

Establishm 1934 M Owner <reda Owner's Ac <reda Person in C <reda Responsible Certified Fe <reda< th=""><th>D Bal ent Addres N Gre Cted> Idress Cted> harge Cted> Person's</th><th>ss (nu E-ma er</th><th></th><th>Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u NO Summary C</th><th>r) 2/2018 p Releas 03/ r of Violation _ NC _ pe (See addi</th><th></th></reda<></reda </reda </reda 	D Bal ent Addres N Gre Cted> Idress Cted> harge Cted> Person's	ss (nu E-ma er		Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r) 2/2018 p Releas 03/ r of Violation _ NC _ pe (See addi	
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be C	orrected By
			No Violation	S.			
Received by			printed):	Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature):		Inspected by (signature):			
cc:			cc:	-	cc:		



	Diamo ent Address Stringf cted> ddress cted> Charge cted> e Person's	ss (nu tow	mber and street, city, state, zip code) /n Rd, EVANSVILLE, IN, 47711		phone Number 2-435-3423 redacted> oose: outine ollow-up omplaint re-Operational emporary ACCP ther (list)	Follow-u NO Summary C	p Releas 03/ of Violatior NC_	
<redac< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>								
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUM			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
Section	ente	<u> </u>	No noted violatio	one			10 20 00	iiiceicu By
				5113.				
	<u> </u>							
	<u> </u>							
	ļ	<u> </u>						
		1						
		+						
		1						
Received by	(name and	title	printed):	Inspec	ted by (name and title pr	inted).		
<red< td=""><td></td><td></td><td></td><td>-</td><td>edacted></td><td>intou).</td><td></td><td></td></red<>				-	edacted>	intou).		
Received by	(signature)):		Inspec	eted by (signature):			
cc:			cc:			cc:		



Establishm	Food ent Address S Gree cted> cted> Charge cted>	ss (nu een	Store #233 ^{mber and street, city, state, zip code)} River Rd, Evansville, IN, 47715	Purpose: Routine Follow-up Complaint Pre-Operational Temporary	Follow-u NO Summary C	p Releas 03/ of Violation NC	ID # 12046 ie Date 12/2018 is: 1
Certified F		er		HACCP Other (list)	102	<u>•</u> 3C	<u>4</u> <u>0</u> 5 <u>0</u>
• VIOLATIO	DN(S) REPE	ATED	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS F FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N		
Section#	C/NC	R	Narrative				orrected By
431 NC R Milk refrigeration shelv				/ing solied.		03/0	03/2018
Received by	(name and	l title 1	printed):	Inspected by (name and title p	rinted):		
<red< td=""><td></td><td>-</td><td></td><td><redacted></redacted></td><td>,</td><td></td><td></td></red<>		-		<redacted></redacted>	,		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm	ua Ac ent Addres E IIIin cted> ddress cted> Cted> cted> cted> cted> a Person's	ss (nu OIS	lemy - Arama ^{mber and street, city, state, z St, Evansville}	rip code)	Telephone Number ⁽⁸¹²⁻⁴⁰¹⁻⁶³⁰⁰⁾ ⁽ <redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) —</redacted>	Follow-u NO Summary C	r) 2/2018 p Releas 03/ r of Violation _ NC_	$\frac{ID \#}{11990}$ $\frac{12/2018}{R}$ $\frac{D}{R}$ $\frac{D}{R}$ $\frac{D}{R}$ $\frac{D}{R}$	
				T AND NARRATIVE COLUMNS N ONS 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 violations.									
		1							
		1							
Received by	acteo	d>	printed):		Inspected by (name and title printed): <redacted></redacted>				
Received by	(signature):			Inspected by (signature):				
cc:				cc:	cc:				



	Pacet ent Addres <u>Mt Ve</u> <u>Cted></u> <u>Idress</u> <u>Cted></u> <u>harge</u> <u>Cted></u> <u>ood Handle</u>	ss (nui e rnc E-ma	mber and street, city, state, zip code) On Ave, Evansville, IN, 47712	Telephone Number (812-402-6005 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C) /2018 P Releas 03/ of Violation NC_	
			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				orrected By
Section#	Cinc	K	No noted violatio	000		TUBCC	freedu by
				0115.			
Received by		-		Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm 1601 S Owner <reda(Owner's Ac <reda(Person in C <reda(Responsible Certified Fe <reda(< th=""><th>kles ent Addres S Gree Cted> Cted> Cted> Cted> cted cted> cted cted> cted cted cted cted cted cted cted cted</th><th>er</th><th></th><th>(8) (< Pu /</th><th>lephone Number 12-477-2218 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u NO Summary C_</th><th>p Releas 03/ of Violation NC_</th><th></th></reda(<></reda(</reda(</reda(kles ent Addres S Gree Cted> Cted> Cted> Cted> cted cted> cted cted> cted cted cted cted cted cted cted cted	er		(8) (< Pu /	lephone Number 12-477-2218 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C_	p Releas 03/ 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
			No noted violation	ons	-			v
				5115	•			
Received by	acteo	d>		<r< td=""><td>ected by (name and title pr edacted></td><td>rinted):</td><td></td><td></td></r<>	ected by (name and title pr edacted>	rinted):		
Received by	(signature):		Insp	ected by (signature):			
cc:			cc:			cc:		



