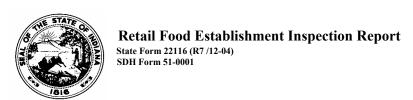
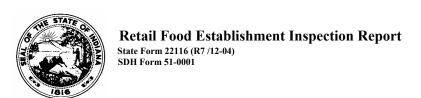


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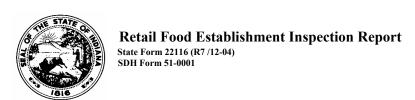
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			mber and street, city, state, zip code)	()Owner _	03/20	/2018	
2220 N	V Gre	en	River Rd, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
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• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
187	С		Potentially hazardous food not being he	ld at required tempe	rature		rrected
107			Totaliany hazarada loca het being he	Ta at regained tempe	rataro.		Toolog
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Popeye's Chicken	Establishme					Telephone Number	Date of Ins (mm/dd/yr		ID#
Stablishment Address (number and street, city, state, zip code) 3300 N 1st Ave, Evansville, IN, 47710	Pope	ye s	Cr	nicken		812-423-4291			12072
Purpose: Purpose: Purpose: Pollow-up Release Date O3/29/20/18	Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	_		03/19/	2010	
EVANSVIlle's Favorite Chicken Owar's Address < redacted>	3300 [N 1st	<u> Av</u>	<u>e, Evansville, IN, 4771</u>	0	<re><redacted></redacted></re>			
Owner's Address Follow-up Complaint						Purpose:	^		
Complaint Charge Complaint Complai	4		<u>s F</u>	avorite Chicken		Routine	No	03/	<u> 29/2018</u>
Person in Charge Person's E-mail Person's E-mail Temporary HACCP Dither (list) Dother (list) D	_					Follow-up	Summary	of Violation	is:
Responsible Person's E-mail Temporary HACCP Dither (list)						Complaint	\cap	1	1 1
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Certified Food Handler Dither (list) 1020304050					Temporary) / m			
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*Credacted> *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	Contified Food Handler Other (list)					•),(),()_5()		
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*VIOLATIONS" REPLATED 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 218 NC R Freezer unit in need of repair/removal of excess ice accumulation. 03/19/2018 03/19/201			E INI	'NITIGIEN IN THE CHECK! IST AND NADDAT	IVE COLUMNS N	AADKED "C"			
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218 NC R Freezer unit in need of repair/removal of excess ice accumulation. 03/19/2018 0				FROM PREVIOUS INSPECTIONS ARE DENO		MMARY OF VIOLATIONS" AN	D IN THE N.		
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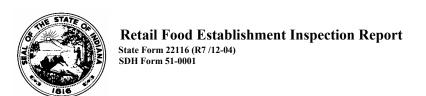
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			mber and street, city, state, zip code)	() Owner	03/20	2018	
6401 E	Lloy	d E	xpressway, Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner	۱۸/:۱۵	<u> </u>		Purpose:	Follow-up		se Date
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Owner's A				Follow-up	Summary	of Violation	as:
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			arket	812-402-5361	03/20	/2018	11949
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>			
Owner	LiOy	u L	xpressway, Evansville, IN, 47715		F-11	. I D-1	se Date
	resh l	Ma	rket Inc	Purpose:	Follow-uj		/30/2018
Owner's Ac		via	TROC IIIO	Follow-up		of Violation	
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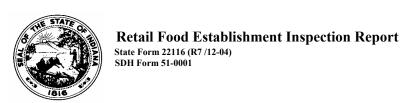
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LKma	art Ind	C		812-473-7222	03/20/	2010	11882
			mber and street, city, state, zip code)	<pre></pre>	03/20/	2010	
2345 (Cove	<u>t A</u>	ve, Evansville, IN, 47714	<re><redacted></redacted></re>			
Owner	- T			Purpose:	Follow-up		se Date
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			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
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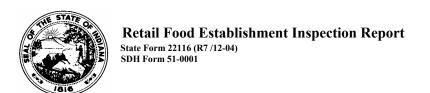
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				812-471-5755	03/19	/2018	11776
			mber and street, city, state, zip code) ON Ave #1, Evansville, IN, 47714	' <redacted></redacted>			
Owner		<u> </u>	<u> </u>	Purpose:	Follow-up	Releas	se Date
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			mber and street, city, state, zip code)	T	03/19/	2018	
701 N	Burk	haı	rdt Rd, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
KEN E		<u>ER</u>	, II	✓ Routine	No	03/	29/2018
Owner's Ac				Follow-up	Summary o	f Violatio	ns:
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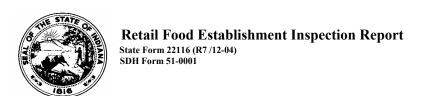
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Made	eleine	S		(812-491-8611			11500
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	() Owner	03/20/	2018	
423 S	E Sed	con	d Street, Evansville, IN, 47713	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Tyra S		K		✓ Routine	No	03/	30/2018
Owner's A				Follow-up	Summary of	of Violation	ns:
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		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IADVED "C"	<u> </u>		
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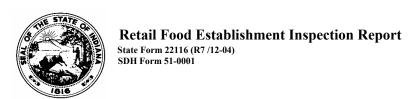
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Establishme		De	eli & Meat Shop	Telephone Number (812-401-1030	Date of Ins (mm/dd/yr		тр# 11492
			mber and street, city, state, zip code)		03/23	/2018	11432
			re, Evansville, IN, 47710	<pre>(<redacted></redacted></pre>			
Owner Charle	es M I	Hol	der	Purpose: Routine	Follow-up		se Date // 02/2018
Owner's Ac				Follow-up		of Violation	
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Person in C				Pre-Operational	$c_{\rm C}$	NC_	I_{R}
Responsible			9	Temporary	М Т	- (C 1.1:	tional page)
Kesponsible	e rerson s	L-IIIA	II.	НАССР	Menu Typ	e (see aaai	iionai page)
Certified Fo		er		Other (list)	$1 \bigcirc 2$	\bigcirc_3	$0.4 \bigcirc 5 \bigcirc$
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• CRITICAL	ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY 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.			
Received by		_	printed):	Inspected by (name and title p	rinted):		
Received by	(signature):		Inspected by (signature):			
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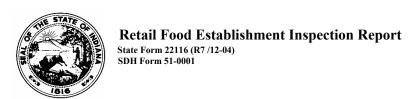
							I:
Metro		rts	Center	Telephone Number (812-479-5425)	Date of Ins (mm/dd/yr	·j	то# 11464
			mber and street, city, state, zip code) 1 Tre Dr, EVANSVILLE, IN, 47715	()Owner	03/20	/2018	
Owner GHJQ			, ,	Purpose:	Follow-uj		se Date // 30/2018
Owner's Ac				 			
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>_ `</td><td>of Violation</td><td>_</td></reda<>				Follow-up	_ `	of Violation	_
Person in C	harge			Complaint Pre-Operational	$\begin{bmatrix} 0 \end{bmatrix}$	$_{\rm NC}$ ($0_{\rm R}$
<reda< td=""><td>cted></td><td></td><td></td><td>Temporary</td><td>·</td><td>. NC</td><td> K</td></reda<>	cted>			Temporary	·	. NC	K
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	oe (See addi	tional page)
C (C IE	1 77 11			Other (list)	.0.		\bigcirc
Certified Fo	ood Handl	er			1 <u></u> 2	<u> </u>	<u> 405</u>
• CRITICAL	. ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by	(name and	title p		Inspected by (name and title p	rinted):		
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Received by	(signature):		Inspected by (signature):			
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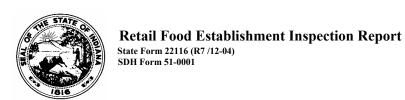
Establishment Name		Telephone Number	Date of Inspe (mm/dd/yr)	ction	ID#
Wesselmans Sonntag		812-424-3549	03/23/2	0010	11442
Establishment Address (number and street, city, state		() Owner	03/23/2	2010	
700 Sonntag Ave., EVANS\	/ILLE, IN, 47712	<re><reuacieu></reuacieu></re>			
Owner WINKLER INC		Purpose:	Follow-up NO		Date 02/2018
Owner's Address		Follow-up	Summary of	Violation	ns:
<redacted></redacted>		Complaint	-		
Person in Charge		Pre-Operational	$ _{\mathbf{C}}$ U	NC_	l _R I
<redacted></redacted>		Temporary			
Responsible Person's E-mail		HACCP	Menu Type	(See addi	tional page)
		Other (list)	-	٦.6	$\bigcap\bigcap$
Certified Food Handler <redacted></redacted>	1 2	<u>3</u> C	<u> 4050</u>		
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLE	IST AND NARRATIVE COLUMNS M	AARKED "C"			
VIOLATION(S) REPEATED FROM PREVIOUS INSPEC	TIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NAI	RRATIVE	BELOW AS "R"
Section# C/NC R	Narrative		7	To Be Co	orrected By
431 NC R Walk	in cooler fans in nee	d of cleaning.		03/2	27/2018
Received by (name and title printed):	T	Inspected by (name and title p	rinted):		
<redacted></redacted>		<redacted></redacted>			
Received by (signature):		Inspected by (signature):			
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Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#
Wend	dy′s ≉	#32	26	812-477-4522	03/19/		11437
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	03/19/	2010	
	_inco	n A	Ave., Evansville, IN, 47714	<re><reuacieu></reuacieu></re>			
Owner SERV	US, I	nc.		Purpose:	Follow-up NO		se Date //29/2018
Owner's Ac				Follow-up	Summary o	of Violation	ns:
<reda< td=""><td>cted></td><td></td><td></td><td>Complaint</td><td>1</td><td></td><td></td></reda<>	cted>			Complaint	1		
Person in C				Pre-Operational	\mathbf{C}^{-1}	NC_	I _R I
<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	HACCP	Menu Type	(See addi	tional page)
G .10 17				Other (list)	-0.0		\bigcirc
Certified Fo		er			$1 \bigcirc 2$	<u> </u>	<u>/405</u>
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
191	С		Ready to eat food lacking	date marking			rrected
295	NC	R	Microwave in need of				rrected
233	110	11	Wildiowave in ficed of	cicaring.		- 00	neolea
Received by	`			Inspected by (name and title pr	rinted):		
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Received by	(signature):		Inspected by (signature):			
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Establishm				Telephone Number Date of Inspection (mm/dd/yr)			
Nisbe	et Inn			812-963-9305	03/20/		11223
			mber and street, city, state, zip code)	() Owner	03/20/	2016	
4	lisbet	Sta	ation Rd, HAUBSTADT, IN, 47639				
Owner JIM &	BEC	ΚY	HARL	Purpose: Routine	Follow-up No		se Date // 30/2018
Owner's A				Follow-up	Summary o	of Violation	ns:
<reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td></td><td>_</td><td></td></reda<>		1		Complaint		_	
Person in C				Pre-Operational	$_{\rm C}$ U	NC_($\mathcal{I}_{R} U$
<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 Type	: (See addi	tional page)
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}($	\bigcirc_{3}),(),()
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		RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE NA	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 properties)	rinted):		
Received by				Inspected by (signature):			
cc:			ec:		cc:		
cc:			CC.				



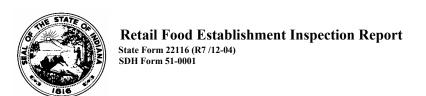
Owner's Advanced Areda Responsible	mart ent Addres Marin Dil Co ddress cted> Charge cted> e Person's	er l	mber and street, city, state, zip code) Dr., Evansville, IN, 47713	Telephone Number (812-477-5036 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-uj NO Summary	Release 03/of Violation	
			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	TODATIONS AN			orrected By
449	C	1	Open bait station in st	tockroom.			rrected by
Received by	acte	d>	orinted):	Inspected by (name and title properties)	rinted):		
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



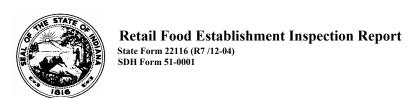
Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Milan	o Ital	iar	n Cuisine	812-484-2222	03/22/2	2010	11216
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	03/22/	2010	
	laın S	t, E	EVANSVILLE, IN, 47708			_	
Owner Rafic	Hach	em		Purpose:	Follow-up NO		se Date 01/2018
Owner's Ac				Follow-up	Summary of		
<reda< td=""><td>cted></td><td></td><td></td><td>Complaint</td><td>-</td><td></td><td></td></reda<>	cted>			Complaint	-		
Person in C				Pre-Operational	c_2	NC () _p 1
<reda< td=""><td>cted></td><td></td><td></td><td>Temporary</td><td><u> </u></td><td>NC</td><td>_ ^</td></reda<>	cted>			Temporary	<u> </u>	NC	_ ^
Responsible	e Person's	E-ma	il		Menu Type	(See addi	tional page)
				HACCP			
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u></u>	<u>/4</u> 05
