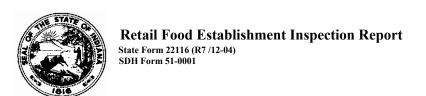
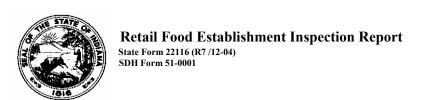


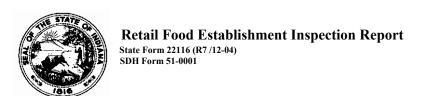
	Araz ent Addres ain S ejad ddress cted> charge cted> e Person's	t.,	mber and street, city, state, zip code) Evansville, Indiana, 47713	Pu	lephone Number 12-401-1768 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u No Summary	r) 8/2018 p Releas	18/2018 L R 1		
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARK	ED "C"					
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE								BELOW AS "R"		
Section#	C/NC	R	Narrative				To Be Co	rrected By		
232	NC		Ice guard in kitchen ice m	ach	ine soiled.		06/0	08/2018		
250	NC		Handles of clean utensils need	ace	ed up in storage) .	06/0	8/2018		
218	NC		Dessert cooler upstairs not holding proper cold holding temperature and need	sert cooler upstairs not holding proper cold holding temperature and needs repair. Food product to be moved to other cooler						
177	NC	R	Some food containers in reach in	CO	olers not cover	ed	06/0	08/2018		
Received by	(name and	title p	printed):	Insp	ected by (name and title pr	rinted):				
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Received by					ected by (signature):					
cc: cc: cc:										



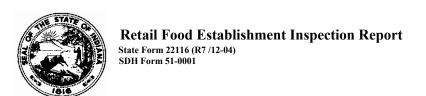
Establishmonth Aloha		vai	ian Shaved Ice LLC	Telephone Number (812-568-7709)	Date of Ins (mm/dd/yr	r)	ть# 13059
Establishm	ent Addres	s (nu	mber and street, city, state, zip code) Ch Ave, Evansville, Indiana, 47714	()Owner	06/04/2018		
Owner				Purpose:	Follow-u	p Releas	se Date
Teres	a Gris	sha	m	✓ Routine	No	06/	14/2018
Owner's Ac				Follow-up	Summary	of Violation	is:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>1</td><td>(</td><td>) (</td></reda<>				Complaint	1	() (
Person in C				Pre-Operational	C	NC_	\mathcal{L}_{R}
Responsible			:1	Temporary	Manu Tvi	na (Saa addi	tional page)
Responsible	e i cison s	L-IIIa	11	НАССР	- Wichu Tyj	pc (see aaan	ionai page)
Certified Fo	ood Handle	er		Other (list)	$_{1}\bigcirc_{2}$	\bigcirc_3 \bigcirc	$_{4}O_{5}O$
					1 <u> </u>	<u> </u>	
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(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
204	С		Ice cream being served at shave	d ice seasonal boo	th.	Co	rrected
-	_		(seasonal booths limited to shaved ic				
			(00000110111001110011100110011001100110	o a propagnagou r			
Received by	(name and	title 1	printed):	Inspected by (name and title pr	cinted):		
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Received by	(signature)):		Inspected by (signature):			
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			, cc.				



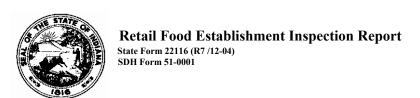
Establishm	ent Name			Telephone Number	Date of Insp	ection	ID#
Missi	on Bl	BC)	(317-378-9565	(mm/dd/yr)	0040	12393
			mber and street, city, state, zip code)		00/00/	2018	
1530 N	Gree	n R	iver Rd, Evansville, Indiana, 4771	₅ <redacted></redacted>			
Owner				Purpose:	Follow-up		se Date
		Q I	Evansville, LLC	✓ Routine	No	06/	18/2018
Owner's Ac				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_(\mathcal{L}_{R}
<reda< td=""><td></td><td></td><td>2</td><td>Temporary</td><td>M T</td><td></td><td></td></reda<>			2	Temporary	M T		
Responsible	e Person's	L-ma	II.	НАССР	Menu Type	: (See aaai	tional page)
Certified Fo	ood Handle	or		Other (list)	1()2(\bigcirc	$)_4\bigcirc_5\bigcirc$
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		RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"	1		
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S		ND IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No violation	S.			-
Received by	(name and	title 1	printed):	Inspected by (name and title p	orinted):		
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Received by				Inspected by (signature):			
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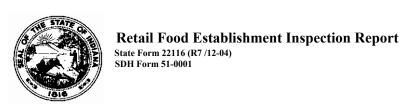
Establishme 821 S Owner	os G ent Addres Gree M Mos ddress cted> charge cted>	n F	Mexican Restaurant mber and street, city, state, zip code) River Rd, Evansville, IN, 47715 ueda-Lopez	Pu /	lephone Number 12-459-3871 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u Yes Summary	5/2018 Releas	16/2018 s: B R O
Certified Fo	cted>				Other (list)	1 2	<u></u>	04050
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	ED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	ММА	RY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative					rrected By