Establishm	fish (ent Addres	ss (nu	II #7505 mber and street, city, state, zip code) xpressway, Evansville, IN, 47715	Telephone Number (812-401-3474 (<redacted> Purpose:</redacted>	Date of In (mm/dd/yr 02/28 Follow-u	。 8/2018	ID # 11707 se Date
<reda< td=""><td>cted></td><td></td><td></td><td>Routine</td><td>No</td><td></td><td>10/2018</td></reda<>	cted>			Routine	No		10/2018
Owner's A	ddress			Follow-up	Summary	of Violation	
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td>_</td><td></td></reda<>				Complaint		_	
Person in C				Pre-Operational			J _R U
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary			
Responsible	e Person's	E-ma	11	НАССР	Menu I y	pe (See addi	tional page)
Certified Fo		er		Other (list)	102	<u>O</u> 3 <u>C</u>	$)_4 \textcircled{0}_5 \bigcirc$
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	DN(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 C	orrected By
			No noted violation	ons.			
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishme Gattit Establishme 316 N Owner <redae Person in C <redae Responsible Certified Fe <redae< th=""><th>COWN ent Address Gree cted> ddress cted> Charge cted> e Person's</th><th>en F</th><th>mber and street, city, state, zip code) River Rd, Evansville, IN, 47715</th><th>Telephone Number (812-473-3800 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>Follow-u NO Summary C</th><th>r) 2/2018 p Releas 03/ of Violation NC</th><th></th></redae<></redae </redae 	COWN ent Address Gree cted> ddress cted> Charge cted> e Person's	en F	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	Telephone Number (812-473-3800 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 2/2018 p Releas 03/ of Violation NC	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N				
			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 violati	ons.			
						<u> </u>	
ļ	<u> </u>	<u> </u>				<u> </u>	
	<u> </u>						
	<u> </u>	<u> </u>					
		<u> </u>					
		──				<u> </u>	
		 					
- · · · ·	ļ		· · ·			<u> </u>	
Received by			· · · · ·	Inspected by (name and title provided by (name and title p	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm	Murj ent Addres Davis I cted> ddress cted> Charge	ss (nu Lan	ys Take N Bake ^{mber and street, city, state, zip code)} nt Dr Suite C, Evansville, IN, 47715	Purpose: Routine Follow-up Complaint Pre-Operational	Follow-u NO Summary	p Release 03/ of Violation	ID # 11614 12/2018 IS:
Responsible Certified F <reda(< td=""><td>ood Handle</td><td></td><td>il</td><td>Temporary HACCP Other (list)</td><td>Menu Type $1 \bigcirc 2$</td><td>be (See addi $O_3 \bullet$</td><td>4050</td></reda(<>	ood Handle		il	Temporary HACCP Other (list)	Menu Type $1 \bigcirc 2$	be (See addi $O_3 \bullet$	4050
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M 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	orrected By
177	С		Food in walk in cooler n	ot covered.		Co	rrected
136 C Employees beverage uncovered				d in restricted area		Co	rrected
Received by	acteo	d>		Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm	sville ent Addres Lincol cted> ddress cted> charge	ss (nu In <i>I</i>	hristian Schoo mber and street, city, state, zi Ave, Evansville	p code)	Telephone Number (812-477-7777 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational</redacted>	Follow-u NO	r) 8/2018 p Releas	
Responsible Certified Fe	ood Handl		1		Temporary HACCP Other (list)	Menu Type $1 \bigcirc 2$	be (See addined) $O_3 \bigcirc 3$	$\frac{1}{4050}$
• VIOLATIC	. ITEMS AF DN(S) REPE	ATED		AND NARRATIVE COLUMNS N ONS ARE DENOTED IN THE "SU		D IN THE N	•	
Section#	C/NC	R		Narrative			To Be Co	orrected By
No noted viola					ons.			
							L	
							·	
							·	
Received by	(name and	l title j	printed):		Inspected by (name and title pr	cinted):		
<red< td=""><td></td><td>-</td><td>,</td><td></td><td><redacted></redacted></td><td>,</td><td></td><td></td></red<>		-	,		<redacted></redacted>	,		
Received by					Inspected by (signature):			
cc:				cc:		cc:		



	NO´S ent Addres	s (nu	zza ^{mber and street, city, state, zip code)} River Rd, Evansville, IN, 47715	(8)	elephone Number 812 ^E 471-8585) Owner	Date of In: (mm/dd/yr 03/02		ID# 11581	
owner <reda< td=""><td></td><td></td><td>, , ,</td><td>Pu</td><td>Irpose:</td><td>Follow-u NO</td><td></td><td>$\frac{10}{2}$</td></reda<>			, , ,	Pu	Irpose:	Follow-u NO		$\frac{10}{2}$	
				<u> </u>	Routine				
Owner's Ad					Follow-up		of Violation		
Person in C				┞──	Complaint			$ \underline{R} 0 $	
<reda< td=""><td></td><td></td><td></td><td></td><td>Pre-Operational</td><td>с<u> </u></td><td>NC</td><td><u> </u></td></reda<>					Pre-Operational	с <u> </u>	NC	<u> </u>	
Responsible	e Person's	E-ma	0	Temporary Menu Type (See additional p HACCP Image: Contrast of the second sec					
				╞─	4				
Certified For Ce		er			Other (list)	1 <u>U</u> 2		<u>4050</u>	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M						
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N			
Section#	C/NC	R	Narrative					orrected By	
393 NC Dumpster lacking dr				ain	plug.		03/2	6/2018	
Received by			printed):		bected by (name and title proceeded)	rinted):			
Received by					bected by (signature):				
cc:			cc:			cc:			