• CRITICAL	LITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	N(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			Го Ве Со	orrected By
118	С	R	Food Safety Certificate	e expired.		05/0	04/2018
441	С		Sanitizer concentration for wip			Co	rrected
				<u> </u>			
Received by	(name and	title 1	printed):	Inspected by (name and title p	rinted):		
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Received by	(signature)):		Inspected by (signature):			
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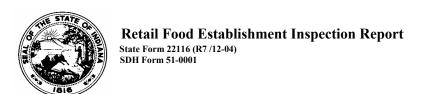
Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
McDo	onald	s ŧ	<i>‡</i> 10878	812-867-0480	03/22/2	2010	11204
			mber and street, city, state, zip code)	<redacted></redacted>	03/22/2	2010	
	<u>N Hi</u>	<u>gh</u>	way 41, Evansville, IN, 47725	<re><redacted></redacted></re>			
Owner	\ ·	_ 1		Purpose:	Follow-up		se Date
Ivan C		aı		✓ Routine	No	04/	01/2018
Owner's Ac				Follow-up	Summary of	`Violation	18:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>\cap</td><td>(</td><td>) ()</td></reda<>				Complaint	\cap	() ()
Person in C				Pre-Operational	C	NC_	R = R
Responsible			:1	Temporary	Menu Type	(Saa addi	tional naga)
Kesponsibil	e i eison s	L-ma	ш	HACCP	Wienu Type	(See aaan	nonai page)
Certified F	ood Handle	er		Other (list)	100_{2}	•) ₃ ($)_4\bigcirc_5\bigcirc$
<redac< td=""><td></td><td></td><td></td><td></td><td></td><td><u></u></td><td><u> </u></td></redac<>						<u></u>	<u> </u>
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	AARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		O IN THE NA	DDATIVE	RELOWAS "D"
Section#	C/NC	R	Narrative	WIWART OF VIOLATIONS AN			orrected By
Section#	C/NC	N		onc		10 De Co	Trected by
			No noted violation	0115.			
Dagaine d 1	. (mans 1	4;41 -	arinto d).	Inspected by (r	rintad):		
Received by			ninea).	Inspected by (name and title properties)	intea):		
Received by				Inspected by (signature):			
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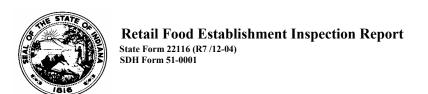
			<u> </u>				
Establishm	_	`∩f		Telephone Number	Date of Ins (mm/dd/yr		ID#
TJ M				812-465-4985	03/20	/2018	11167
			mber and street, city, state, zip code) J, EVANSVILLE, IN, 47711	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
CANT	EEN	Se	rvice Company	Routine	No	03/	30/2018
Owner's A				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td>•</td><td></td><td>Complaint</td><td>1</td><td>(</td><td>1</td></reda<>		•		Complaint	1	(1
Person in C				Pre-Operational	$\int_{C} 1$	NC_	J _R I
<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	e (See addi	tional page)
				Other (list)			
Certified F		er		Other (list)	$1 \underline{\bigcirc 2}$	$\bigcirc 3 \bigcirc$	<u>/405</u>
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• CRITICAI	L ITEMS AI	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be C	orrected By
343	С	R	Portable hand sink lack	king water.		Co	rrected
				9			
Received by	`		printed):	Inspected by (name and title p	rinted):		
Received by				Inspected by (signature):			
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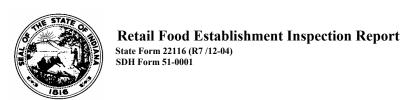
Establishm				Te	lephone Number	Date of In (mm/dd/y		ID#
Caze	Sch	oc	K-5	(8	12-469-5080	`)/2018	11134
			mber and street, city, state, zip code)	(<redacted></redacted>	03/18	72016	
	Gree	n F	River Rd, EVANSVILLE, IN, 47710		redacted>			
Owner	:11 - \	/			rpose:	Follow-u		se Date
		⁄ar	nderburgh School Corp.	<u></u>	Routine	No	03/	29/2018
Owner's Ac					Follow-up	Summary	of Violation	is:
<reda< td=""><td></td><td></td><td></td><td>L</td><td>Complaint</td><td>\cap</td><td>(</td><td>) ()</td></reda<>				L	Complaint	\cap	() ()
Person in C					Pre-Operational	$_{\rm C}$	NC_	$R_{\underline{}}$
Responsible			1	┖	Temporary	Menu Tv	ne (Saa addi	tional page)
Kesponsible	c i cison s	L-ma	u		НАССР	- Wichu Ty	pc (See addi	ionai page)
Certified Fo	ood Handl	er		┖	Other (list)	$1\bigcirc 2$	\bigcirc_3	$_{4}\bigcirc_{5}\bigcirc$
