

Establishm	ent Name			Te	lephone Number	Date of In		ID #	
Expre	ess N	1ar	t	(8	312-228-1077	(mm/dd/y	<i>,</i>	13240	
			mber and street, city, state, zip code)	() Owner	02/06	6/2018		
325 S	Kentu	icky	/ Ave, Evansville, Indiana, 47714						
Owner					irpose:	Follow-u		e Date	
<reda< td=""><td></td><td>ı</td><td></td><td>~</td><td>Routine</td><td>No</td><td colspan="3">No 02/16/2018</td></reda<>		ı		~	Routine	No	No 02/16/2018		
Owner's A					Follow-up	Summary	mary of Violations:		
<reda< td=""><td></td><td>1</td><td></td><td></td><td>Complaint</td><td>1</td><td></td><td> 1</td></reda<>		1			Complaint	1		1	
Person in C					Pre-Operational	C	NC	<u>R</u> 1	
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Responsible	e Person's	E-ma	11		НАССР	Menu Ty	pe <i>(See addi</i>	tional page)	
Certified F	and Handl			-	Other (list)	$1 \bigcirc 2$	\bigcirc	$) (\bigcirc - \bigcirc)$	
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1									
• CRITICAI	L ITEMS AF	RE IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	XED "C"				
VIOLATIC	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUP	MMA	ARY OF VIOLATIONS" AN	D IN THE N	-		
Section#	C/NC	R	Narrative					orrected By	
118	С		Food safety certificatio	n n	needed.		05/0	06/2018	
232	NC	R	Leak from frozen beverage stat	ion	needs cleaned		02/0	06/2018	
			<u> </u>						
Received by				-	ected by (name and title pr edacted>	inted):	L		
Received by	(signature):		Insp	ected by (signature):				
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Establishm	Side ent Addres S Ker Cted> ddress Cted> charge Cted> e Person's	ss (nur Ituc E-mai	ood Mart ^{mber and street, city, state, zip code)} cky Ave, Evansville, IN, 47714	Telephone Number (812-431-5373 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	$\frac{ID \#}{12366}$ $\frac{19/2018}{I9/2018}$ $\frac{P}{R} = \frac{2}{R}$ $\frac{19}{2} = \frac{2}{100}$			
• CRITICAI	ITEMS AR	RE IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
	()		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N			
Section#	C/NC	R	No coop of hand woo	hing aink			orrected By	
346	NC	R	No soap at hand was				09/2018	
347	NC	R	No paper towels at hand w	vasning sinks.		02/(09/2018	
Received by	(name and	title r	printed):	Inspected by (name and title pr	rinted):			
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Received by	(signature)):		Inspected by (signature):				
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Establishm	ont Nomo			Telephone Number Date of Inspection ID #				
		20	staurant	-	(mm/dd/yr		12345	
			mber and street, city, state, zip code)	(812-459-1761	02/06	/2018	12345	
			, Evansville, IN, 47713	(<redacted></redacted>				
Owner			· · ·	Purpose:	Follow-u		se Date	
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Owner's A				Follow-up	Summary	of Violation	ns:	
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Person in C				Pre-Operational			$\mathbf{D}_{\mathbf{R}}$	
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Responsible	e Person's	E-ma	il	НАССР	Menu Tyj	be (See addi	tional page)	
				Other (list)	\square	\bigcirc	$) \cap \cap$	
Certified F		er			$1 \underline{\bigcirc} 2$		<u>/4_5_</u>	
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"				
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
			No noted violati	ons				
				.				
Received by				Inspected by (name and title p	rinted):			
Received by				Inspected by (signature):				
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Establishm	ampii ent Addres Burkh	ss (nu ard	NA mber and street, city, state, zip code) t Rd. Ste 600, Evansville, IN, 47715	Purpose:	Date of In (mm/dd/y) 02/05 Follow-u NO	r) 5/2018 p Releas	ID # 12265 e Date 15/2018
SIEUA Owner's A				✔ Routine	-		
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>-</td><td>of Violation</td><td></td></reda<>				Follow-up	-	of Violation	
Person in C				Complaint	2) _R _2
<reda< td=""><td>0</td><td></td><td></td><td>Pre-Operational</td><td>с</td><td>NC</td><td><u> </u></td></reda<>	0			Pre-Operational	с	NC	<u> </u>
Responsible			il	Temporary	Menu Ty	pe (See addi	tional page)
				НАССР	\sim	$\sim \sim$	
Certified For		er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3 \bigcirc$	$\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO)N(S) REPE	ATEI) 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
173	С	R	Improper storage of raw beef ar	nd chicken product		Co	rrected
187	С	R	Raw beef product not maintained at 41 degrees Fahre			Со	rrected
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
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Establishm	cted> cted> ddress cted> cted> charge cted> e Person's	ss (nu ank E-ma	eet Tavern mber and street, city, state, zip code) clin St, Evansville, IN, 47712	Te (8)	$\frac{ID \#}{12220}$ se Date $\frac{17/2018}{R}$ sc Date $\frac{17/2018}{R}$ sc Date $\frac{17/2018}{R}$ sc Date $\frac{17}{2018}$ sc Date $\frac{17}{2018}$			
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					
	DN(S) REPE	ATEI) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violation	ons	.			
