

	Ster's	ss (nu	Deli ^{mber and street, city, state, zip code)} Ste 100, Evansville, IN, 47712	relephone Number (812-228-4222) (<redacted></redacted>	Date of In (mm/dd/y) 10/30		њ# 13318
Owner's A	ddress		nts, Inc.	Purpose: Routine Follow-up	Follow-u NO Summary		se Date 09/2018 ns:
<reda Person in C <reda< td=""><td>^{Charge} Cted></td><td>1</td><td></td><td>Complaint Pre-Operational Temporary</td><td>с_0</td><td></td><td><u> </u></td></reda<></reda 	^{Charge} Cted>	1		Complaint Pre-Operational Temporary	с_ 0		<u> </u>
Responsible Certified For <redac< td=""><td>ood Handle</td><td></td><td>il </td><td>HACCP Other (list)</td><td></td><td>pe (See addin 33</td><td></td></redac<>	ood Handle		il 	HACCP Other (list)		pe (See addin 33	
• VIOLATIC	DN(S) REPE	ATED	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		ND IN THE N		
Section#	C/NC	R	Narrative				orrected By
431	NC		Outside of the dish machine ex	xcessively solled.		10/3	30/2018
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	v (signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm 800 N G	C'S T	ss (nu	te of NYC mber and street, city, state, zip code) r Rd unit 106, Evansville, Indiana, 47715	(8) (<	12-401-3020		^{r)} 9/2018	ID # 13009		
Owner Sherry	v Sch	nel	1		rpose: Routine	Follow-u NO		se Date 08/2018		
Owner's A	ddress				Follow-up		of Violation			
<reda< td=""><td></td><td></td><td></td><td></td><td>Complaint</td><td>-</td><td></td><td></td></reda<>					Complaint	-				
Person in C	0				Pre-Operational	_ 1) _R 1		
Responsible					Temporary	Menu Tv	ne <i>(See addi</i>	tional page)		
responsion	t t troon 5	L'-1115			НАССР					
Certified Fo		er			Other (list)	1 <u>0</u> 2	<u></u> 3) ₄ <u>0</u> 5 <u>0</u>		
• CRITICAI	L ITEMS AF	₹E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARK	ED "C"					
• VIOLATIC)N(S) REPE	ATEC) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUM	MMA	RY OF VIOLATIONS" AN	D IN THE N	VARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative				To Be Co	orrected By		
324	С	R	Hand washing sink in ne	ed	of repair.		11/0	02/2018		
							<u> </u>			
Г	Γ	\Box					「			
	+									
Received by			· /	-	ected by (name and title pr edacted>	rinted):				
Received by	/ (signature)):		Insp	ected by (signature):					
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2720 N Owner	Frill & ent Address N Gre Nass ddress Cted> Cted> Cted> cted> cted> ood Handle	eri E-ma	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715 & Logan Nasseri	Telephone Number (812-401-2232 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C	r) /2018 p Releas 11/ of Violation 	
• CRITICAI	L ITEMS AF	RE IDI	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
136	C		Employee personal items in				rrected
177	C		Disposable single service items not sto		e floor.		
295	С		Knives improperly stored betw	veen equipment.		Corrected	
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



	/ Buff ent Addres Pearl Hua L Idress Cted> Cted> Cted> cted> cted> cted>	s (nu Dr Liu	mber and street, city, state, zip code) Ste 3D, Evansville, IN, 47712	(8) (4) Pu	lephone Number 12-437-5050 credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u Yes Summary C_7)/2018 p Releas	<u>8</u> <u>R</u> <u>9</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R" Section# C/NC R To Be Corrected By								
187	С	R	Cut melon not maintained under 41º Fahrenheit. Chicken	Teriv	raki on stick not maintain	ed above	TU Be Cu	frected by
107			135º Fahrenhe	-		00 00010	10/2	29/2018
415	С	R	Live pest activity pr		ent.		10/29/2018	
173	C	R	Improper storage of raw egg					rected
294	C	R	Sanitizer concentration for wiping cloths and			oo low.		rected
345	C	R	Hand sink used for purposes other than hand		•		a. Corrected	
191	С	R	Various ready to eat food items la				Corrected	
205	С	R	Scoop for dispensing food product no		—	_		
199	NC	R	Improper thawing method		—		10/2	29/2018
177	NC	R	Food items not covered in Reach-in co	ole	r and on storage	e rack.	Co	rected
116	NC		Record not maintained for documentation of time and te	mpe	rature as a public health	h control.	10/2	29/2018
Received by (name and title printed): Inspected by (name and title printed): <redacted> <redacted></redacted></redacted>						rinted):		
Received by (signature): Inspected by (signature):								
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	/ Buff ent Address Pearl Hua L Idress Cted> Cted> Cted> cted> cted> cted> cted> cted> cted>	iss (nu Dr _iu E-ma	mber and street, city, state, zip code) Ste 3D, Evansville, IN, 477	12	Telephone Number (812-437-5050 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 11/	2 _R 2
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUN			D IN THE N	ARRATIVE	RELOW AS "D"
Section#	C/NC	R	Narrativ		MARINI OF VIOLATIONS AN			orrected By
430 NC R Substrates behind wall and cov				-	ering to be repaired	4		2/2018
430 NC R Lacking rubber coving at 3-compartment sink, disl					i			2/2018
				dishwasher, hot water heater, and mop sink walls.				