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• CRITICAL	ITEMS AF	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
			No noted violation	าทร	<u> </u>			
			140 Hotea violatio	7110	·•			
Received by	(name and	title p	printed):	Insp	pected by (name and title pr	rinted):		
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Received by					pected by (signature):			
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			<u> </u>				
Establishm		Sta	eakhouse 5221	Telephone Number	Date of Ins (mm/dd/yr		то# 11099
			mber and street, city, state, zip code)	812-473-2400	03/19)/2018	11099
320 N	Gree	n F	River Rd, Evansville, IN, 47715	<pre>(<redacted></redacted></pre>			
Owner Raro	Hoeni	tali	ty International Inc	Purpose:	Follow-uj		se Date /29/2018
		lall	ty international inc	Routine			
Owner's A				Follow-up	Summary	of Violatio	ns:
Person in C				Complaint	1 1	NC_) ()
<reda< td=""><td>_</td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>. NC_</td><td>- R</td></reda<>	_			Pre-Operational	C	. NC_	- R
Responsible	e Person's	E-mai	1	Temporary HACCP	Menu Typ	se (See addi	itional page)
				Other (list)	\sim		0.0
Certified F		er			1 2	<u> </u>	<u> 1405</u>
• CRITICAI	L ITEMS AF	RE IDE	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	E BELOW AS "R"
Section#	C/NC	R	Narrative			To Be C	orrected By
294	С		Sanitizer concentration for wipir	ng cloths too weak		Co	rrected
						i	
			_			. <u> </u>	
Received by	(name and	l title r	printed):	Inspected by (name and title p	rinted):		
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Received by	(signature):		Inspected by (signature):			
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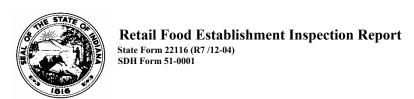
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Long	Johr	ı S	ilvers #28	812-476-2982	03/20/	2010	11097
			mber and street, city, state, zip code)	<pre> </pre>	03/20/	2010	
	Vlorga	an <i>i</i>	Ave., Evansville, IN, 47711	<re><reuacieu></reuacieu></re>			
Owner SERV	US, I	nc.		Purpose: Routine	Follow-up NO		se Date //30/2018
Owner's Ac	ddress			Follow-up	Summary o	f Violation	ns:
<reda< td=""><td>cted></td><td></td><td></td><td>Complaint</td><td> a</td><td></td><td></td></reda<>	cted>			Complaint	a		
Person in C				Pre-Operational	$ _{\mathbf{C}}$	NC_	I _R U
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Responsible	e Person's	E-ma	il	НАССР	Menu Type	(See addi	tional page)
				Other (list)	-),(•	$\bigcirc\bigcirc\bigcirc$
Certified Fo		er			1 2	<u> </u>	<u>/4_5_</u>
• CRITICAL	L ITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO		ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
187	С		Ready to eat food not maintain	ning 135 degrees.		03/2	20/2018
297	NC		Drink dispenser in need	of cleaning.		03/2	20/2018
							_
Received by	•	_ ^	printed):	Inspected by (name and title posterior < redacted >	rınted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



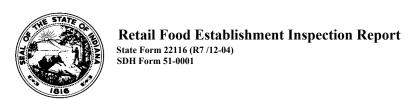
E . 111 1	. 37			m 1 1 N 1	D (CI		TD #
Establishme Lic's		re	am	Telephone Number (812-473-0569)	Date of Ins (mm/dd/yr	·)	то# 11082
Establishm 2001	ent Addres Nash	ss (nu	mber and street, city, state, zip code) ton Ave., Evansville, IN, 47714	() Owner	03/19	/2018	
Owner	, raoii	9	ton / tvo., Evanovino, nt, 1// 1/	<u> </u>	E II	I n 1	se Date
Don S	mith			Purpose: Routine	Follow-uj No		29/2018
Owner's Ac	ddress			Follow-up	Summary	of Violation	ns:
<reda< td=""><td>cted></td><td></td><td></td><td></td><td>•</td><td>_</td><td>_</td></reda<>	cted>				•	_	_
Person in C				Complaint	()	NC_) ()
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>c</td><td>NC_</td><td>- R</td></reda<>				Pre-Operational	c	NC_	- R
Responsible			il	Temporary	Menu Tvr	ne (See addi	tional page)
responsible	e i cison s			HACCP	Wiena Typ	oc (See aaar	nonai page)
Certified F	ood Handl	0.14		Other (list)	10°	\bigcirc , \bigcirc	$)_{4}\bigcirc_{5}\bigcirc$
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• CRITICAL	LITEMS AF	KE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No violations				