431	NC		Hood vents in need of					3/2018
431	NC		Walk-in cooler vents and racks in	n n	eed of cleaning	-	06/1	3/2018
294	С		Chemical dish washer no	ot s	anitizing.		Co	rected
291	NC		Establishment lacking chemical	sar	nitizer test strips	3.	06/0	6/2018
						·		
<pre>Received by</pre>	,	_ *		_	ected by (name and title predacted>	rinted):		
Received by	(signature)):		Insp	ected by (signature):			
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Establishm		<u> </u>	Mobile Food Comice		elephone Number	Date of In (mm/dd/y		ID#
			Mobile Food Service] '6	626-202-8650	06/08	3/2018	12262
			mber and street, city, state, zip code) Dr, Evansville, IN, 47725	(<	<redacted></redacted>			
Owner	1				irpose:	Follow-u		e Date
Peter				<u></u>	Routine	No	06/	18/2018
Owner's Ac					Follow-up	Summary	of Violation	is:
Person in C					Complaint	3	NC_() ()
<reda< td=""><td>_</td><td></td><td></td><td>=</td><td>Pre-Operational</td><td>C</td><td>NC_</td><td><u></u></td></reda<>	_			=	Pre-Operational	C	NC_	<u></u>
Responsible			il	\vdash	Temporary	Menu Ty	pe <i>(See addi</i>	tional page)
				—	НАССР			
Certified Fo		er		<u> </u> -	Other (list)	1 <u>0</u> 2	<u>3</u>) ₄ <u>0</u> 5 <u>0</u>
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"								
• VIOLATIO	ON(S) REPE	ATEL	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
345	С		Hand sink soile	<u>əd</u>			06/0	08/2018
303	С		No container available for sanit	izir	ng wiping cloths.	ı	Corrected	
191	С		Lacking date marking for potentially hazard	lous	s ready-to-eat food	l items.	06/0	08/2018
Received by	*				redacted>	rinted):		
Received by	eceived by (signature):				pected by (signature):			
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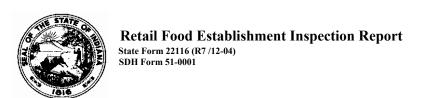
E-4-1-1:-1	4 N				T-lhNh	Date of Insp	ation	ID #
Kona		of E	Evansville 'The	e Mini'	Telephone Number (812-965-6620)	(mm/dd/yr)		ть# 12132
			mber and street, city, state, zip c Chandler, IN, 47		<pre>(<redacted></redacted></pre>	06/08/2	2018	
	DCII I V	u,		010		- "	n 1	7
Owner Derek	Taylo	or			Purpose:	Follow-up NO		te Date 18/2018
Owner's Ac	ddress				Follow-up	Summary o	f Violation	26.
<reda< td=""><td></td><td></td><td></td><td></td><td>Complaint</td><td></td><td>_</td><td>_</td></reda<>					Complaint		_	_
Person in C					Pre-Operational		$_{\rm NC}$	J R U
<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		HACCP	Menu Type	(See addi	tional page)
Certified F	ood Handle	a r			Other (list)	100,0	•),(),(),()
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• CRITICAL	LITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AN	ND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS	S ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	ND IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			<u>Го Ве</u> Со	orrected By
				no noted violation	ons.			
Received by		_	orinted):		Inspected by (name and title p < redacted>	rinted):		
Received by					Inspected by (signature):			
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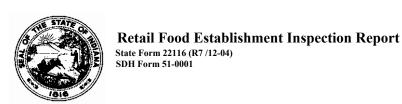
Establishm	-			Telephone Number	Date of In		ID#		
Ropp	ongi			812-437-5824	` .	3/2018	12002		
			mber and street, city, state, zip code)		1 00/00	0/2010			
7221 I	E Indi	an	a St, Evansville, IN, 47715	' <redacted></redacted>					
Owner				Purpose:	Follow-u		e Date		
Sona	Week	S		✓ Routine	Yes	06/	18/2018		
Owner's A				Follow-up	Summary	of Violation	is:		
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>2</td><td></td><td>) 1</td></reda<>				Complaint	2) 1		
Person in C				Pre-Operational	$_{\rm C}$	NC 4	$\frac{2}{R}$		
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Responsible	e Person's	E-ma	il	HACCP	Menu Ty	pe <i>(See addii</i>	tional page)		
~				Other (list)		\bigcirc			
Certified Fo		er			$1 \bigcirc 2$	$\bigcirc 3 \bigcirc$	4050		
		E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	I ARKED "C"					
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE							BELOW AS "R"		
Section#	C/NC	R	Narrative				orrected By		
236	NC		Use of cloth material for straining	soup and storing r	ice		08/2018		
345	С	R		and sink near ware washing area being used as a dump sink.					
193	С		9	properly utilizing time as a public health control for rice storage in sushi area.					