			Approved for re		I			
			Approved corrective ac	-	—			
			Corrected all violations from					
Received by	(nonc 1	4:41 -	ninto d).		Increased by (inted):		
<red by<="" td=""><td>·</td><td></td><td>ninea).</td><td></td><td colspan="4">Inspected by (name and title printed): <redacted></redacted></td></red>	·		ninea).		Inspected by (name and title printed): <redacted></redacted>			
Received by	(signature)):			Inspected by (signature):			
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	DUSE ent Address Greer y Mck ddress cted> harge cted> Person's	s (nu n Ri Kee	nber and street, city, state, zip code) ver Rd. #102, Evansville, IN, 47715		ephone Number 12-909-4445 redacted> rose: Routine Follow-up Complaint Pre-Operational Femporary HACCP Other (list)	Follow-u NO Summary C) /2018 P Releas 11/ of Violation NC	10/2018
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!			d in the N		DELOW AS "D"
				WIWIAI	KY OF VIOLATIONS AN	D IN THE N		
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violation	ons.				
Received by	(nome and	titla	anintad).	Incne	ected by (name and title pr	vintad):		
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601 E B Owner SERV Owner's Ad <redat Person in C <redat Responsible</redat </redat 	dy's # ent Address nvl-New ddress cted> cted> cted> e Person's cted>	ss (number : v Harmc NC. E-mail er	and street, city, state, zip code) ony Rd Ste 800, Evansville, IN, 47725	Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r) /2018 p Releas 11/ r of Violation NC	ID # 11896 See Date 11/2018 Ins: \mathbf{R} tional page) \mathbf{A}
			IED IN THE CHECKLIST AND NARRATIVE COLUMNS M M PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
418	NC		Employee drinking in non-de	esignated area.			rrected
Received by		-		Inspected by (name and title provided by (name and title p	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



	I Suit	s (nu	mber and street, city, state, zip code)	(8	lephone Number 312-479-9732 <redacted></redacted>	spection r) 9/2018	ID# 11889		
Owner			Ave, Evansville, IN, 47715 nemas Inc	Pu	rpose: Routine	Follow-u		se Date 08/2018	
Owner's A <reda< td=""><td></td><td></td><td></td><td></td><td>Follow-up Complaint</td><td>-</td><td>of Violation</td><td></td></reda<>					Follow-up Complaint	-	of Violation		
Person in C	cted>				Pre-Operational Temporary			2 _R 2	
Responsible			il	$\begin{array}{c} \text{HACCP} \\ \text{Other (list)} \end{array} \qquad $					
Certified F		er				1 <u>U</u> 2		<u>1405</u>	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	NARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				To Be Co	orrected By	
294	С	R	Chemical dishwasher no	ot s	anitizing.		10/3	30/2018	
347							Corrected		
177	NC		Single service items at bar storage area s			rrected			
295	С		Cutting boards soiled in need to resurfa					29/2018	
					<u> </u>				
Received by				-	ected by (name and title pr edacted>	rinted):			
Received by	(signature):		Inspected by (signature):					
cc:			cc:			cc:			



4706 ^{Owner}	I Suit ent Addres Morga Park ddress cted> Charge cted> e Person's	E-ma	mber and street, city, state, zip code) Ave, Evansville, IN, 47715 nemas Inc		Pelephone Number 312-479-9732 Complaint Pre-Operational Femporary HACCP Other (list)	Follow-u NO Summary C	p Releas p Releas 11/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					
VIOLATIC	DN(S) REPE	ATEI) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			All violations from 10/29/20)18	corrected.			
