





















# 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 <b>Bonkers</b>		Telephone Number (812-867-2126)	Date of Inspection (mm/dd/yr) 12/06/2017	ID # 11114
Establishment Address (number and street, city, state, zip code) 11901 Petersburg Rd., Evansville, IN, 47725		(812-550-5465)		
Owner Vijaykumar K 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 <b>No</b>	Release Date 12/16/2017	
Owner's Address 13414 Prairie Dr, Evansville, IN, 47725		Summary of Violations: C <u>2</u> NC <u>0</u> R <u>2</u>		
Person in Charge Vijaykumar K Patel		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 Mavina Green				

- 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	R	Hot food not being held at the required temperature of 135 degrees.	12/06/2017
295	C	R	Guard in ice bin soiled.	12/07/2017

Received by (name and title printed): <b>Mavina Green</b>		Inspected by (name and title printed): <b>Kelly Holzmeyer</b>	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name <b>Bonkers</b>		Telephone Number <b>(812-867-2126)</b>	Date of Inspection (mm/dd/yr) <b>12/08/2017</b>	ID # <b>11114</b>
Establishment Address (number and street, city, state, zip code) <b>11901 Petersburg Rd., Evansville, IN, 47725</b>		Owner <b>(812-550-5465)</b>		
Owner <b>Vijaykumar K Patel</b>	Purpose: <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up <b>No</b>	Release Date <b>12/18/2017</b>	
Owner's Address <b>13414 Prairie Dr, Evansville, IN, 47725</b>		Summary of Violations: <b>C 0 NC 0 R 0</b>		
Person in Charge <b>Vijaykumar K Patel</b>		Menu Type (See additional page) <b>1 0 2 0 3 0 4 0 5 0</b>		
Responsible Person's E-mail				
Certified Food Handler <b>Mavina Green</b>				

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Section#	C/NC	R	Narrative	To Be Corrected By
			Violations from 12/6/2017 corrected.	

Received by (name and title printed): <b>andy patel</b>	Inspected by (name and title printed): <b>Kelly Holzmeyer</b>
Received by (signature):	Inspected by (signature):
cc:	cc:







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Establishment Name <b>Hornets Nest</b>		Telephone Number <b>(812-867-2386)</b>	Date of Inspection (mm/dd/yr) <b>12/06/2017</b>	ID # <b>11042</b>
Establishment Address (number and street, city, state, zip code) <b>11845 Petersburg Rd., Evansville, IN, 47725</b>		Owner <b>(812-746-7081)</b>		
Owner <b>Derek Ungethiem</b>	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 <b>No</b>	Release Date <b>12/16/2017</b>	
Owner's Address <b>13815 Castle Brook Rd, Evansville, IN, 47725</b>	Summary of Violations: <b>C 0 NC 2 R 0</b>			
Person in Charge <b>Derek Ungethiem</b>	Menu Type (See additional page) <b>1 0 2 0 3 1 4 0 5 0</b>			
Responsible Person's E-mail				
Certified Food Handler <b>Jeremiah Galey</b>				

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Section#	C/NC	R	Narrative	To Be Corrected By
234	NC		Bulk container scoop lacking proper handle.	Corrected
174	NC		Bulk container of sugar lacking common food name.	Corrected

Received by (name and title printed): <b>Jeremiah Galey</b>	Inspected by (name and title printed): <b>Kelly Holzmeyer</b>
Received by (signature):	Inspected by (signature):
cc:	cc:





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Establishment Name <b>Frank's Jr BBQ &amp; Catering</b>		Telephone Number <b>(812-475-9880)</b>	Date of Inspection (mm/dd/yr) <b>12/08/2017</b>	ID # <b>10972</b>
Establishment Address (number and street, city, state, zip code) <b>3012 Covert Ave Suite F, EVANSVILLE, IN, 47714</b>		Owner <b>(812-475-9880)</b>	Follow-up <b>No</b>	
Owner <b>Frank Patton Jr.</b>		Purpose: <input checked="" type="checkbox"/> Routine	Release Date <b>12/18/2017</b>	
Owner's Address <b>3012 COVERT AVE, Evansville, IN, 47714</b>		<input type="checkbox"/> Follow-up	Summary of Violations: <b>C 0 NC 0 R 0</b>	
Person in Charge <b>Frank Patton Jr.</b>		<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 <b>Nathan Patton</b>		<input type="checkbox"/> Temporary		
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

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

Received by (name and title printed): <b>Frank Patton</b>	Inspected by (name and title printed): <b>Kelly Holzmeyer</b>
Received by (signature):	Inspected by (signature):
cc:	cc:





