Summary	of Violation	ns:			
		SW	ood Dr, Evansville, IN, 47713	Complaint	1	<b>F</b>	5 6			
Person in C				Pre-Operational	C	NC_	$\frac{5}{2}$ R $\frac{6}{2}$			
Responsible		E-ma	ii	Temporary	Menu Tvi	ne (See addi	tional page)			
responsible	c i cison s			НАССР			nonai page)			
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}$	$\bigcirc_3$ $\bullet$	$_{4}\bigcirc_{5}\bigcirc$			
Quan	Tran									
• CRITICAL	L ITEMS AF	RE IDI	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			
431	NC	R	Facility cleaning needed on, under, and	behind kitchen equi	oment.	11/2	28/2017			
426	NC	R	Storage of unnecessary items not per	age of unnecessary items not pertinent to daily operations.						
242	NC	R	Using non-food grade bags to stor	Using non-food grade bags to store food in refrigerators.						
216	NC	R	Cardboard being used to catch spills not characte	eristic of easily cleanable	surface.	11/15/2017				
177	NC	R	Some refrigerated foods not stored	I in covered contair	ners.	11/15/2017				
173	С	R	Improper storage of foods	in refrigerator.		11/	15/2017			
Received by Donr	•			Inspected by (name and title popular Horni						
Received by			<u>'</u>	Inspected by (signature):	ı ı <u>y</u>					
	(- 0	, -		·r · · · · · · · · · · · · · · · · · ·						
cc:			cc:		cc:					



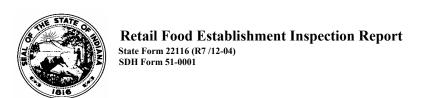
			<u> </u>	•				
Establishm Charl		/lor	ngolian BBQ	Telephone Number (812-303-2214	Date of Ins (mm/dd/yr	r)	тр# 11139	
			mber and street, city, state, zip code)	7		3/2017	11100	
315 E			d Ave, Evansville, IN, 47711	<sup>(</sup> 812-484-6709				
Owner SHOU	J 7HI	ΙO	IN	Purpose:	Follow-u		se Date /23/2017	
Owner's Ac				<del>1</del> —	C			
		Po	nd Way, Evansville, IN, 47711	Follow-up Complaint		of Violation	_	
Person in C	harge		-	Pre-Operational	$_{\rm c}3$	NC_	$\frac{3}{R}$	
SHOL				Temporary	) ( T	/G 1.1:	1	
Responsible	e Person's	E-mai	.1	НАССР	Menu Ty	pe (See addi	itional page)	
Certified F	ood Handl	er		Other (list)	10,	$\bigcirc_3$	$)_{4}$ $\bigcirc_{5}$	
Jun Ca		CI .			1 2	<u></u>	<u>/4030</u>	
• CRITICAL	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	JARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
245	NC	R	Wiping cloths imprope	erly stored.		Co	rrected	
416	NC		Remove any dead	•		11/13/2017		
449	С		Improper use of open ba	aiting station.		Co	rrected	
179	NC		All foods need covered or under	r buffet glass cove	r.	11/	13/2017	
324	С	R	No grease trap information	on available.		11/	14/2017	
118	С	R	Certified food safety empl	oyee needed.		12/	13/2017	
Received by Char		l title p	orinted):	Inspected by (name and title p				
Received by		):		Inspected by (signature):				
cc:			cc:		cc:			



Establishm Charl		∕l∩r	ngolian BBQ	Telephone Number (812-303-2214	Date of Ins (mm/dd/yr	)	тр# 11139
			mber and street, city, state, zip code)		11/15	/2017	11139
			d Ave, Evansville, IN, 47711	<sup>(</sup> 812-484-6709			
Owner SHOL	l 7HI	ΙO	IN	Purpose:	Follow-up		se Date /25/2017
Owner's A		, <u> </u>	111	<del></del>		1	
		Pο	nd Way, Evansville, IN, 47711	Follow-up	Summary	of Violation	ns:
Person in C			ila vvay, Evallovillo, ilv, ilv il	Complaint	L ()	(	$0_{\rm R}$
SHOU		l O	IN	Pre-Operational	C	NC_	
Responsible				Temporary	Menu Tvr	e (See addi	tional page)
				НАССР	l _ ^^		2 0
Certified F	ood Handl	er		Other (list)	$1\bigcirc 2$	$\bigcirc_3$ $\bigcirc$	$)_{4}\bigcirc_{5}\bigcirc$
Jun Ca	ao					<u> </u>	
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	ARKED "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
			Violations from 11-13-17 inspe	ection corrected.			
Received by Char		l title j	printed):	Inspected by (name and title p  Carol Coudr			
Received by		):		Inspected by (signature):	<del></del>		
cc:			cc:		cc:		



Establishm		, 1	oungo	Telephone Number	Date of Ins (mm/dd/yr		ID#
	-		OUNGE mber and street, city, state, zip code)	812-319-1238	1 1/1/	//2017	11123
			bia St., EVANSVILLE, IN, 47711	618-472-1306			
Owner	Daala	:11		Purpose:	Follow-u		se Date
Dave		WITI	<u>1</u>	Routine	No		27/2017
Owner's A		c	k St, McLeansboro, IL, 62896	Follow-up	_ `	of Violatio	_
Person in C			K St, Wellsansbore, IL, 62656	Complaint	1 , 0	NG	$1_{\rm R}0$
Dave		witl	า	Pre-Operational		NC	<u>R</u>
Responsible	e Person's	E-ma	il	Temporary	Menu Tyj	pe <i>(See addi</i>	itional page)
				HACCP		$\bigcirc$	
Certified F	ood Handl	er		Other (list)	1 2	<u>U</u> 3 <u>U</u>	<u>/4_5_</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
232	NC		Interior top of ice bir	n soiled.		Co	rrected
Received by David				Inspected by (name and title p  David Horni			
Received by				Inspected by (signature):	<u>''3</u>		
	-			· · · · · · · · · · · · · · · · · · ·			
cc:			cc:		cc:		



Establishment Name				Telephone Number	Date of Insp	ection	ID#
Engler Wholesale, Inc.				(812-471-0235	(mm/dd/yr)		10945
Establishment Address (number and street, city, state, zip code)					11/17/	2017	10010
4315 E Morgan Ave., EVANSVILLE, IN, 47715				(812-385-3762			
Owner				Purpose:	Follow-up		se Date
Dan Engler				<b>✓</b> Routine	No	11/	27/2017
Owner's Ac				Follow-up	Summary o	f Violatio	ns:
PO Bo	ox 123	32,	Princeton, IN, 47670	Complaint	اً م	_	_
Person in C				Pre-Operational	$_{\rm C}$ U	NC_(	$\mathcal{F}_{\mathbf{R}}$
Dan E				Temporary			
Responsible	e Person's	E-ma	il	НАССР	Menu Type	(See addi	tional page)
C C LE	177 11			Other (list)			
Certified Fo	ood Handi	er			1 <u>02</u>	<u></u>	<u>/4050</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			Fo Be Co	orrected By
			No noted violation	ons.			
Received by	(name and	title 1	printed):	Inspected by (name and title p	rinted):		
Dan		_		David Horni			
Received by				Inspected by (signature):	19		
1.0001704 by	(5.5.141410)	,-					
cc: cc:					cc:		
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