Received by				-	ected by (name and title pr edacted>	rinted):		
Received by	(signature):		Insp	bected by (signature):			
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	d Buf ent Address N Gree cted> cted> Charge cted>	en en	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u NO Summary C Menu Tyj	p Releas 0/2018 0 Releas 02/ of Violation NC pe (See addi	19/2018 Is: R_0 tional page)
Certified For		er		Other (list)	$1 \underbrace{\bigcirc} 2$	<u></u> 3	$\underline{14}\underline{0}5\underline{0}$
• VIOLATIC	DN(S) REPE	ATED	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N		
Section#	C/NC	R	Narrative				orrected By
294	C		Sanitizer concentration for wipir	•	rrected		
187	C		Cold food at sushi bar not being maintain		rature.		rrected
234	NC		Bulk food container scoop lack	ing proper handle.		Co	rrected
Received by				Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
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Establishm 6240 Owner <reda Owner's Ad <reda Person in C <reda Responsible Certified F <redac< th=""><th>/GBS ent Addres E Virc Cted> Cted> Cted> Cted> cted> e Person's</th><th>E-ma</th><th></th><th>(8) (< Pu /</th><th>lephone Number 12-477-2664 rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u NO Summary C_1</th><th>p Releas 02/ of Violation NC_</th><th>· ·</th></redac<></reda </reda </reda 	/GBS ent Addres E Virc Cted> Cted> Cted> Cted> cted> e Person's	E-ma		(8) (< Pu /	lephone Number 12-477-2664 rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C_1	p Releas 02/ of Violation NC_	· ·
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
294	С		Sanitizing concentration for wipi	na	cloths too week			rrected
204	0		Cantazing concentration for wip	ng			00	necleu
Received by	acteo	d>		<r< td=""><td>ected by (name and title pr edacted></td><td>inted):</td><td></td><td></td></r<>	ected by (name and title pr edacted>	inted):		
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			ys Take N Bake	(812-402-8686		, ;/2018	11675
Establishme 779 S	ent Addres Gree	^{ss (nu} en F	^{mber and} street, city, state, zip code) River Rd, Evansville, IN, 47715	() Owner	02/00	/2010	
Owner	- (- J			Purpose:	Follow-u		
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Owner's Ac				Follow-up	Summary	of Violation	IS:
Person in C				Complaint			
<reda< td=""><td></td><td>•</td><td></td><td>Pre-Operational</td><td colspan="3"></td></reda<>		•		Pre-Operational			
Responsible	Person's	E-ma	il	Temporary HACCP	Menu Typ	be (See addii	ional page)
				Other (list)	\cap	◯₃●	
Certified Fo		er		Other (hist)	$1 \underline{\bigcup} 2$		<u>4050</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	rrected By
187	С		Potentially hazardous food not being he	eld at 41 degrees or	lower.	02/0	5/2018
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		Ì					
		1					
Received by			· · · · ·	Inspected by (name and title p <redacted></redacted>	rinted):		
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	l's Pi ent Addres N Firs cted> ddress cted> charge cted> e Person's	ss (nui st A E-mai	mber and street, city, state, zip code) Ne, Evansville, IN, 47710	Telephone Number ⁽⁸¹²⁻⁴³⁴⁻⁶⁹⁰⁹⁾ ⁽ <redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_2	r) 6/2018 p Releas 02/	<u>8</u> <u>R</u> <u>4</u>	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N		D 111			
VIOLATIC Section#	ON(S) REPE	ATED R	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU Narrative	MMARY OF VIOLATIONS" AN	D IN THE N		BELOW AS "R" orrected By	
415	C	R	Live pest activity p	resent)9/2018	
344	C	R	Hand sink not acce					
347	NC	R	Hand drying provisions not pro				06/2018	
295	NC	R	Microwave in need of				06/2018	
308	NC		Ventilation fans in need			02/0)9/2018	
							_	
Received by	(name and	title r	vrinted).	Inspected by (name and title n	rinted):			
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	N`S ent Addres		mber and street, city, state, zip code) lin St, Evansville, IN, 47712	Τ. (ξ	ID # 11506 e Date				
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Owner's A	ddress				Follow-up		of Violation		
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Person in C				┢	Pre-Operational	$_{\rm C}$ U	NC L		
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Responsible	e Person's	E-ma	11	HACCP Menu Type (See additional po					
Certified Fo		er			Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$	
• CRITICAL	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	AR	KED "C"				
• VIOLATIO	ON(S) REPE	ATEI	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY 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	6.				