1500 (Owner <reda Owner's Ad <reda Person in C <reda Responsible</reda </reda </reda 	I Sch ent Addres Oak F Cted> ddress Cted> Cted> cted> cted> a Person's	ss (nu <mark>1</mark> ill E-ma	mber and street, city, state, zip code) Rd., EVANSVILLE, IN, 47711	00 (v № v) (v	lephone Number 12-469-5087 Contracted Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r) 7/2018 P Releas 03/ of Violation NC	
<redac< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>								
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative	—				orrected By
Section	ente	K	No noted violatio	one			10 50 00	freeded by
				5115	•			
		<u> </u>						
Received by	(name and	title	printed):	Insn	ected by (name and title pr	inted):		
<red< td=""><td></td><td></td><td></td><td>-</td><td>edacted></td><td>interaj.</td><td></td><td></td></red<>				-	edacted>	interaj.		
Received by				Inspected by (signature):				
cc:			cc:			cc:		



800 N 0		s (nu	# 432 ^{mber and street, city, state, zip code) er Rd Ste 101, Evansville, IN, 47715}						
^{Owner}	cted>			Purpose:	Follow-u NO	se Date 10/2018			
Owner's A				Follow-up	Summary of Violations:				
<reda< td=""><td>cted></td><td></td><td></td><td>Complaint</td><td>-</td><td></td></reda<>	cted>			Complaint	-				
Person in C				Pre-Operational	1	I_{R}			
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary					
Responsible	e Person's	E-ma	11	НАССР	Menu I y	pe (See addi	tional page)		
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u>O</u> 3	$\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$		
1		E IDI							
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M		D IN THE N	JARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative				orrected By		
177	C		Food not being stored six inche	es above the floor.			28/2018		
250	NC		Improper storage of				28/2018		
Received by				Inspected by (name and title provided by (name and title p	rinted):				
Received by	(signature)):		Inspected by (signature):					
cc:			cc:		cc:				



Establishm	ood Handl	ss (nu tov E-ma	School K-5 mber and street, city, state, zip code) vn Rd, EVANSVILLE, IN, 47711	00 (v № v) (v	lephone Number 312-435-8595 <redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 03/ of Violation NC_	
h		E ID	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	XFD "C"			
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violatio	ons	-			C
				2110	-			
Received by				-	ected by (name and title predacted>	rinted):		
Received by	v (signature):		Insp	bected by (signature):			
cc:			сс:			cc:		



Establishm	cted> cted> cted> cted> cted> cted> cted>	rt A	In #102 mber and street, city, state, zip code) Ave, Evansville, IN, 47714	Telephone Number (812-475-1099 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary</redacted>	Follow-u NO Summary C	p Releas 03/ of Violation NC	ID # 11328 se Date 12/2018 ns: D R O tional page)
Certified Fo		er		HACCP Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{)}_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
• VIOLATIC	ON(S) REPE	ATEI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N PFROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No violations				
Received by				Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



500 D Owner <reda Owner's Ad <reda Person in C <reda Responsible Certified F <redac< th=""><th>A LC ent Addres iamoi cted> ddress cted> cted> cted> e Person's</th><th>ss (nu nd E-ma</th><th>mber and street, city, state, zip code) Ave, Evansville, IN, 47711 il</th><th colspan="6">(812-422-6834 (mm/dd/yr) 1 (<rédacted> 03/01/2018 1 Purpose: No 03/11/ ✓ Routine No 03/11/ Follow-up Complaint Summary of Violations: Pre-Operational C_ NC_ Temporary Menu Type (See additional) 1 Other (list) 1 2 SMARKED "C" *C"</rédacted></th></redac<></reda </reda </reda 	A LC ent Addres iamoi cted> ddress cted> cted> cted> e Person's	ss (nu nd E-ma	mber and street, city, state, zip code) Ave, Evansville, IN, 47711 il	(812-422-6834 (mm/dd/yr) 1 (<rédacted> 03/01/2018 1 Purpose: No 03/11/ ✓ Routine No 03/11/ Follow-up Complaint Summary of Violations: Pre-Operational C_ NC_ Temporary Menu Type (See additional) 1 Other (list) 1 2 SMARKED "C" *C"</rédacted>					
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	NARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative			To Be Co	orrected By		
Section	Crite	n	No noted violatio	222		TOBCO	nicettu Dy		
				JII5.					
Received by				Inspected by (name and title p <redacted></redacted>	rinted):				
Received by	(signature):		Inspected by (signature):					
cc:			cc:		cc:				



Establishm	City ent Addres W Fra cted> ddress cted> charge cted> e Person's	ss (nu ank E-ma	agles #4023 mber and street, city, state, zip code) clin St, Evansville, IN, 47712		lephone Number 12-422-2956 Centre Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r) /2018 p Releas 03/ of Violation 	
		E ID	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"			
VIOLATIC	ON(S) REPE	ATEI	D 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	j.			
Received by				-	rected by (name and title proceeded)	rinted):		
Received by	(signature)):		Insp	ected by (signature):			
cc:			cc:			cc:		



Establishm	Parl ent Address _incol cted> ddress cted> cted cted> cted cted cted cted cted cted cted cted	E-ma	Academy 6-8 mber and street, city, state, zip code) Ave., EVANSVILLE, IN, 47715	Telephone Number (812-469-5089 (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C) /2018 P Releas 03/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		ID IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violati	ons.			
Received by		-	printed):	Inspected by (name and title p	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm	A HU ent Addres St.Jc cted> ddress	ss (nu DSE	#316305 mber and street, city, state, zip code) ph Ave, Evansville, IN, 47712	Telephone Number (812-424-4433 (<redacted> Purpose: Purpose: Follow-up Complaint</redacted>	^{Follow-u} NO	r) 5/2018 p Releas 03/	
Person in C	harge			Pre-Operational	$ _{\rm c}$ U		J _R U
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary			
Responsible	e Person's	E-ma	1	НАССР	Menu Ty	pe (See addi	tional page)
Certified F		er		Other (list)	1 <u>0</u> 2	<u></u> 3	<u>)4</u> 050
• CRITICAI	LITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	DN(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
			No noted violation	ons.			
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



	K #2 ent Addres E Rive Cted> Idress Cted> harge Cted> Person's	ers (nur E-mai	mber and street, city, state, zip code) ide Dr, Evansville, IN, 47714	Telephone Number (812-477-6352 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C) 5/2018 p Releas 03/ of Violation) _R _0
			INTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUM		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
Section#	C/IIC	K				TODUCU	freed by
			No noted violation	ons.			
p · · · ·			· · · 1\	x . 11	• . •		
Received by		-		Inspected by (name and title pr <redacted></redacted>	inted):		
Received by	(signature)):		Inspected by (signature):			
					<i>cc</i> :		
cc:			cc:		cc:		



Establishme Monte		ri A	Academy	Telephone Number	Date of Ins (mm/dd/yr)	ID# 11217
Establishm	ent Addres	s (nu	mber and street, city, state, zip code) Ave., EVANSVILLE, IN, 47714	() Owner	03/02	/2018	
Owner <reda Owner's Ac</reda 				Purpose: Routine Follow-up	Follow-u NO Summary		se Date 12/2018
Person in C <reda< td=""><td>cted></td><td></td><td></td><td>Complaint Pre-Operational Temporary</td><td>с_0</td><td></td><td><u> </u></td></reda<>	cted>			Complaint Pre-Operational Temporary	с_ 0		<u> </u>
Responsible Certified Fo	ood Handle		il 	HACCP Other (list)	$1 \underbrace{0}_{\text{Menu Typ}}$	be (See addi $ \bigcirc_3 \textcircled{\bullet} $	tional page)
• VIOLATIC	ON(S) REPE	ATED	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		ID IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm 1535 Owner <reda Owner's Ad <reda Person in C <reda Responsible Certified Fe <reda< th=""><th>ent Addres Joyce Joyce ddress Cted> cted> cted> cted> cted> cted> cted> cted> cted></th><th>ss (nu A) E-ma</th><th></th><th>Telephone Number (812-469-5088 (<redacted> Purpose:</redacted></th><th>Follow-u No Summary</th><th>r) 2/2018 p Releas 03/ v of Violation _ NC_</th><th></th></reda<></reda </reda </reda 	ent Addres Joyce Joyce ddress Cted> cted> cted> cted> cted> cted> cted> cted> cted>	ss (nu A) E-ma		Telephone Number (812-469-5088 (<redacted> Purpose:</redacted>	Follow-u No Summary	r) 2/2018 p Releas 03/ v of Violation _ NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N) 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 violation	ons			
				0110.			
						ļ	
Received by	(name and	title	printed):	Inspected by (name and title p	rinted).	L	
<red< td=""><td></td><td></td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></red<>				<redacted></redacted>			
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



	Bar ent Addres W Ma cted> ddress cted> Charge cted> cted> e Person's	ss (nu I ryl E-ma	mber and street, city, state, zip code) and St., Evansville, IN, 47720	00 (v № v) (v	lephone Number 12-425-1616 (redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	p Releas 03/ of Violation	$\frac{ID \#}{11191}$ se Date $12/2018$ hs: $\mathbf{L} \mathbf{R} 1$ tional page) 24050
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARK	ED "C"			
	. ,		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				To Be Co	orrected By
234 NC R Bulk container scoop lacking					oper handle.		03/0	03/2018
D 11				T	. 11 (1.1.1	1		
Received by	· ·			-	ected by (name and title pr edacted>	inted):		
Received by	(signature):		Insp	ected by (signature):			
cc:			cc:			cc:		



Establishm	y's C ent Addres V St.Jc cted> cted> cted> cted> cted>	is (nu DSE	neral Store #2296 ^{mber and street, city, state, zip code)} ph Ave, EVANSVILLE, IN, 47720	Telephone Number (812-423-2804 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-u NO Summary C_2	r) 6/2018 p Releas 03/	_ <u>_</u> <u>0</u>	
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$	
• VIOLATIO	ON(S) REPE	ATEE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N			
Section#	C/NC	R	Narrative				orrected By	
344	NC		Hand washing station blocke	, , ,			rrected	
177	C	<u> </u>		Frozen food products improperly stored. Lift 6 inches off the ground.				
136	С		Employees must use designated area for eati	ng and drinking during	breaks.	Co	rrected	
Received by				Inspected by (name and title pr <redacted></redacted>	rinted):			
Received by	(signature)):		Inspected by (signature):				
cc:			cc:		cc:			



Establishm	ain D ent Address Cover cted> ddress cted> charge cted> e Person's	s (nu t A	#3731 mber and street, city, state, zip code) ve, Evansville, IN, 47714	Telephone Number (812-423-3731 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C	r) /2018 p Releas 03/ of Violation NC	$ID # 11128$ $e Date 11/2018$ Is: R_1 $tional page)$
• CRITICAL	. ITEMS AR	E IDF	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	AARKED "C"			
• VIOLATIO		ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				orrected By
431 NC R Cleaning of overall fac				lity needed.		03/0)9/2018
Received by	(name and	title 1	printed).	Inspected by (name and title p	rinted).		
<red< td=""><td></td><td>-</td><td>,</td><td><redacted></redacted></td><td>interaj.</td><td></td><td></td></red<>		-	,	<redacted></redacted>	interaj.		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishment					Telephone Number	Date of In	spection	ID #	
			nunity School		(812-469-5085		., 2/2018	11090	
Establishment	Address Rive	s (nur rsi(nber and street, city, state, zij de Dr, EVANSV	^{p code)} /ILLE, IN, 47714	(<redacted></redacted>	03/02	/2010		
Owner					Purpose:	Follow-u			
<redacte< td=""><td></td><td></td><td></td><td></td><td>✓Routine</td><td>No</td><td>03/</td><td>12/2018</td></redacte<>					✓ Routine	No	03/	12/2018	
Owner's Addre					Follow-up	Summary	of Violation	IS:	
<redacte< td=""><td></td><td></td><td></td><td></td><td>Complaint</td><td></td><td>(</td><td>\cap</td></redacte<>					Complaint		(\cap	
Person in Char <redacte< td=""><td></td><td></td><td></td><td></td><td>Pre-Operational</td><td>с_U</td><td></td><td></td></redacte<>					Pre-Operational	с_ U			
Responsible Pe		E-mai	1		Temporary	Menu Tv	oe (See addii	ional page)	
					НАССР				
Certified Food		r			Other (list)	1 <u>0</u> 2	<u>()</u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$	
		E IDE	NTIFIED IN THE CHECKLIST	AND NARRATIVE COLUMNS M	IARKED "C"				
• VIOLATION(S	S) REPEA	ATED	FROM PREVIOUS INSPECTIC	ONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section# C	C/NC	R		Narrative			To Be Co	orrected By	
				No violations	•				
Received by (na	ame and	title p	rinted):	Inspected by (name and title p	rinted):				
<redac< td=""><td></td><td>-</td><td>, ,</td><td></td><td><redacted></redacted></td><td>/</td><td></td><td></td></redac<>		-	, ,		<redacted></redacted>	/			
Received by (sig	gnature)	:		Inspected by (signature):					
cc:				cc:		cc:			



4501 Owner <reda Owner's Ad <reda Person in C <reda Responsible</reda </reda </reda 	Ice C ent Addres _incol cted> ddress cted> cted cted> cted cted> cted cted> cted cted cted cted cted cted cted cted	ss (nu	mber and street, city, state, zip code) Ave., Evansville, IN, 47714	Telephone Number (812-477-3131 (<redacted> Purpose: Purpose: Purpose: Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_1	r) 2/2018 P Releas 03/ of Violation NC	
<redac< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>							
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THF N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
303 C Three compartment sink not set up with third				basin filled with sanitize	r water		rrected
					i matori		23/2018
-100				Rubber based coving missing in kitchen area.			
Received by			printed):	Inspected by (name and title p	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishma Leger Establishma 1050 S Owner <redaa Person in C <redaa Responsible Certified Fa</redaa </redaa 	nds ent Addres S Wei Cted> ddress Cted> Cted> charge Cted> e Person's	E-ma	nber and street, city, state, zip code) ach Ave, Evansville, IN,	47714	Telephone Number (812-476-7444 (<redacted> Purpose: V Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 6/2018 p Releas 03/ of Violation 	
			NTIFIED IN THE CHECKLIST AND NARRATIVE					
			FROM PREVIOUS INSPECTIONS ARE DENOTED		MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Na No note	arrative	222		To Be Co	orrected By
			INO NOTE:	a violatio	ons.			
		<u> </u>						
Received by		-	rrinted):		Inspected by (name and title provided by (name and title p	rinted):		
Received by	(signature):			Inspected by (signature):			
cc:			cc:			cc:		



Establishmen		_		Telephone Number	Date of Inspection I (mm/dd/yr)		ID #
Jaya´s	s Au	the	entic Foods	(812-422-6667	03/02	, ,	11058
Establishmen	t Addres	s (nu	nber and street, city, state, zip code)	<pre></pre>	03/02	/2010	
4	: FOL	Irtr	St, EVANSVILLE, IN, 47708				
^{Owner}	teds			Purpose:	Follow-uj NO		^{te Date} 12/2018
Owner's Add				Follow-up			
<redact< td=""><td></td><td></td><td></td><td>Follow-up Complaint</td><td>Summary</td><td>of Violation</td><td></td></redact<>				Follow-up Complaint	Summary	of Violation	
Person in Cha	arge			Pre-Operational	$\begin{bmatrix} 0 \end{bmatrix}$	NC	_р 1
<redact< td=""><td>ted></td><td></td><td></td><td>Temporary</td><td>L</td><td>nc</td><td> N</td></redact<>	ted>			Temporary	L	nc	N
Responsible P	Person's	E-mai	1	НАССР	Menu Typ	e (See addi	tional page)
				Other (list)		\bigcirc	\bigcirc
Certified Food		er		Other (list)	$1 \underline{\bigcirc} 2$		<u>4050</u>
		RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ARKED "C"			
• VIOLATION	(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
232	NC	R	Soda gun dispensers ne	ed cleaned.		Co	rrected
Received by (r		-	printed):	Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by (s	signature):		Inspected by (signature):			
cc:			cc:		cc:		



	Spirit	ss (nu	chool ^{mber and street, city, state, zip code)} ve., EVANSVILLE, IN, 47714	(8 (elephone Number 812=476=5984) Owner prose:		^{r)} 3/2018	ID # 11040
<reda< td=""><td>cted></td><td></td><td></td><td></td><td>Routine</td><td colspan="3">Follow-up Release Date 03/10/2018</td></reda<>	cted>				Routine	Follow-up Release Date 03/10/2018		
Owner's Ac					Follow-up		of Violation	
<reda< td=""><td>cted></td><td></td><td></td><td></td><td>Complaint</td><td></td><td>_</td><td>· ·</td></reda<>	cted>				Complaint		_	· ·
Person in C				╠	Pre-Operational	\mathbf{U}_{3}		$) _{R} 0 $
<reda< td=""><td></td><td></td><td></td><td>┢</td><td>Temporary</td><td></td><td></td><td></td></reda<>				┢	Temporary			
Responsible	e Person's	E-ma	il		НАССР	Menu Ty	pe (See addi	tional page)
				┢	Other (list)	\cdot	\bigcirc	$\Omega_{-}\Omega_{-}$
Certified Fo		er				$1 \underline{\bigcirc} 2$		<u>4050</u>
		DE INI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ADL	ZED "C"			
						D IN THE N		DELOW AS "D"
• violatic Section#	C/NC	R	D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU Narrative	IVIIVIA	ARY OF VIOLATIONS" AN	D IN THE F		orrected By
Section#	C/INC	K	No noted violatio	<u></u>	<u></u>		10 De Co	frected by
				5115				
Received by				-	bected by (name and title proceeded by (name and title proceeded)	rinted):		
Received by	(signature)):		Insp	bected by (signature):			
cc:			cc:			cc:		



Establishm	ON El	ss (nu	nentary mber and street, city, state, zip code) de Ave., EVANSVILLE, IN, 47714	Telephone Number (812-469-5084 (<redacted> Purpose:</redacted>	Date of Ins (mm/dd/yr 03/02 Follow-u	^{.,} 2/2018	ID # 11024 se Date
<reda< td=""><td>cted></td><td>I.</td><td></td><td>✓ Routine</td><td>No</td><td></td><td>12/2018</td></reda<>	cted>	I.		✓ Routine	No		12/2018
Owner's A	ddress			Follow-up	Summary	of Violation	
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td>_</td><td></td></reda<>				Complaint		_	
Person in C	0			Pre-Operational	$_{\rm C}$ U		J _R U
<reda< td=""><td></td><td></td><td></td><td>- Temporary</td><td></td><td></td><td></td></reda<>				- Temporary			
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	pe (See addi	tional page)
Certified For		er		Other (list)	1 <u>0</u> 2	<u></u> 3	$)_4 \bigcirc 5 \bigcirc$
• CRITICAI	. ITEMS AF	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO)N(S) REPE	ATEI	D 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.			
						·	
				_			
				_			
						L	
Received by	acteo	d>	· /	Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm 211 Fi Owner <reda Owner's Ad <reda Person in C <reda Responsible Certified Fo <reda< th=""><th>son F ent Addres ielding cted> ddress cted> cted> cted> e Person's</th><th>er</th><th></th><th>Telephone Number (812-477-2496 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>с_0</th><th>) /2018 P Releas 03/ of Violation NC_</th><th></th></reda<></reda </reda </reda 	son F ent Addres ielding cted> ddress cted> cted> cted> e Person's	er		Telephone Number (812-477-2496 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	с_ 0) /2018 P Releas 03/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS 1 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		I		orrected By
			No noted violati	ons.			
				0.101			
Received by	acte	d>		Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	v (signature):		Inspected by (signature):			
cc:			cc:		cc:		



	enda ent Addres Pearl	^{ss (nu} Dr	6 ^{mber and street, city, state, zip code)} , Evansville, IN, 47712	Telephone Number (812-422-2055 (<redacted> Purpose:</redacted>	Date of In: (mm/dd/yr 03/02 Follow-u NO) 2/2018 p Releas	ID # 10999 ee Date 12/2018
				✔ Routine			
Owner's Ad				Follow-up	Summary	of Violation	ns:
Person in C				Complaint		($\mathbf{D}_{\mathbf{R}}$
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>с<u></u></td><td>NC_</td><td></td></reda<>				Pre-Operational	с <u></u>	NC_	
Responsible			il	Temporary	Menu Ty	oe (See addi	tional page)
				НАССР			
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u>3</u>	<u>)4050</u>
• CRITICAL	ITEMS AF	RE ID	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	IARKED "C"	8		
• VIOLATIO)N(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				orrected By
			No noted violation	ons			J
		-					
Received by				Inspected by (name and title p	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



Establishm	e's C ent Addree N Hi Cted> ddress Cted> Charge Cted>	ss (nu gh	nese Cuisine Imber and street, city, state, zip code) way 41, Evansville, IN, 47725	Telephone Number (812-868-8888 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-u NO Summary C_1	r) Z/2018 P Releas 03/ of Violation NC	
Certified F	cted>			Other (list)	1 <u>0</u> 2	<u>()</u> 3(<u>4</u> <u>0</u> 5 <u></u>
• VIOLATIO	DN(S) REPE	ATEI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N		
Section#	C/NC	R	Narrative				orrected By
294 C Chemical sanitizer below required concer				ation in wiping cloth b	uckets.	Co	rrected
Received by	acteo	d>	· /	Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm	no's ent Addres St.JC	ss (nu DSE	zza #2577 ^{nber and street, city, state, zip code)} ph Ave, Evansville, IN, 4	47712	(8 (Pu	lephone Number 312-424-7333) Owner rpose: Routine	Follow-up Re		ID # 10924 e Date 08/2018
Owner's Ac						Follow-up	Summary	of Violation	15:
<reda< td=""><td></td><td></td><td></td><td></td><td></td><td>Complaint</td><td>Ω</td><td>(</td><td></td></reda<>						Complaint	Ω	(
Person in C						Pre-Operational	с <u></u> U		$\mathbf{D}_{\mathbf{R}}$
Responsible			1		-	Temporary	Monu Tu	n (Saa addi	tional page)
Responsible	e i cison s	L-ma	1			НАССР	Wienu Ty		
Certified Fo		er				Other (list)	1 <u>0</u> 2	<u>O</u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$
		RE IDF	NTIFIED IN THE CHECKLIST AND NARRATIVE	E COLUMNS N	MARK	ED "C"			
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUM • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE							D IN THF N	ARRATIVE	RFI OW AS "P"
Section#	C/NC	R		arrative		INT OF VIOLATIONS AN	DINTINE		orrected By
Section	ente	I.		d violati	ons			10 20 00	freedu by
				0110	•				
Received by	(name and	title 1	rinted):		Insp	ected by (name and title pr	rinted).		
<reda< td=""><td colspan="4">Received by (name and title printed): <redacted></redacted></td><td><ľ</td><td>edacted></td><td></td><td></td><td></td></reda<>	Received by (name and title printed): <redacted></redacted>				<ľ	edacted>			
Received by	(signature):			Insp	ected by (signature):			
cc:			cc:				cc:		



1213 Owner <reda Owner's Ad <reda Person in C <reda Responsible Certified F <redac< th=""><th>OP ent Addres W Ma cted> ddress cted> Charge cted> e Person's</th><th>er</th><th>mber and street, city, state, zip code) and St, Evansville, IN, 47710 il</th><th></th><th>relephone Number 812-424-7442 <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>Follow-u NO Summary C</th><th>p Releas 03/ of Violation NC_</th><th></th></redac<></reda </reda </reda 	OP ent Addres W Ma cted> ddress cted> Charge cted> e Person's	er	mber and street, city, state, zip code) and St, Evansville, IN, 47710 il		relephone Number 812-424-7442 <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 03/ of Violation NC_	
• VIOLATIO	DN(S) REPE	ATEI) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "	SUMM	IARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted viola	tion	S.			
-								
Received by	·				spected by (name and title pr redacted>	rinted):		
Received by	(signature):		Ins	spected by (signature):			
cc:			cc:			cc:		



Establishm Auntio Establishm 800 N Owner <reda Person in C <reda Responsible</reda </reda 	e Ani ent Addres Gree cted> ddress cted> Charge cted>	ss (nu en f	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715		lephone Number 12-475-0201 (redacted) rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u NO Summary C	p Releas 03/ of Violation NC	
Certified For Ce		er		$- \underbrace{ 0 \text{ ther (list)}}_{2 \text{ other (list)}} 1 \underbrace{ 2 \underbrace{ 0 }_{3} \underbrace{ 0 }_{4} \underbrace$				<u>)₄<u>0</u>5<u>0</u></u>
• VIOLATIO	ON(S) REPE	ATEI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!			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):		Inspected by (signature):				
cc:			сс:			cc:		