Received by				-	bected by (name and title pr redacted>	rinted):		
Received by				Insp	bected by (signature):			
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) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUN		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
297	NC	R	Nozzles at self service drink	station soiled			rrected
291	INC	Г		Station Solieu.		0	Tecleu
Received by		-		Inspected by (name and title pr <redacted></redacted>	inted):		
Received by	(signature)):		Inspected by (signature):			
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	ent Address E Mor WS O ddress Cted> Charge Cted> e Person's	s (nu 'Ga I	mber and street, city, state, zip code) n Ave, Evansville, IN, 47714	Telephone Number (618-437-9799 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u Yes Summary C_	r) /2018 p Releas) <u>_</u> <u>_</u> <u>1</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative	ailad			orrected By
295 C R Guard in ice bin						10/31/2018	
345	C		Food service counter hand sink being used to pu	•	-		rrected
177	C		Items in walk in freezer not stored	6 inches off the fic	or.	Co	rrected
Received by		-	printed):	Inspected by (name and title printed):			
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



	reak ent Addres E Mor ws Oi ddress cted> harge cted> e Person's bood Handle	s (nui 'Ga I	mber and street, city, state, zip code) n Ave, Evansville, IN, 47714	Telephone Number (618-437-9799 (<redacted> Purpose: Routine ✓ Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C	p Releas 11/ of Violatior NC	12/2018
CRITICAL VIOLATIC		D IN THE N	ARRATIVE	BELOW AS "R"			
Section#	C/NC	R	Narrative			To Be Co	orrected By
	2.2.0		All violations from 10/31/20	118 corrected		20 00	
Received by		-		Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
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3000 N Owner Xu Hu Owner's Ad <reda Person in C <reda Responsible</reda </reda 	D Jap ent Address N Gree a Lin Idress Cted> Cted> Cted> cted> cted> cted> cted> cted>	en E-ma	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	Telephone Number (917-238-2299 (<redacted> Purpose: Purpose: Purpose: Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u Yes Summary C_4	p Releas 11/ of Violatior NC	
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	ARRATIVE	RFLOW AS "D"
Section#	C/NC	R	Narrative	MMART OF VIOLATIONS AN	DINTIL		orrected By
171	С		Employee using three compartment	sink for hand was	hing.		rrected
324	С		Hand washing sink in ne			Corrected	
174	NC		Bulk container not identified with		e.	Corrected	
189	С		Food not cooled within required time frame.	. Food voluntarily disc	arded.	Со	rrected
204	С		Bulk container scoop lacl	king handle.		Co	rrected
Received by	(name and	title	nrinted):	Inspected by (name and title p	rinted).		
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Received by				Inspected by (signature):			
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Establishm 2521 Owner	d Me ent Addres N Bur d Meti ddress cted> cted> cted> cted> a Person's	ss (nu kh: noc	odist Youth Home mber and street, city, state, zip code) ardt Rd, Evansville, IN, 47715 dist Youth Home		lephone Number 312-479-7535 <redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 11/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
			Violation from 10/25/201	8 0	orrected		I DU CU	u Dy
					Unecleu.			
Received by				-	rected by (name and title proceeded)	rinted):		
Received by	(signature):		Insp	ected by (signature):			
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Establishm	erigot	ss (nu	ontinental Breakfast mber and street, city, state, zip code) side, Evansville, IN, 47708	Telephone Number () Establishment (<redational content="" of="" second="" second<="" th="" the=""><th>Date of In (mm/dd/yr 10/30 Follow-u</th><th>n))/2018</th><th>ID # 11592 e Date</th></redational>	Date of In (mm/dd/yr 10/30 Follow-u	n))/2018	ID # 11592 e Date
Aztar In	diana (Gan	ning Co LLC / dba Tropicana Evansville		No		09/2018
Owner's Ac				Follow-up	Summary	of Violation	15:
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Person in C				Pre-Operational			
<reda Responsible</reda 			a	Temporary			
Responsible	e rerson s	E-ma	11	НАССР	Menu Ty	pe (See addi	lional page)
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$
• CRITICAL	ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIC	ON(S) REPE	ATEI	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by			· · · · ·	Inspected by (name and title provided by (name and title p	rinted):		
Received by	(signature)):		Inspected by (signature):			
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	1's Pi ent Address N Firs R Ma ddress Cted> Cted> Cted> cted> cted> cted> ood Handle	ss (nu st A ay E-ma	mber and street, city, state, zip code) Ave, Evansville, IN, 47710 II	Telephone Number (812-434-6909 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u Yes Summary C_1	r) /2018 p Releas 11/	2 <u>_</u> <u>_</u> <u>1</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative	CALIFICITY OF TOPATIONS AN	~ n (111E)		orrected By
414	NC	IX.	Perimeter walls in need of repa	air to prevent nests)2/2018
415	C	R	Live pest activity p		•	11/02/2018	
431	NC		Remove any items that contribute to		oests)2/2018
Received by (name and title printed):			Inspected by (name and title pr <redacted></redacted>	rinted):			
Received by (signature):				Inspected by (signature):			
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Establishm	s Pa ent Addres Broad Schne ddress cted> cted> cted> cted> cted> a Person's	ss (nu dwa ell E-ma	way Pizza ^{mber and street, city, state, zip code)} ay Ave, Evansville, IN, 4771	12	Telephone Number (812-423-3339 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) p Release 11/ r of Violation NC	
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUN FROM PREVIOUS INSPECTIONS ARE DENOTED IN TH			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrativ	'e			To Be C	orrected By
			No noted viol	latio	ns.			
Received by (name and title printed): <redacted></redacted>					Inspected by (name and title pr <redacted></redacted>	rinted):		
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Establishm				(mm/dd/yr)			ID #
Yen ((812-474-0181	11/01	/2018	11458
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	(<redacted></redacted>			
Owner				Purpose:	Follow-u	I	se Date
		<u>n/(</u>	Chang Ping Chen	✔ Routine	No	11/	11/2018
Owner's A				Follow-up	Summary	of Violation	15:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>Λ</td><td>(</td><td>) 2</td></reda<>				Complaint	Λ	() 2
Person in C				Pre-Operational	C_+		J _R J
Responsible			9	Temporary	Manu Tu	pe <i>(See addi</i> i	tional naco)
Responsion	e reison s	E-ma	11	НАССР	Wienu Tyj	pe (see addi	ionai puge)
Certified F	ood Handl	er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3\bigcirc$	$)_{4} \odot_{5} \bigcirc$
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• CRITICAL	. ITEMS AF	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO)N(S) REPE	ATEL	D 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
187	С	R	Rice not maintained at a temperature of	135º Fahrenheit or g	reater.	11/0	01/2018
344	С		Hand sink in kitchen area	a obstructed.		Co	rrected
324	С	R	Hand sink in kitchen area in	Hand sink in kitchen area in need of repair.			
205	С	R	Food items stored on cloth napkin	and in cardboard	box.	11/0	01/2018