Received by				-	bected by (name and title pr Cedacted>	rinted):			
Received by	(signature)):		Insp	bected by (signature):				
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1321 Owner <reda Owner's Ad</reda 	Stuf	ss (nu ton	mber and street, city, state, zip code) Ave, Evansville, IN, 47710	Telephone Number (812-422-8701 (<redated> Purpose: V Routine Follow-up</redated>	^{Follow-u} NO	·) 7/2018 p Releas	ID # 11504 se Date 17/2018 ns:
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Responsible	e Person's	E-ma	il	- Temporary	Menu Ty	pe (See addi	tional page)
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Certified F		er		Other (list)	1 <u>0</u> 2	$\bigcirc_3 \bigcirc$	$\underline{0}_{4} \underline{0}_{5} \underline{0}$
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Section#	C/NC	R	Narrative			To Be Co	orrected By
	Î		No noted violation	ons.			
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	dy's # ent Addres St.Jc cted> ddress cted> charge cted> e Person's	ss (nu DSC	mber and street, city, state, zip code) ph Ave, Evansville, IN, 47712	Telephone Number (812-424-8737 (<redacted> Purpose: Purpose: Purpose: Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u No Summary C	r) B /2018 p Release 02/ r of Violation NC	
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		ND IN THE M	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
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	/iney ent Addres E Virc Cted> ddress Cted> Cted> Cted> cted> a Person's	s (nu jini E-ma	mber and street, city, state, zip code) a St., Evansville, IN, 47715	Telephone Number (812-479-8777 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 7/2018 P Releas 02/ v of Violation _ NC_	$\frac{ID \#}{11402}$ se Date $\frac{17/2018}{R}$ ms: $\frac{D}{R}$ $\frac{0}{405}$
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE M	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			-	orrected By
5001011#	CINC	Λ	No noted violatio	222		TODEC	million By
				JNS.			
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	e Of C ent Addres Unive	ss (nu rsi	na ^{mber and street, city, state, zip code)} ty Dr., Evansville, IN, 47712	() (Pu	Rephone Number 812-422-1260 <redacted> rrpose: Routine</redacted>	Date of In (mm/dd/yr 02/08 Follow-u NO	r) 8/2018 p Releas	ID # 11390 e Date 18/2018
Owner's A					Follow-up		of Violation	
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Person in C				┢	Pre-Operational	2) _R 1
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Responsible	e Person's	E-ma	il	┢	НАССР	Menu Ty	pe (See addii	ional page)
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Certified F		er				$1 \underline{\bigcup} 2$		4050
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARk	KED "C"			
• VIOLATIO	DN(S) REPE	ATEI	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
205	С		Food contact surfaces of equipment do not meet materi	als a	ind/or construction requi	rements.	Co	rrected
173	С	R	Food is unprotected from cross contamination, use metal trays.				Со	rrected
		-						
		-						
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	et T-1 ent Addres First A cted> ddress cted> Charge cted> e Person's	ss (nu AVE	mber and street, city, state, zip code) e, Evansville, IN, 47710		ephone Number 12-426-2218 (Compacted) rpose: Routine Follow-up Complaint Pre-Operational Femporary HACCP Other (list)	Follow-u NO Summary C_1	r) 7/2018 p Releas 02/	17/2018)
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					DELONIAC (ST
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMAI	KY OF VIOLATIONS" AN	D IN THE N		
Section#	Section#C/NCRNarrative139CRBaby formula out of							orrected By
139	139 C R Baby formula out				ate.		0	rrected
Received by					ected by (name and title pr edacted>	inted):		
Received by	(signature)):		Inspe	ected by (signature):			
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Establishm					Telephone Number	Date of Ins (mm/dd/yr		ID #
Mike	Libs	&	The Chocola	te Factory	(812-424-8750	02/07		11215
Establishm	ent Addre	ss (nu	mber and street, city, state, z	zip code)	<pre><redacted></redacted></pre>	02/07	/2010	
	Gree	en F	River Rd, Evan	sville, IN, 47715			1	
Owner	atada				Purpose:	Follow-uj		se Date 17/2018
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<reda< td=""><td></td><td></td><td></td><td></td><td>Follow-up</td><td>Summary</td><td>of Violation</td><td>15:</td></reda<>					Follow-up	Summary	of Violation	15:
Person in C					Complaint			
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Responsibl			il		- Temporary	Menu Typ	e (See addi	tional page)
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Certified F		er			Other (list)	$1 \underline{\bigcirc} 2$	<u>()</u> 3	$\underline{14050}$
• CRITICAI	L ITEMS AI	RE IDF	INTIFIED IN THE CHECKLIS	T AND NARRATIVE COLUMNS N	ARKED "C"	<u> </u>		
				IONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	-	Narrative				orrected By