346	NC		· · · · · · · · · · · · · · · · · · ·	and soap not available for the hand sink at the ware washing area.					
Received by	(name and	title 1	printed):	Inspected by (name and title p	orinted):	<u> </u>			
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Received by	(signature)):		Inspected by (signature):					
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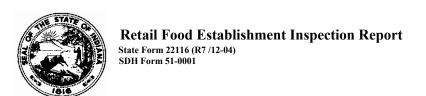
Establishme		'n	Eggl Mart		ephone Number	Date of In (mm/dd/yr		ID#
			Food Mart	1	12-402-2101	06/04	1/2018	11999
			mber and street, city, state, zip code) ton Ave, Evansville, IN, 47714	(<	redacted>			
Owner Amit A	Arora				rpose: Routine	Follow-u Yes		te Date 14/2018
Owner's Ad				lacksquare	Follow-up		of Violation	
<reda< td=""><td>_</td><td></td><td></td><td>=</td><td>ronow-up Complaint</td><td>_</td><td>_</td><td></td></reda<>	_			=	ronow-up Complaint	_	_	
Person in C	0			=	Pre-Operational	_c 3	NC_	$L_{R}U$
<reda< td=""><td></td><td></td><td></td><td>=</td><td>Temporary</td><td></td><td></td><td></td></reda<>				=	Temporary			
Responsible	Person's	E-mai	1	=	НАССР	Menu Ty	pe <i>(See addii</i>	tional page)
Certified Fo	ood Handle	a r		H	Other (list)	1()	\bigcirc_3),(),()
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• CRITICAL	ITEMS AR	ED "C"						
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AN	D IN THE N	IARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
295	С		Guard in ice bin se	oile	d.		06/0	05/2018
431	NC		Fans in walk in drink cooler in	nee	ed of cleaning.		06/06/2018	
129	С		Employees not washing hand	ls w	hen required.		Co	rrected
415	С		Fly activity in kitc	her	٦.		06/0	06/2018
Received by	,	_ *		-	ected by (name and title pr	rinted):		
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Received by	(signature)):		Inspe	ected by (signature):			
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			30.					



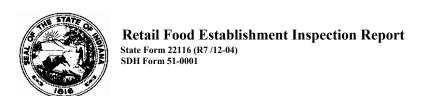
Establishm Wash		n	Food Mart	Telephone Number (812-402-2101	Date of Inspe (mm/dd/yr)		ть# 11999
			mber and street, city, state, zip code)	⊣	06/06/2	2018	11333
			ton Ave, Evansville, IN, 47714	' <redacted></redacted>			
Owner				Purpose:	Follow-up		e Date
Amit A				Routine	No	06/	16/2018
Owner's Ac				✓ Follow-up	Summary o	f Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>\cap</td><td>(</td><td>\cap</td></reda<>				Complaint	\cap	(\cap
Person in C				Pre-Operational	$_{\rm C}$	NC_	\mathcal{L}_{R}
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td>) / T</td><td></td><td></td></reda<>				Temporary) / T		
Responsible	e Person's	L-ma	II.	НАССР	Menu Type	(See aaai	nonai page)
Certified F	ood Handle	er		Other (list)	1()2(),(•	$)_{4}\bigcirc_{5}\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	AARKED "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
			All violations from 6/4/20	18 corrected.			
Received by	(name and	title 1	printed):	Inspected by (name and title pr	rinted):		
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	d Bufent Address Cted> harge cted>	es (nui	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	Pu Pu	lephone Number 12-476-6666 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u NO Summary	7/2018 Releas	17/2018 D R O
Certified Fo		er			Other (list)	1 <u>U</u> 2	<u>3</u>	<u> 1405</u>
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ARK	ED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUN	ММА	RY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
324	С		Kitchen hand washing sink la	cki	ng hot water.		Co	rrected
n : 1:			· (D	T	(11 / 100	·		
Received by		_		-	ected by (name and title proceed)	inted):		
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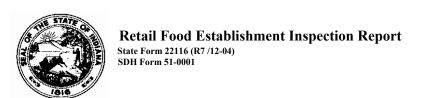
Establishm	ent Addres	ss (nu	arm - Farmer's Market mber and street, city, state, zip code) Franklin St Bazaar, EVANSVILLE, IN, 47708	(812-290-1879) (<redacted></redacted>	11849		
Owner Rober				Purpose:	Follow-up		te Date 18/2018
Owner's Ad <reda Person in C <reda< td=""><td>cted></td><td></td><td></td><td>Follow-up Complaint Pre-Operational</td><td></td><td>of Violation</td><td></td></reda<></reda 	cted>			Follow-up Complaint Pre-Operational		of Violation	
Responsible Certified Fe	e Person's	E-ma	il	Temporary HACCP Other (list)	Menu Typ 1 2	e (See addi	tional page)
• VIOLATIO	ON(S) REPE	CATED	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MEDICAL PROPERTY OF THE SUBJECTIONS ARE DENOTED IN THE "SUBJECTIONS ARE DEN		D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			@ Downtown Farmer's Market-	no noted violations	3 .		
Received by				Inspected by (name and title precised>	rinted):		
Received by	/ (signature):		Inspected by (signature):			
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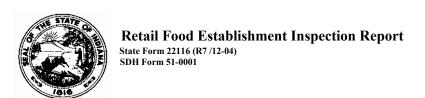
Establishme		ion	East Coast Subs		12-402-7366	Date of Inc (mm/dd/yr		1D# 11782	
			mber and street, city, state, zip code)	-		06/05	5/2018	11702	
			nt Dr, Evansville, IN, 47715		redacted>				
Owner Tri-Sta	ate Ch	າຍເ	esesteaks LLC		rpose: Routine	Follow-u		20/2018	
Owner's Ad		100	200000000000000000000000000000000000000		Follow-up		of Violation		
<redag< td=""><td>cted></td><td></td><td></td><td></td><td>Complaint</td><td>Summary</td><td></td><td></td></redag<>	cted>				Complaint	Summary			
Person in C	_			П	Complaint Pre-Operational	$_{\rm C}$ 1	NC_	$\bigcup_{\mathbf{p}} \mathbf{U}$	
<reda< td=""><td>cted></td><td></td><td></td><td>=</td><td>-</td><td>C</td><td>. NC</td><td></td></reda<>	cted>			=	-	C	. NC		
Responsible	Person's	E-mai	il	=	Temporary HACCP	Menu Tyj	oe (See addii	tional page)	
				\vdash					
Certified Fo		er			Other (list)	1 <u></u> 2	<u>3</u>	<u>/4</u> <u>/</u> 5 <u></u>	
• CRITICAL	ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARK	ED "C"				
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				To Be Co	orrected By	
431	NC		Inside of reach in prep table cooler	rs ir	need of cleani	ng.	06/0	05/2018	
324	С		Hand washing sink next to dish a	rea	in need of repa	ir.	06/20/2018		
Received by	(name and	title r	printed):	Insp	ected by (name and title pr	rinted):			
<reda< td=""><td>acte</td><td><t< td=""><td></td><td><r< td=""><td>edacted></td><td></td><td></td><td></td></r<></td></t<></td></reda<>	acte	<t< td=""><td></td><td><r< td=""><td>edacted></td><td></td><td></td><td></td></r<></td></t<>		<r< td=""><td>edacted></td><td></td><td></td><td></td></r<>	edacted>				
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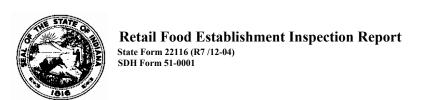
	R Foodent Address Cted> harge Cted> Person's	S (num	mber and street, city, state, zip code) Ave, Evansville, IN, 47715 atri	Pu Pu	lephone Number 12-477-2920) Owner rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u No Summary	5/2018 Releas	15/2018 D R O
<redac< td=""><td></td><td>n r-</td><td>NATIONAL DE CHECKE VOTA AND ALL TO THE CHECKE VO</td><td></td><td>TED 4/C#</td><td></td><td></td><td></td></redac<>		n r-	NATIONAL DE CHECKE VOTA AND ALL TO THE CHECKE VO		TED 4/C#			
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	JARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Re Co	rrected By
Section	Citte		All violations from 5/29/20	10	corrected		To be ee	Trected By
			All violations from 5/29/20	10	corrected.			
				_				
Received by	(name and	title r	printed):	Insp	ected by (name and title pr	rinted):		
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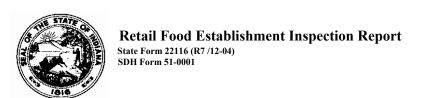
	Me´ent Address Morg E HA Idress Cted> harge Cted> Person's	S (nu AN ZL	mber and street, city, state, zip code) Center, Evansville, IN, 47715 ETT	(81 V Puri R V F C Puri P T H H H H H H H H H	redacted> redacted> redacted> pose: Routine Follow-up Complaint Pre-Operational Cemporary HACCP Other (list)	Follow-u NO Summary	6/2018 Releas	16/2018 D R O
		E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKE	CD "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMAR	RY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	rrected By
			All violations from 6/1/20	18 c	orrected.			
			Hood vent above pizza oven cannot be	used	until approved l	oy BC.		
			·					
Received by	(name and	title j	printed):		cted by (name and title pr	rinted):		
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Received by					cted by (signature):			
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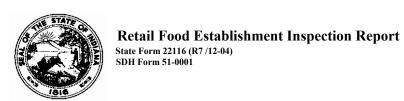
Establishm	ont Nama			Telephone Number	Date of Insp	ation	ID#
	_	Sha	aved Ice	812-319-4100	(mm/dd/yr)		11610
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)		06/04/	2010	
	√ Gre	en	River Rd, Evansville, IN, 47715				
Owner ROY \	NHE ⁻	ΓS	TINE II	Purpose:	Follow-up No		te Date 14/2018
Owner's Ac				✓ Follow-up	C		
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>Summary o</td><td></td><td>_</td></reda<>				Complaint	Summary o		_
Person in C				Pre-Operational	CU	NC_	JbU
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td><u> </u></td><td></td><td></td></reda<>				Temporary	<u> </u>		
Responsible	e Person's	E-ma	il	HACCP	Menu Type	(See addi	tional page)
Certified Fo	ood Handle	er		Other (list)	1()2(),(•	$)_4\bigcirc_5\bigcirc$
					1	<u> </u>	<u> </u>
• CRITICAL	. ITEMS AF	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		r	Го Ве Со	orrected By
			All violations from 6/1/20	18 corrected.			
Received by		_	printed):	Inspected by (name and title properties)	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



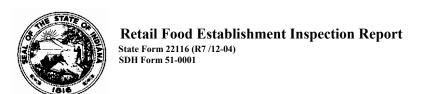
Establishm					Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Farm	Bure	eau	ıs´ Farmers Market		812-421-8032	06/08/	2018	11608
			mber and street, city, state, zip code)		<redacted></redacted>	00/00/	2010	
	VV FO	urt	h St., Evansville, IN, 4770	8				
Owner	Dovid				Purpose:	Follow-up		se Date 18/2018
Pattie Owner's Ac		<u> </u>			Routine	No		
<reda< td=""><td></td><td></td><td></td><td></td><td>Follow-up</td><td>Summary o</td><td>f Violation</td><td>ns:</td></reda<>					Follow-up	Summary o	f Violation	ns:
Person in C					Complaint	0	NC_	\cap
<reda< td=""><td></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 Type	: (See addi	tional page)
					НАССР			
Certified F		er			Other (list)	1 <u>0</u> 2(<u> </u>	<u>)4U5U</u>
<redac< td=""><td>cted></td><td></td><td></td><td></td><td></td><td> </td><td></td><td></td></redac<>	cted>							
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "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	Narra	ative			To Be Co	orrected By
			No noted v	violati	ons.			
Received by	(name and	title 1	printed):		Inspected by (name and title pr	rinted):		
		1	,		<redacted></redacted>	/-		
Received by	(signature):			Inspected by (signature):			
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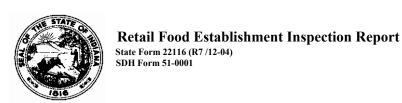
Establishme		ca	s Tiendas Restaurant		elephone Number	Date of Ins (mm/dd/yr		то# 11580
Establishme	ent Addres	s (nu	mber and street, city, state, zip code)	(312-483-3483	06/04	/2018	11360
1016-	ASW	ein	bach Ave, Evansville, IN, 47714	<u> </u>	<redacted></redacted>			
Owner Jose N	Mirano	da		I	rpose: Routine	Follow-uj No		14/2018
Owner's Ac		au		_	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	0			╊	Pre-Operational	$_{\rm C}$ 1	NC_1	$R \sim$
<reda< td=""><td></td><td></td><td>9</td><td>┵</td><td>Temporary</td><td></td><td></td><td></td></reda<>			9	┵	Temporary			
Responsible	e Person's	E-ma	11		НАССР	Menu Typ	oe (See addii	ional page)
Certified Fo	ood Handle	er		乚	Other (list)	$1\bigcirc_2$	\bigcirc_3 \bigcirc	$_{4}O_{5}O$
<redac< td=""><td>cted></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>	cted>							
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARI	KED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	ARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative					orrected By
191 C R Ready to eat food lacking					-)4/2018
295	NC	R	Microwave in need o	cle	eaning.		06/0)4/2018
Received by		_	printed):	_	pected by (name and title pr	rinted):		
<reda< td=""><td><u>acte</u></td><td><u><t< u=""></t<></u></td><td></td><td></td><td>redacted></td><td></td><td></td><td></td></reda<>	<u>acte</u>	<u><t< u=""></t<></u>			redacted>			
Received by	(signature)):		Insp	pected by (signature):			
cc:			cc:			cc:		
_								



Establishm T Min Establishm 2400 \ Owner Pash Owner's Ac <redac <redac="" c="" in="" person="" responsible<="" th=""><th>imar ent Addres Wash B Tan dress cted> harge cted></th><th>ing nar</th><th></th><th>Telephone Number (812-473-2585) (</th><th>Follow-u Yes Summary</th><th>7/2018 Release</th><th>0_{R}</th></redac>	imar ent Addres Wash B Tan dress cted> harge cted>	ing nar		Telephone Number (812-473-2585) (Follow-u Yes Summary	7/2018 Release	0_{R}
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u></u>	<u>)4U5U</u>
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" A	ND IN THE I		
Section#	C/NC	R	Narrative	mportmont sink			orrected By 07/2018
410	415 C Live pest activity at three compartment sign						01/2018
						1	
						 	
Received by	acte	<u><</u> t		Inspected by (name and title <redacted></redacted>		•	
Received by	(signature)):		Inspected by (signature):			
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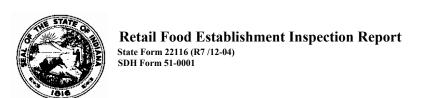
Establishme	of the ent Address Edgar Eddress Cted> harge Cted> Person's	E-ma		Pu	lephone Number 312-402-8696 < redacted> credacted> prose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary	P Release 06/2018 of Violation	15/2018 ns:
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					
• VIOLATIO		ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMA	ARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No Violations observed at tir	ne	of inspection			
Received by	(name and	title r	orinted):	Insn	pected by (name and title pr	inted):		
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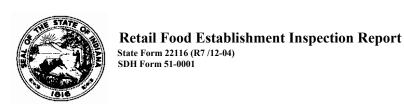
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Taco	Johr	IS		812-467-0804	06/05/	2010	11385
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	06/05/	2010	
	St.Jc	se	ph Ave, Evansville, IN, 47712	<re><redacted></redacted></re>			
Owner D & G	Prop	ert	ies	Purpose:	Follow-up Yes		se Date //15/2018
Owner's Ac				Follow-up	Summary o	f Violation	ns:
<reda< td=""><td>cted></td><td></td><td></td><td>Complaint</td><td></td></reda<>	cted>			Complaint			
Person in C	_			Pre-Operational	\mathbf{C}	NC 4	$2_{\rm R}0$
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary			
Responsible	e Person's	E-mai	il	HACCP	Menu Type	(See addi	tional page)
~				Other (list)	-),(•	\bigcirc
Certified Fo		er			1 2	<u>3</u> C	<u>/405</u>
• CRITICAL	. ITEMS AR	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 NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
416	NC		Dead pest present in traps at restro	ooms and dining ar	rea.	06/0	05/2018
431	NC		Dish area walls and kitchen floor	in need of cleaning	g.	06/07/2018	
193	С		Food lacking proper dis	scard label.		Со	rrected
Received by	(name and	title p	printed):	Inspected by (name and title p	rinted):		
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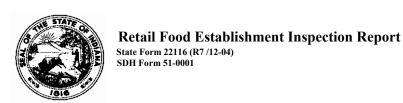
Establishme				Telephone Number	Date of Ins		ID#	
Taco	Johr	IS		812-467-0804	l `	, 7/2018	11385	
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	00/07	/2010		
	St.JC	<u>)se</u>	ph Ave, Evansville, IN, 47712					
Owner D & G		ert	ies	Purpose: Routine	Follow-uj No		se Date 17/2018	
Owner's Ad				✓ Follow-up	Summary	of Violation	ns:	
<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	$_{\rm C}$ \cup	NC_	\mathcal{I}_{R} U_{R}	
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary				
Responsible	: Person's	E-mai	il	HACCP Menu Type (See additional pa				
Certified Fo	ood Handle	or		Other (list)	10,	\bigcirc_3),(),()	
<redac< td=""><td></td><td>,1</td><td></td><td></td><td>1 2</td><td><u></u></td><td><u>/4030</u></td></redac<>		,1			1 2	<u></u>	<u>/4030</u>	
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"	ı			
• 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	
			All violations from 6/5/201	18 corrected.				
Received by	(name and	title r	printed):	Inspected by (name and title p	rinted):			
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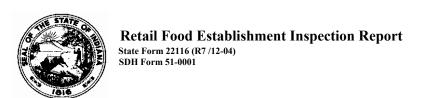
Establishmed 1801 N Owner O'Bria Owner's Ad <redace comp<="" company="" in="" of="" person="" th="" the=""><th>ans Sent Address Cted></th><th>en Oor</th><th>orts Bar & Grill Ther and street, city, state, zip code) River Rd, Evansville, IN, 47715 ts Bar & Grill</th><th>(8) (V) Pur</th><th>ephone Number 12-401-4630 redacted> rose: Routine Follow-up Complaint Pre-Operational</th><th>Follow-u Yes</th><th>r) 8/2018 p Releas</th><th></th></redace>	ans Sent Address Cted>	en Oor	orts Bar & Grill Ther and street, city, state, zip code) River Rd, Evansville, IN, 47715 ts Bar & Grill	(8) (V) Pur	ephone Number 12-401-4630 redacted> rose: Routine Follow-up Complaint Pre-Operational	Follow-u Yes	r) 8/2018 p Releas	
<reda< td=""><td></td><td></td><td>il</td><td></td><td>Гетрогагу</td><td>Menu Tvi</td><td>pe (See addii</td><td>tional nage)</td></reda<>			il		Гетрогагу	Menu Tvi	pe (See addii	tional nage)
Certified Fo	ood Handle			\vdash	HACCP Other (list)	102	<u></u>	$0.4 \bigcirc 5 \bigcirc$
<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					
• VIOLATIO Section#	ON(S) REPE	ATED R	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI Narrative	MMAI	RY OF VIOLATIONS" AN	D IN THE N		orrected By
334	C	K	Hose at three compartment sir	nk Is	acking air gan			22/2018
337			riose at tillee compartment sil	IIIX IC	acking all gap.		00/2	.2/2010
Received by	(name and	title p	printed):	Inspe	ected by (name and title pr	rinted):	<u> </u>	
<reda< td=""><td>acte</td><td><k</td><td></td><td><r< td=""><td>edacted></td><td></td><td></td><td></td></r<></td></reda<>	acte	< k		<r< td=""><td>edacted></td><td></td><td></td><td></td></r<>	edacted>			
Received by				Inspe	ected by (signature):			
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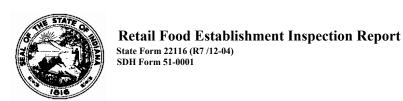
	UCKS ent Addres	s (nui	mber and street, city, state, zip code)	(812-422-6325 (<redacted></redacted>	Date of In (mm/dd/y) 06/07		11306
4500 W	/ Lloyd	l Ex	pressway, EVANSVILLE, IN, 47712	<re><redacted></redacted></re>			
Owner Schnu	ıcks N	/lar	kets Inc	Purpose: Routine	Follow-u		e Date 17/2018
Owner's Ac				Follow-up	Summary	of Violation	is:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>) 1</td></reda<>				Complaint) 1		
Person in C				Pre-Operational	$_{\rm C}$ $_{\rm C}$	_ NC	$\frac{2}{R}$
Responsible			1	Temporary	Manu Tv	pe (See addi	tional naga)