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Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Leroy	r's Ta	ave	ern	812-464-8300	03/22/	2040	11081
			mber and street, city, state, zip code)	() Owner	03/22/	2010	
	VIt. Ve	ern	on Ave., Evansville, IN, 47712	<re><reuacieu></reuacieu></re>			
Owner)l			Purpose:	Follow-up		se Date
Terri (Routine	No	04/	01/2018
Owner's Ac				Follow-up	Summary o	f Violatio	as:
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Responsible			il	Temporary	Menu Type	(See addi	tional page)
			_	НАССР			
Certified F		er		Other (list)	$_{1}\bigcirc_{2}($	$)_3$ \bullet	$)_4\bigcirc_5\bigcirc$
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• CRITICAL	L ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ARKED "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.			
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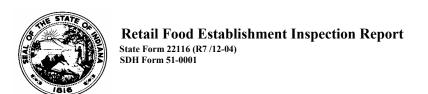
Establishm				Telephone Number	Date of Ins		ID#	
Leroy	r´s Ta	ave	ern	(812-464-8300	(mm/dd/yr	.) 2/2018	11081	
			mber and street, city, state, zip code)	()Owner .	03/22	./2016		
1	Mt. V	ern	on Ave., Evansville, IN, 47712					
Owner	امدا			Purpose:	Follow-u		se Date	
Terri (Routine	Yes		01/2018	
Owner's Ad				Follow-up	Summary	of Violation	is:	
Person in C				Complaint	1	NC_S	} 1	
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Responsible			il	Temporary	Menu Ty	pe (See addi	tional page)	
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• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
• VIOLATIO	ON(S) REPE	ATEL	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		Improper storage of ra	aw meats.		Co	rrected	
218	NC	R	Equipment in poor repair. Soda dispensi	ng machine needs s	ervice.			
310	NC		Hood vent in need of	_		04/0	04/2018	
413	NC		Kitchen backdoor in need of repair. Fix scre	•	vstem.		04/2018	
	110			<u> </u>	, , , , ,		<u> </u>	
						<u> </u>		
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Establishment Name				Telephone Number	Date of Ins	naction	ID#
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			mber and street, city, state, zip code)		03/23	/2018	11001
			on Ave., Évansville, IN, 47712	' <redacted></redacted>			
Owner			, ,	Purpose:	Follow-u		se Date
Terri C	Carl			✓ Routine	Yes	04/	01/2018
Owner's Address				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	C	NC S	$\frac{3}{R}$
<redacted></redacted>				Temporary			
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	se (See addi	tional page)
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		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
173	С		Improper storage of ra	aw meats.			22/2018
218	NC	R	Equipment in poor repair. Soda dispensi		ervice.		04/2018
310	NC		Hood vent in need of			04/04/2018	
413	NC			Kitchen backdoor in need of repair. Fix screen and self closing system.			04/2018
					-		
Received by				Inspected by (name and title p	rinted):		
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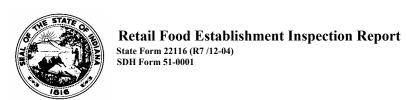
Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Coun	try In	n (& Suites	812-473-2500	03/19/2	2010	11033
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	<pre></pre>	03/19/2	2010	
301 C	ircle f	-ro	nt Dr., Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner		٠, ١	:: 0 0: 1 11 0	Purpose:	Follow-up		se Date
		ıtaı	ity Group Circle LLC	✓ Routine	No	03/	29/2018
Owner's Ac				Follow-up	Summary of	f Violatio	ns:
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Person in C				Pre-Operational	C	NC_	\mathcal{L}_{R}
Responsible			:1	Temporary	Menu Type	(Can addi	tional nace)
Kesponsibio	e rerson s	c-ilia	II.	НАССР	Menu Type	(see aaai	nonai page)
Certified F	ood Handl	er		Other (list)	100	•),($)_4\bigcirc_5\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
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			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	SUMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative	,		ro Be Co	orrected By
			No noted viola	ions.			