		1		No noted violation	ons.			
	Received by (name and title printed):				Inspected by (name and title provided by (name and title p	rinted):		
	eceived by (signature):				Inspected by (signature):			
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	onald ent Address St.JC Cted> Idress Cted> harge Cted> ood Handle	s (nur)SE E-mai	mber and street, city, state, zip code) ph Ave, Evansville, IN, 47720	Telephone Number (812-422-8717 (<redacted> Purpose: Purpose: Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary) 5/2018 p Releas 02/ of Violatior	15/2018
• CRITICAL	ITEMS AR	E IDF	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.			
Received by		-	printed):	Inspected by (name and title p <redacted></redacted>	rinted):		
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cc:			cc:		cc:		



	Ice C ent Address W Viry cted> ddress cted> cted> cted> cted> e Person's	ss (nu gin E-ma	mber and street, city, state, zip code) ia St., Evansville, IN, 47712	Telephone Number (812-423-4173 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_	p Releas 02/) _R _0
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUP		D IN THE N	MARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
Section	ente		No noted violatic	222		10 20 00	Jirected By
				JII5.			
Received by				Inspected by (name and title pr <redacted></redacted>	rinted):	<u> </u>	
Received by	(signature)):		Inspected by (signature):			
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Establishm	s Fan ent Addres St.Jc cted> ddress cted> Charge cted>	ss (nu	us Recipe unber and street, city, state, zip code) eph Ave, Evansville, IN, 47712	Telephone Number (812-422-3904 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary</redacted>	Follow-u NO Summary C_1	r) 5/2018 p Releas 02/ of Violation NC	
Certified Fo		er		HACCP Other (list)	102	<u></u> 3)_45
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
	. ,		D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	ID IN THE N		
Section#	C/NC	R	Narrative	oking data labala ma	rkingo		orrected By
191	191 C Potentially Hazardous Food containers lacking date labels markings.				02/0	15/2010	
Received by	acteo	d>	· /	Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
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727 N	y Kre	ss (nu	e mber and street, city, state, zip code) rdt Rd, Evansville, IN, 47715	() (elephone Number 312 ⁻ 475-8419 <redacted></redacted>	Date of Inspection (mm/dd/yr) 02/07/2018		і <i>в</i> # 11074
^{Owner}	cted>				irpose: Routine	Follow-u		se Date 17/2018
Owner's A				Ļ	Follow-up	C	of Violation	
<reda< td=""><td></td><td></td><td></td><td></td><td>-</td><td>Summary</td><td></td><td></td></reda<>					-	Summary		
Person in C				┦	Complaint	$\int 0$) .()
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Responsible			il	╘	Temporary	Menu Ty	pe (See addi	tional page)
				_	НАССР		\sim	$\sim \sim \sim$
Certified Fo		er			Other (list)	1 <u>0</u> 2	<u>3</u>	<u>)₄O₅O</u>
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARI	KED "C"			
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violati	ions	8.			