Responsible	e i cison s	L-IIIAI	ш	НАССР	Wichu Ty	pc (see addi	ionai page)
Certified Fo		er		Other (list)	102	\bigcirc_3	$0_4 \bigcirc 5 \bigcirc$
• CRITICAI	ITEMS AR	E IDE	NTIFIED 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	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	rrected By
218	NC	R	Seals on the dairy and meat cool	er doors in disrepa	ir.	06/1	4/2018
430	NC		Various ceiling tiles in meat roor			06/1	4/2018
			G	•			
Received by			printed):	Inspected by (name and title pr	rinted):		
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Received by	(signature)):		Inspected by (signature):			
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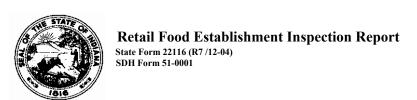
Establishmo		an			lephone Number	Date of In (mm/dd/y		1D# 11255
			mber and street, city, state, zip code)	7	312-425-2261	06/07	7/2018	11200
905 N			k Dr, Evansville, IN, 47710		redacted>			
Owner Elizab	eth L	ear	•		rpose: Routine	Follow-u No		se Date 17/2018
Owner's Ac		-			Follow-up		of Violation	
<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	_c 2	NC_(J DU
<reda< td=""><td>cted></td><td></td><td></td><td>=</td><td>Temporary</td><td></td><td></td><td></td></reda<>	cted>			=	Temporary			
Responsible	e Person's	E-mai	il		HACCP	Menu Ty	pe <i>(See addi</i>	tional page)
				—	1			
Certified Fo		er		_	Other (list)	1 <u></u> 2	<u></u>	<u>/4</u> <u></u>
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	ED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AN	D IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
295 C Slicer soile							Co	rrected
188	С		Food not properly reheated	for	hot holding.		Co	rrected
Received by					rected by (name and title proceeded)	rinted):		
Received by					ected by (signature):			
cc:			ce:			cc:		



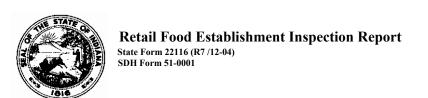
Establishme				Te	lephone Number	Date of In		ID#
Long	Johr	ı S	ilver's	(8	312-476-3662	(mm/dd/y	"/2018	11095
			mber and street, city, state, zip code)	(<redacted></redacted>	00/07	/2010	
	s Gree	<u>en</u>	River Rd, Evansville, IN, 47715					
		10	NE, LLC		rpose: Routine	Follow-u No		17/2018
Owner's Ad					Follow-up	Summary	of Violation	15:
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		E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"			
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE				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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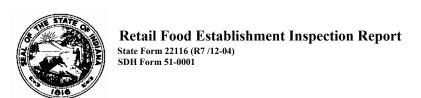
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			mber and street, city, state, zip code)	(<redacted></redacted>	00/07	/2016	
	vasn	ıng	ton Ave., Evansville, IN, 47714					
Owner Divyal	Pate				rpose: Routine	Follow-u No		17/2018
Owner's Ad	ldress				Follow-up	Summary	of Violation	ns:
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					Other (list)			
Certified Fo		er		_	Other (list)	1 <u></u> 2	\bigcirc_3	<u>/4</u> <u>5</u>
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	AARK	KED "C"			
	• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S Section# C/NC R Narrative				ARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violation	ons) <u>.</u>			
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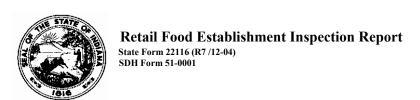
Establishmo 2520 N	e Sha ent Addres V St.J	ss (nu OS	ed Ice mber and street, city, state, zip code) eph Ave, Evansville, IN, 47720	Telephone Number (812-568-5665 () Owner Purpose:	Follow-u	7) 5/2018 p Releas	
Mary I	<u>Edna</u>	<u>На</u>	arp/Anthony DuPont	✓ Routine	Yes	06/	15/2018
Owner's Ad				Follow-up	Summary	of Violation	is:
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Person in C				Pre-Operational	$_{\rm C}$	NC	$\lfloor_{R} 0$
Responsible			<u> </u>	Temporary	Menu Tvi	pe (See addii	tional page)
Responsible	e i ci sun s	L-IIIa		НАССР	wichu Tyj	pc (see addi	ionai page)
Certified Fo	ood Handle	er		Other (list)	102	<u>3</u>	0_4 0_5
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
			P FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				orrected By
232	NC		Shelving and counter area supports la	icking cleanable su	пасе.	06/1	9/2018
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Received by	eceived by (signature):			Inspected by (signature):			
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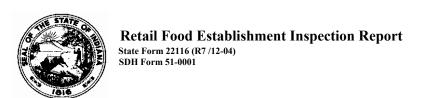
Establishmo Establishmo 23 Dor	SVIIIE	s (nu	tters mber and street, city, state, zip code) ly Way, EVANSVILLE, IN, 47711	3)	S12-435-8686 <redacted></redacted>	Date of Inc (mm/dd/yr 06/05		то# 10954
Owner			sing III	Pu	rpose:	Follow-u		e Date 15/2018
Owner's Ad				_	Follow-up	Summary	of Violation	ıs.