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Hadi Establishm	Establishment Name Hadi Shrine Temple Establishment Address (number and street, city, state, zip code)			Telephone Number (812-423-4285	Date of Ins (mm/dd/yr) 03/19)	11002
6 Wal	nut S	t, E	Evansville, IN, 47708	' <redacted></redacted>			
Owner HADI	SHRI	NE	TEMPLE	Purpose:	Follow-up No		se Date 29/2018
Owner's A				✓ Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$ $_{\rm C}$	NC_(J _R U
<redacted> Responsible Person's E-mail</redacted>				Temporary	M T	/G 11:	
Responsible	e Person's	L-ma	11	НАССР	Menu Typ	e (See aaai	tional page)
Certified F		er		Other (list)	102	<u>3</u>)4050
• CRITICAI	ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N.	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
			Violations from previous insp	ection corrected			
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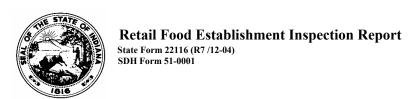
Establishm Fairla		}_c	nool K-5	Telephone Number Date of Inspection (mm/dd/yr) 1006				
			mber and street, city, state, zip code)	812-469-5082	03/19	/2018	10962	
2021	S Alvo	ord	Blvd., EVANSVILLE, IN, 47714	<pre><redacted></redacted></pre>				
Owner		,		Purpose:	Follow-u		se Date	
		√ar	nderburgh School Corp.	✓ Routine		03/	29/2018	
Owner's A				Follow-up	Summary	of Violation	ns:	
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Person in C				Pre-Operational	$_{\rm C}$	NC_	0_{R}	
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Responsible	e Person's	E-ma	d .	НАССР	Menu Typ	se (See addi	tional page)	
Certified F	and Handl			Other (list)	100	\bigcirc	\bigcirc	
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		VE INI	NAMES OF THE OWN OF THE PARTY O	A DAVED ((C))				
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					
• VIOLATIO		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.				
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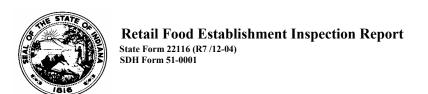
Establishm				Telephone Number	Date of Insp	ection	ID#
Denn	y's #	31	6	812-867-7156	(mm/dd/yr)	0040	10905
			mber and street, city, state, zip code)		03/22/	2018	
19501	Elpe	rs	Rd., Evansville, IN, 47725	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
SERV		nc.		Routine	No	04/	01/2018
Owner's Ac				Follow-up	Summary o	f Violatio	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC	$\frac{1}{R}$
<redacted> Responsible Person's E-mail</redacted>				Temporary) T	/C 11:	
Responsible	e Person's	L-ma	11	НАССР	Menu Type	(See aaai	tional page)
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		E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MADKED "C"	<u> </u>		
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			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative				orrected By
295	NC	R	Outside of equipment ne	eds cleaning.		03/2	22/2018
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Establishm 13220 Owner	o's It ent Addres Darr	nst nst	an Oven mber and street, city, state, zip code) adt Rd., Evansville, IN, 47725	Telephone Number (812-868-8071 (<redacted> Purpose:</redacted>			10898 10898 se Date
Andy Owner's A		الـ		Routine	No		30/2018
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Person in C				Complaint	1.0	NC_) _()
<redacted></redacted>				Pre-Operational	C	NC_	<u>R</u>
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	tional page)
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Certified Food Handler <redacted></redacted>				Other (list)	1 <u>0</u> 2	<u> </u>	<u>/4</u> 05
• CRITICAL	ITEMS AF	RE IDE	ENTIFIED 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	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			·
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Establishm		مانہ	an Oven	Telephone Number	Date of Ins (mm/dd/yr)		ID#
				812-868-8071	03/22	/2018	10898
			adt Rd., Evansville, IN, 47725	<pre><redacted></redacted></pre>			
Owner	_			Purpose:	Follow-up		se Date
Andy	Guard	<u></u>		Routine	No	03/	30/2018
Owner's Ac				Follow-up	Summary	of Violation	ns:
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Certified Fo	and Handl			Other (list)	1000	\bigcirc)
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			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ADD ATIVE	' RELOWAS "D"
Section#	C/NC	R	Narrative	MIMARI OF VIOLATIONS AN	DIN THE IN		orrected By
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			No noted violation	JI15.			