Received by					bected by (name and title pr redacted>	rinted):		
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899 N Owner <reda Owner's Ad <reda Person in C <reda Responsible</reda </reda </reda 	li´S # ent Addres Gree cted> ddress cted> Charge cted> e Person's	ss (nu en f E-ma	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u No Summary C	r) 5/2018 p Releas 02/ r of Violation	<u></u>
Certified F		er		Other (list) 	$1 \underline{\bigcup} 2$		<u>/405</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		ND IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
297	NC		Left side drink dispenser ir	n lobby soiled.		02/0	06/2018
		-					
Received by				Inspected by (name and title p <redacted></redacted>	orinted):		
Received by	(signature):		Inspected by (signature):			
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	ent Addres Sonr Cted> ddress Cted> Charge Cted> cted> cted> cted>	nta E-ma	mber and street, city, state, zip code) g Ave, Evansville, IN, 47712 il		ephone Number 12-421-1986 redacted> pose: Routine Follow-up Complaint Pre-Operational Femporary HACCP Other (list)	Follow-u NO Summary C_1	r) B/2018 P Releas 02/ of Violation NC_	
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
191 C R Lacking date markings on				walk	king cooler.			rrected
Received by				-	cted by (name and title pr edacted>	rinted):		
Received by				Inspected by (signature):				
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Establishm 600 N Owner	no´s ent Addres Weir	ss (nu 1ba	zza #2570 mber and street, city, state, zip code) ich Ave., Evansville, IN, 47711	Telephone Number (812-473-1011 () Owner Purpose: Routine		Date of In (mm/dd/y 02/08 Follow-u NO	r) 3/2018 1p Releas	ID # 10926 e Date 18/2018
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<reda< td=""><td></td><td></td><td></td><td></td><td>Follow-up</td><td>-</td><td>of Violation</td><td></td></reda<>					Follow-up	-	of Violation	
Person in C				▙	Complaint	. 2	() <u>R</u>
<reda< td=""><td></td><td></td><td></td><td></td><td>Pre-Operational</td><td>с</td><td>NC</td><td><u> </u></td></reda<>					Pre-Operational	с	NC	<u> </u>
Responsibl			il	╘	Temporary	Menu Ty	pe (See addi	tional page)
				L	НАССР		\sim	$\sim \sim \sim$
Certified F		er		┞_	Other (list)	1 <u>0</u> 2		$)_4 \bigcirc_5 \bigcirc$
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARF	KED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMA	ARY OF VIOLATIONS" AN	D IN THE 1	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
303	С		Chemical sanitizer bucket	nc	t provided.			
324	C	R	Grease trap maintenance log		•			
021	- U			<u>, </u>				
Received by		-		-	redacted>	rinted):	I	
Received by	(signature)):		Insp	pected by (signature):			
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Establishm	NO´S ent Addres	ss (nu	zza #2578 mber and street, city, state, zip code) ach Ave., Evansville, IN, 4771'	ع ⁾ (elephone Number 312=473=3383) Owner	Date of Inspection (mm/dd/yr) 02/08/2018		ю# 10925
^{Owner}	cted>				urpose: Routine	Follow-u NO		se Date 18/2018
Owner's A				╨	4			
<reda< td=""><td></td><td></td><td></td><td></td><td>Follow-up</td><td></td><td>of Violation</td><td>· ·</td></reda<>					Follow-up		of Violation	· ·
Person in C				┦─	Complaint	\Box_{α} ()) [)
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Responsible			il	┶	Temporary	Menu Ty	pe (See addi	tional page)
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Certified Fo		er		┨_	Other (list)	1 <u>0</u> 2	<u></u> 3) ₄ <u>0</u> 5 <u>0</u>
• CRITICAI	LITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARI	KED "C"			
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S						D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violat	ions	6.			
					-			
Received by				-	pected by (name and title predacted>	rinted):		
Received by				Insp	pected by (signature):			
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Establishment Name FRANKLIN STREET DAIRY QUEEN Establishment Address (number and street, city, state, zip code)					Telephone Number (812-424-5821	(mm/dd/yr	Date of Inspection (mm/dd/yr) 02/07/2018		
901 W Franklin St, Evansville, IN, 47710					(<redacted></redacted>				
owner <reda< td=""><td>-tod-</td><td></td><td></td><td></td><td>Purpose:</td><td>Follow-u NO</td><td></td><td>te Date 17/2018</td></reda<>	-tod-				Purpose:	Follow-u NO		te Date 17/2018	
Owner's Ad					✔ Routine				
<reda< td=""><td></td><td></td><td></td><td></td><td>Follow-up</td><td>Summary</td><td>of Violation</td><td></td></reda<>					Follow-up	Summary	of Violation		
Person in C				Complaint) .()		
<reda< td=""><td>cted></td><td></td><td></td><td></td><td>Pre-Operational</td><td><u> </u></td><td>NC_</td><td><u> </u></td></reda<>	cted>				Pre-Operational	<u> </u>	NC_	<u> </u>	
Responsible	e Person's	E-ma	il		Temporary	Menu Type (See additional page)			
					НАССР				
Certified Fo		er			Other (list)	$1 \bigcirc 2$	<u>3</u>	$^{\prime}_{4} \underline{\bigcirc}_{5} \underline{\bigcirc}$	
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• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIS	T AND NARRATIVE COLUMNS M	AARKED "C"				
VIOLATIO		ATED	FROM PREVIOUS INSPECTI	IONS 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.				