	-						
Received by	/ (name and	l title	printed):	Inspected by (name and title p	rinted):		
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Received by	v (signature)):		Inspected by (signature):			
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	E CO ent Addres	s (nu	RT ^{mber and street, city, state, zip code)} Ave., Evansville, IN, 47722	8) (lephone Number 312 ^E -488-2952) Owner) /2018	id# 11418
Owner Charty	vells				rpose: Routine	Follow-u Yes		e Date 10/2018
Owner's Ac					1			
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Person in C					Complaint Pre-Operational	2		2_{R}
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Responsible	e Person's	E-ma	il		Temporary HACCP	Menu Ty	pe (See addi	tional page)
					4	\cap	\frown	$\cap \cap$
Certified Fo		er			Other (list)	1 <u>U</u> 2		<u>4050</u>
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	1ARK	ED "C"			
	.,	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				To Be Co	orrected By
187	С		Hot food not being held at the required te	emp	erature of 135 de	grees.	Co	rrected
294	С		Sanitizer concentration for wipin	ig c	lothes too weak	κ.	Corrected	
259	NC		Deli refrigerator not holding required te	mp	erature of 41 de	grees.	10/3	31/2018
431	NC		Large walk in cooler fans in r	iee	d of cleaning.		10/3	31/2018
Received by			printed):		ected by (name and title pr edacted>	rinted):		
Received by					ected by (signature):			
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Establishm	DBE ent Addres First A	s (nu ∖V €	#28864 mber and street, city, state, zip code) e, Evansville, IN, 47710	Telephone Number (812-464-237 (<redacted Purpose:</redacted 	10/30	r) D/2018 1p Releas	ID # 11382 ee Date 09/2018
Owner's A				F Routine			
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>-</td><td>of Violation</td><td></td></reda<>				Follow-up	-	of Violation	
Person in C	Charge			Complaint Pre-Operational		NC	I_{R}
<reda< td=""><td>cted></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>	cted>			Temporary			
Responsible Person's E-mail				НАССР	Menu Ty	pe (See addi	tional page)
Certified Fo		er		Other (list)	102	<u></u> 3 <u>C</u>	<u>4</u> <u>0</u> 5 <u>0</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUM PFROM PREVIOUS INSPECTIONS ARE DENOTED IN THE		AND IN THE 1	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
232	NC		Nonfood contact surfaces of drink machine	e & cold food wells need	cleaning.	Со	rrected
		İ					
		1					
Received by (name and title printed): <redacted></redacted>				Inspected by (name and titl <redacted< b="">></redacted<>		I	
Received by	(signature)):		Inspected by (signature):			
cc:			cc:	•	cc:		



	nwan		hinese Restaurant mber and street, city, state, zip code)	(8	lephone Number 12-479-7600	Date of Ins (mm/dd/yr 10/30		id# 11379	
669 N	Gree	n F	River Rd, Evansville, IN, 47715	(<	credacted>				
^{Owner} Jimmy	/ Gao	As	ssociates, Inc.	L	rpose: Routine	Follow-u Yes		^{e Date} 09/2018	
Owner's Ad					Follow-up	Summary	of Violation	IS:	
<reda< td=""><td></td><td></td><td></td><td></td><td>Complaint</td><td>Q</td><td>_</td><td>7 0</td></reda<>					Complaint	Q	_	7 0	
Person in Charge						<u>с</u> 8		ੴ	
<redacted></redacted>						Manu Tru	pe (See addii	ional naco)	
Responsible	e rerson s	c-ma	II.		НАССР	Menu Ty	pe (see aaan	ional page)	
Certified Food Handler Other (list) 102 <redacted></redacted>						1 <u>0</u> 2	<u>O</u> 3 <u>C</u>	$\underline{0}_4 \underline{0}_5 $	
• CRITICAL	ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	ED "C"				
• VIOLATIO	ON(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	rrected By	
118	С	R	Facility lacking certified food ha	and	ler certification.		12/0	1/2018	
344	С	R	Hand sink in kitchen area	a ob	ostructed.		Corrected		
129	С		Employees not washing hand	wh	en necessary.		10/30/2018		
204	С	R	Improper storage of raw chicken & duck aro	und	I the 3-compartme	nt sink.	Corrected		
191	С	R	Ready-to-eat food items held greater than 2	4 ho	ours lacking date n	narking	g 10/30/2018		