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Establishm				Telephone Number	Date of Inspo (mm/dd/yr)	ection	ID#
Buffa	Io Wi	ld	Wings #50	812-423-9464	03/22/2	2010	10888
			mber and street, city, state, zip code)	<pre></pre>	03/22/	2010	
5405 I	Pearl	Dr	, Evansville, IN, 47712	<re><redacted></redacted></re>			
Owner	\ A /''!		r.	Purpose:	Follow-up		se Date
Buffal		/V t	/ings	Routine		04/	01/2018
Owner's A				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	C	NC_	\mathcal{L}_{R}
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Kesponsibio	e rerson s	c-ma	II.	НАССР	Menu Type	(See adail	uonai page)
Certified F	ood Handl	er		Other (list)	$ _{1}\bigcirc_{2}($	$)_3$	$)_4\bigcirc_5\bigcirc$
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			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	UMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violat	ions.			
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Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Arby´	s #60)04	4	812-867-2030	` '	2040	10849
			mber and street, city, state, zip code)		03/22/2	2018	
19620) High	wa	y 41, Evansville, IN, 47725	<pre><redacted></redacted></pre>			
Owner	_			Purpose:	Follow-up		se Date
		tau	rant Group	✓ Routine	No	04/	01/2018
Owner's A				Follow-up	Summary of	f Violation	ns:
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Kesponsible	e Person's	L-ma	11	НАССР	Menu Type	(See aaan	nonai page)
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"	<u> </u>		
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			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			ro Be Co	orrected By
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Establishm):	Telephone Number Date of Inspection (mm/dd/yr)				
Lomb				812-202-5336	03/19	/2018	13411	
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	<pre><redacted></redacted></pre>	00,10	,		
Owner	V OIE	CII	Triver Ira, Evansville, IIV, 477 13	Purpose:	Follow-u	n Releas	se Date	
Frank	Laud	on	io	Routine	T OHOW-U		29/2018	
Owner's A				Follow-up	Summary	of Violation	ns:	
<reda< td=""><td>cted></td><td></td><td></td><td>Complaint</td><td>_ `</td><td>_</td><td>_</td></reda<>	cted>			Complaint	_ `	_	_	
Person in C				Pre-Operational			$\frac{1}{R}$	
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary				
Responsible Person's E-mail				НАССР	Menu Tyj	oe (See addi	tional page)	
			Other (list)	100	\bigcirc	\bigcap_{i}		
Certified Food Handler						<u>3</u>	<u>/4050</u>	
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
• VIOLATIO	ON(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	
295	С		Improper storage of utensils be	tween equipment.	Corrected			
173	С		Improper storage of raw animal food p	· ·	· '			
177	С		Items in walk-in cooler n	not covered.		Corrected		
191	С		Potentially hazardous food in walk-in co-	Potentially hazardous food in walk-in cooler lacking date marking.				
192	С		Food with date mark label not p	roperly discarded.		Corrected		
118	С	R	Establishment lacking certified for	od handler certifica	te.	03/2	23/2018	
Received by				Inspected by (name and title p < redacted>	rinted):			
Received by				Inspected by (signature):				
cc:			cc:		cc:			