Received by (name and title printed): <redacted></redacted>					Inspected by (name and title p <redacted></redacted>	rinted):			
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	e K # ent Addres W Co cted> ddress cted> Charge cted> e Person's	ss (nu lun E-ma	mber and street, city, state, zip code) nbia St, Evansville, IN, 47710	Telephone Number (812-424-5313 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u Yes Summary C_1	r) 8/2018 p Releas	L <u>R</u> 2	
			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	in need of repair		To Be Corrected By		
324	C	R		plumbing in need of repair.			02/22/2018 02/08/2018	
431	NC	R	Storage cabinet under soda machine, s	la machine, soiled, in need of clean up.				
Received by	. (nomo ond	l title i	neinted):	Inspected by (name and title p	rintad);			
<red< td=""><td></td><td></td><td></td><td><redacted></redacted></td><td>rinted).</td><td></td><td></td></red<>				<redacted></redacted>	rinted).			
Received by				Inspected by (signature):				
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<redacted> Routine Owner's Address Follow-up <redacted> Complaint Person in Charge Pre-Operational <redacted> Pre-Operational Responsible Person's E-mail Pre-Operational Certified Food Handler Other (list) <redacted> 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</redacted></redacted></redacted></redacted>	ID# 10857			
Owner's Address Follow-up <redacted> Complaint Person in Charge Pre-Operational <redacted> Pre-Operational Responsible Person's E-mail HACCP Certified Food Handler Other (list) <redacted> 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 Section# C/NC R</redacted></redacted></redacted>	te Date 15/2018			
<redacted> </redacted>				
Person in Charge C NC <redacted> Pre-Operational Menu Type (See adds Responsible Person's E-mail HACCP Other (list) Image: Comparison of the compariso</redacted>				
<iedacted> Temporary Responsible Person's E-mail HACCP Certified Food Handler Other (list) <redacted> 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 Section# C/NC R Narrative To Be C</redacted></iedacted>				
Responsible Person's E-mail HACCP Certified Food Handler Other (list) <redacted> 102030 • 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 Section# C/NC R Narrative To Be C</redacted>	<u> </u>			
Certified Food Handler Other (list) 1 2 3 3 <redacted> • 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 Section# C/NC R Section# C/NC R Narrative To Be C</redacted>	tional page)			
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Section# C/NC R Narrative To Be C				
	BELOW AS "R"			
No noted violations.	orrected By			
Received by (name and title printed): Inspected by (name and title printed): <redacted></redacted>				
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	y Joh ent Addres ain S cted> ddress cted> charge cted> e Person's	ss (nu t. l E-ma	mber and street, city, state, zip code) Jnit A, Evansville, IN, 47708		lephone Number 12-402-5653 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r) B/2018 P Releas 02/ of Violation NC_	
		E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARK	KED "C"			
• VIOLATIC	ON(S) REPE	ATEI) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!	MMA	ARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		D IN THE N	NARRATIVE	BELOW AS "R"
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			+				
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Establishm	ont Nama			Talanhana Numbar	Date of In	spection	ID #
Frien		ט D	Diner	(01か ^E がわかのつつ1 (mm/dd/y		r)	13844
Establishment Address (number and street, city, state, zip code)					02/05	5/2018	
			Evansville, IN, 47715	(<redacted></redacted>			
Owner				Purpose:	Follow-u		se Date
<reda< td=""><td></td><td></td><td></td><td>✔ Routine</td><td>No</td><td>02/</td><td>15/2018</td></reda<>				✔ Routine	No	02/	15/2018
Owner's A				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	с <u></u> U	(
<reda Responsible</reda 				Temporary	Mana Ta		(;])
Responsible	e Person's	E-ma	11	НАССР	Menu Iy	pe (See addi	tional page)
Certified F	ood Handl	er		Other (list)	$1 \bigcirc 2$		$)_{4} \bigcirc _{5} \bigcirc$
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• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"	<u>p</u>		
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Section#	C/NC	R	Narrative			To Be Co	orrected By
	1		No noted violation	ons.			
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