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Person in C	harge			╊	Pre-Operational	$\bigcup_{i \in \mathcal{U}} U_i$	NC_() , ()
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Responsible	Person's	E-mai	il	╊	Temporary	Menu Tyj	pe (See addii	tional page)
				HACCP				
Certified Fo		er		\	Other (list)	1 <u>0</u> 2	<u>3</u>	<u>14</u> 05
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARI	KED "C"			
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Section#	C/NC	R	Narrative				To Be Co	orrected By
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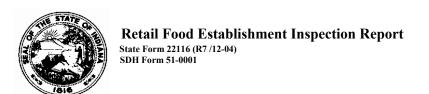
Establishmo 2400 V Owner	Joh ent Addres V Lloy	d E	on/Canteen mber and street, city, state, zip code) xpressway, Evansville, IN, 47712	(81 (<) Purp	phone Number 12-429-7337 redacted> pose:	Follow-u	5/2018 Releas	10947 10947 e Date
Gary S		aa	er	_	Routine	No	06/	16/2018
Owner's Ad				F	'ollow-up	Summary	of Violation	ns:
Person in C					Complaint	\mathbf{O}	NC_) ()
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• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKE	ED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMAR	Y OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No Violations observed at tir	me c	of inspection			
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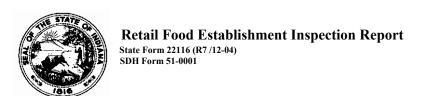
	ets Post ent Addres Broad ts Post ddress cted> Charge cted>	lwa st 8	nber and street, city, state, zip code) by Ave, Evansville, IN, 47712	Pu Pu	rpose: Routine Follow-up Complaint Pre-Operational Temporary	Follow-u No Summary	r) 7/2018 P Release 06/ of Violation NC	_
Certified Fo	ood Handl	er		-	HACCP Other (list)	102	<u>O</u> 3 <u>C</u>	<u>4</u> _5
• VIOLATIO	ON(S) REPE	ATED	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI			D IN THE N		
Section#	C/NC	R	Narrative				To Be Co	orrected By
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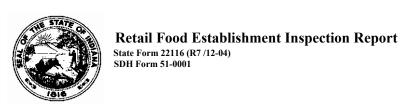
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		RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMN	S MARI	KED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE	SUMM	ARY OF VIOLATIONS" AN	D IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	rrected By
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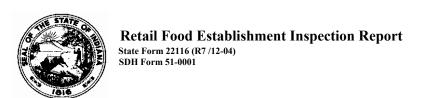
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				AND NARRATIVE COLUMNS M NS ARE DENOTED IN THE "SU!			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative					rrected By
SCCIOII#	CITIC	1/			00			TO DE CO	TICKEU Dy
				No discrepanci	es				
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Establishm	ent Name			Te	elephone Number	Date of Inst	ection	ID#
The S	Steak		urger Company		312-319-3327	(mm/dd/yr) 06/04/		13833
			mber and street, city, state, zip code)	_ (<redacted></redacted>	00/04/	2010	
800 N 0	Green	Riv	er Rd Ste 104, Evansville, IN, 4771	5 5	redacted>			
Owner				Pu	rpose:	Follow-up		e Date
Eduar		JĺΖ		~	Routine	No	06/	14/2018
Owner's Ac					Follow-up	Summary of	of Violation	ns:
<reda< td=""><td></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	$_{\rm C}$ U	NC_() _R U
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Certified Fo		er		 	Other (list)	1 <u></u> 2	<u>3</u>	4050
• CRITICAL	. ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARI	KED "C"			
• VIOLATIC	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	SUMMA	ARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violat	tions),			
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Establishm El Pa Establishm 225 S Owner	isand	s (nu	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	Telephone Number (812-602-3535 (<redacted> Purpose:</redacted>	Date of Ins (mm/dd/yr) 06/06	/2018	13853 13853
eutiqu	i char	ma		Routine	No	06/	16/2018
Owner's Ac				Follow-up	Summary	of Violation	
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• CRITICAL	LITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				orrected By
146	NC		Food packages lacking	g labeling.	06/08/2018		
173	С		Raw meat stored inc	correctly.		06/06/2018	
			Restaurant approved for	Restaurant approved for opening.			
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Establishm				Telephone Number	Date of Ins		ID#
Plant	ers C	af	e & Coffee Bar	812-453-8316	(mm/dd/yr) 06/07	,	13879
			mber and street, city, state, zip code)	() Owner	06/07	/2016	
	utor L	_an	e Ste. E-2, Evansville, IN, 47715				
Owner	lana	_		Purpose:	Follow-up		se Date
David		S		✓ Routine	No	1	17/2018
Owner's Ad				Follow-up	Summary	of Violation	ns:
Person in C				Complaint		NC_	
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				НАССР			
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• 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		O.t	Doubletree	Telephone Number	Date of Insp (mm/dd/yr)		ID#
			Doubletree	812-423-5002	06/06	/2018	13926
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	00,00,		
	<i>l</i> amui	. OI	, Evansville, IN, 47708		7. 11		
Owner HCW	Evan	svi	lle Hotel LLC	Purpose:	Follow-up No		rse Date /16/2018
Owner's A				Follow-up	Summary	of Violatio	ns:
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Person in C				Pre-Operational	$ _{c}$		J _R U
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Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	itional page)
				Other (list)	$I \cap i$		
Certified F		er		Final	$1 \underline{\bigcirc 2}$	<u>J</u> 3 <u>C</u>	<u> 1405</u>
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• CRITICAI	L ITEMS AI	RE 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 NA	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be C	orrected By
			Ok to open.				
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