Establishm	Fram ent Addres W Fra cted> ddress cted> cted> cted>	ink	LOUNGE ^{mber and street, city, state, zip code)} lin St, EVANSVILLE, IN, 47712	Telephone Number (812-423-5355 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary</redacted>	Follow-u NO Summary C	p Releas 03/ of Violation NC_	
Certified Fo		er		HACCP Other (list))4050		
	ON(S) REPE	ATEI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU Narrative		D IN THE N		
Section#	C/NC	R				TO Be Co	orrected By
			No noted violation	ons.			
				· · · · ·			
Received by	·			Inspected by (name and title printed): <redacted></redacted>			
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



	Inam		Drean Cuisine	Telephone Number (917-932-3356	spection ·) 7/2018	ю# 13711			
519-520 Main St, Evansville, IN, 47708					(<redacted></redacted>				
^{Owner}	cted>			Purpose:		e Date 09/2018			
Owner's A					Follow-up	Summary of Violations:			
<reda< td=""><td></td><td></td><td></td><td></td><td>Complaint</td><td colspan="4">$\begin{bmatrix} \underline{2} & \underline{1} & \underline{2} \end{bmatrix}$</td></reda<>					Complaint	$\begin{bmatrix} \underline{2} & \underline{1} & \underline{2} \end{bmatrix}$			
<reda< td=""><td></td><td></td><td></td><td></td><td>Pre-Operational</td><td>с</td><td>NC</td><td></td></reda<>					Pre-Operational	с 	NC		
Responsible			il		- Temporary	Menu Type (See additional page)			
					HACCP Other (list)				
Certified F		er			Other (list)	$1 \underline{\bigcirc} 2$	$\underline{\bigcirc}_{3}\underline{\bigcirc}$	<u>/4050</u>	
			ENTIFIED IN THE CHECKLIST A			D IN THF N	ARRATIVE	BELOW AS "P"	
Section#	C/NC	R	FROM FREVIOUS INSPECTION	Narrative	MWART OF VIOLATIONS AN	DINTIE		orrected By	
218	NC		Automatic dish machine no		nitizer basin needs used u	ntil fixed.)6/2018	
193	С		Time mark needed for holdin	e mark needed for holding of warm foods for no more than 4 hours. Discard after 4 hours. $02/28/20$					
294	С		Cleaner being used in sanitizer buckets as sanitizer.					02/27/2018	
Received by (name and title printed): <redacted></redacted>				Inspected by (name and title printed):					
Received by (signature):					Inspected by (signature):				
cc:			c	c:					



Establishm 4700 V Owner <redae Owner's Ad <redae Person in C <redae Responsible Certified Fe <redae< th=""><th>ucks ent Addres V Lloy ddress cted> cted> cted> cted> e Person's</th><th>ss (nu d E E-ma er</th><th></th><th>Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u No Summary C_O</th><th>p Releas 03/ r of Violation NC</th><th></th></redae<></redae </redae </redae 	ucks ent Addres V Lloy ddress cted> cted> cted> cted> e Person's	ss (nu d E E-ma er		Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u No Summary C_O	p Releas 03/ r of Violation NC	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		ND IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violati	ons			
Received by	acte	d>		Inspected by (name and title printed): <redacted></redacted>			
Received by	v (signature):		Inspected by (signature):			
cc:			cc:		cc:		



	ent Addres E MOI Cted> ddress Cted> Cted> Charge Cted> e Person's	ss (nu rgð E-ma	mber and street, city, state, zip code) In Ave, Evansville, IN, 47715	(٤ (₽ι	Performe Number 12-437-2572 (redacted) rrpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	p Releas 03/ of Violation NC_		
·		RE ID	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARI	KED "C"				
• VIOLATIO	DN(S) REPE	ATEI) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI	JMMA	ARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				To Be Co	orrected By	
			No noted violati	ons	5.				
		1							
Received by (name and title printed): <redacted></redacted>					Inspected by (name and title printed): <redacted></redacted>				
Received by	/ (signature):		Insp	bected by (signature):				
cc:			cc:			cc:			



Establishm 209 N owner <reda(Owner's Ac <reda(Person in C <reda(Responsible Certified Fe <reda(< th=""><th>ens E ent Addres Wab cted> ddress cted> cted> cted> e Person's</th><th>er</th><th>ewery & Pub mber and street, city, state, zip code) h Ave., Evansville, IN, 47712 il</th><th>(8) (< Pu</th><th>lephone Number 12-909-1956 Complaint Pre-Operational Temporary HACCP Other (list) Complement</th><th>Follow-u NO Summary C</th><th>p Releas 03/ of Violation NC_</th><th></th></reda(<></reda(</reda(</reda(ens E ent Addres Wab cted> ddress cted> cted> cted> e Person's	er	ewery & Pub mber and street, city, state, zip code) h Ave., Evansville, IN, 47712 il	(8) (< Pu	lephone Number 12-909-1956 Complaint Pre-Operational Temporary HACCP Other (list) Complement	Follow-u NO Summary C	p Releas 03/ of Violation NC_	
) 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
			Ok to open and op	bera	ate.			
			Congratulation					
Received by			. ,	Inspected by (name and title printed): <redacted></redacted>				
Received by	(signature):		Insp	ected by (signature):			
cc:			cc:			cc:		