



Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
SDH Form 51-0001

Vanderburgh County Department of Health
Telephone 812-435-5695
Fax 812-435-5871

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Gas & Food Mart		Telephone Number (812-477-2920)	Date of Inspection (mm/dd/yr) 05/29/2018	ID # 11692
Establishment Address (number and street, city, state, zip code) 2912 Lincoln Ave, Evansville, IN, 47715		() Owner		
Owner Shiva Hari Khatri	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up Yes	Release Date 06/08/2018	
Owner's Address <redacted>		Summary of Violations: C 1 NC 1 R 0		
Person in Charge <redacted>		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input checked="" type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler <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 BELOW AS "R"

Section#	C/NC	R	Narrative	To Be Corrected By
436	C		Live pest activity at drink island.	05/30/2018
177	NC		Bulk single use service items not stored 6 inches off the floor.	05/29/2018

Received by (name and title printed): <redacted>		Inspected by (name and title printed): <redacted>	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	



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Establishment Name Show Me's East		Telephone Number (812-401-7469)	Date of Inspection (mm/dd/yr) 06/01/2018	ID # 11683
Establishment Address (number and street, city, state, zip code) 1700 Morgan Center, Evansville, IN, 47715		() Owner <redacted>		
Owner STEVE HAZLETT	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up Yes	Release Date 06/11/2018	
Owner's Address <redacted>		Summary of Violations: C 5 NC 5 R 6		
Person in Charge <redacted>		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler <redacted>				

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Section#	C/NC	R	Narrative	To Be Corrected By
294	C	R	Chemical dishwasher not sanitizing.	06/01/2018
415	C		Live pest activity present.	06/01/2018
431	NC	R	Kitchen floors, walls, ceiling and equipment in need of cleaning.	06/01/2018
295	C	R	Knife stored improperly between equipment.	Corrected
177	C	R	Disposable single service items not stored 6 inches off the floor.	Corrected
413	NC		Back doors open without protection.	Corrected
310	NC		Ventilation system in need of cleaning.	06/01/2018
430	NC	R	Ventilation system in need of repair.	06/01/2018
218	NC	R	Cutting board needs repaired/replaced.	06/01/2018
438	C		Sanitizer bottle not labeled.	Corrected

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Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name Tri-State Glitter Inc		Telephone Number (812-773-1080)	Date of Inspection (mm/dd/yr) 06/03/2018	ID # 13904
Establishment Address (number and street, city, state, zip code) 1116 Bellemende Ave , Evansville, IN, 47714		() Owner <redacted>		
Owner Ursula Smith	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 06/13/2018	
Owner's Address		Summary of Violations: C <u>3</u> NC <u>0</u> R <u>0</u>		
Person in Charge <redacted>		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler <redacted>				

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Section#	C/NC	R	Narrative	To Be Corrected By
187	C		Smoked pulled pork measured at 105 F, not properly held at 135F or greater. Voluntarily discarded product.	Corrected
142	C		Smoked pulled pork was not cooked at temporary event as required. Food production from unapproved source.	Corrected
187	C		Raw chicken measured at 55F and not properly stored at 41 F or lower.	Corrected
				Corrected

Received by (name and title printed): <redacted>		Inspected by (name and title printed): <redacted>	
Received by (signature):		Inspected by (signature):	
cc:	cc:	cc:	