177	С	R	Various food items in walk-in c	ool	er not covered.		10/30/2018		
173	С	R	Improper storage of raw chicken above	e re	ady-to-eat food	items.	rected		
449	С	R	Improper use of open bating	for	pest control.		Correcte		
203	NC		Food preparation taking place at 3-compartment	nt sir	nk with dirty dishes p	oresent.			
295	NC	R	Wok brazier cooking a	rea	soiled.		10/3	31/2018	
257	NC		Lacking temperature measuring devices and	d foo	od product thermor	neters.	10/3	31/2018	
177	NC	R	Improper storage of bulk drinkir	١g ١	water container.		Co	rected	
178	NC		Rice container stored	lou	itside.		Co	rected	
416	NC		Dead pests present in ki	itch	en area.		10/3	80/2018	
297	NC		Beverage nozzles	soil	ed.		10/3	80/2018	
	Received by (name and title printed): Inspected by (name and title printed): <redacted> <redacted></redacted></redacted>								
Received by	(signature)):		Insp	ected by (signature):				
cc: cc: cc:									



Szechwan Chinese Restaurant Establishment Address (number and street, city, state, zip code) 669 N Green River Rd, Evansville, IN, 47715	(812-479-7600) (<redacted></redacted>	(mm/dd/yr) 11/02/	2018	11379
Establishment Address (number and street, city, state, zip code) 669 N Green River Rd, Evansville, IN, 47715	<pre>(<redacted></redacted></pre>	11/02/	2010	
1669 N Green River Rd, Evansville, IN, 47715	,			
	Durnoso			
Owner Limmy Can Annapistan Inc		Follow-up	Releas	
Jimmy Gao Associates, Inc.	Routine	No		12/2018
<redacted></redacted>	✔ Follow-up	Summary o	f Violation	IS:
Person in Charge	Complaint			
<redacted></redacted>	Pre-Operational	с_С	NC_	
Responsible Person's E-mail	Temporary	Menu Type	: (See addit	ional page)
	HACCP		\sim	
Certified Food Handler	Other (list)	$1 \underline{\bigcirc} 2 \underline{\bigcirc}$	<u>3</u>	$\underline{0}_4 \underline{0}_5 $
<redacted></redacted>				
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section# C/NC R Narrative			To Be Co	orrected By
Follow-up from inspection on 10/30/	18. Violations corre	ected.		
Received by (name and title printed):	Inspected by (name and title pr	rinted):		
<redacted></redacted>	<redacted></redacted>			
Received by (signature):	Inspected by (signature):			
cc: cc:		cc:		



4750 Owner PATH Owner's Ad <reda Person in C <reda Responsible</reda </reda 	Ay ent Addres W Llo IL AN ddress Cted> Cted> cted> cted> cted> cted> ood Handl	<u>Y</u> MIN E-ma		12	Telephone Number (812-429-0090 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 11/ of Violation NC_	
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUN) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
Section#	C/IIC	K	No noted viol	-	ne		10 DC CC	freeteu by
-				allo	115.			
Received by					Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature):			Inspected by (signature):			
cc:			cc:			cc:		



	King ent Address Wei Wei L& Da ddress Cted> Cted> cted> cted> cted> cted> cted>	nba avie E-ma		Telephone Number (812-473-1744 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u Yes Summary c_2	r) 2/2018 p Releas 11/ r of Violation	2 <u>R</u> 0
• CRITICAL	. ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
294	С		Sanitizer concentration for wipin	a clothes too weak	(Co	rrected
177	C		Cases of bread in walk in cooler not sto	•			
431	NC		Reach in cooler door seals and shelv)5/2018
324	NC		Grease trap log not being		5	11/0)5/2018
<redacted></redacted>				Inspected by (name and title pr <redacted></redacted>	rinted):	I	
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm	Garc ent Address N Gre Inc ddress cted> Charge cted> e Person's	en E-ma	n #1022 ^{mber and street, city, state, zip code)} River Rd, Evansville, IN, 477	715	Telephone Number (812-473-2903 (<redacted> Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Haccp Haccp Other (list)</redacted>	Follow-u NO Summary C Menu Tyj	p Releas 11/ of Violation	R_0
<u> </u>		RE IDI	CNTIFIED IN THE CHECKLIST AND NARRATIVE COLU	MNS N	MARKED "C"			
• VIOLATIO		ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN TH	HE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrati					orrected By
297	297 NC Ice guard soiled in ice				machine.		Co	rrected
Received by			printed):	Inspected by (name and title p <redacted></redacted>	rinted):			
Received by	v (signature)):			Inspected by (signature):			
cc:			cc:			cc:		



	mart ent Address Way 6 Dil Co Idress Cted> harge Cted> e Person's	E-ma	mber and street, city, state, zip code) & 164, CYNTHIANA, IN, 47612	Telephone Number (812-963-6631 (<redacted> Purpose:</redacted>	Follow-u NO Summary C_1	.) /2018 p Releas) _R _0
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
191	C	Ň	Ready to eat, potentially hazardous for	od locking data m	arking		rrected
191	U		Ready to eat, potentially hazardous it	bou lacking date ma	arking.	CO	Tecleu
Received by		-	printed):	Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
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Establishm Circle Establishm 131 S Owner C & S Owner's Ad <redat Person in C <redat Responsible</redat </redat 	ent Addres Redb Inc ddress Cted> Charge Cted> e Person's	ss (nu pan E-ma	mber and street, city, state, zip code) k Rd., EVANSVILLE, IN, 47712	(8) (V) Pui V) Pui V)	lephone Number 12-422-9871 Compacted rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C_	p Releas p Releas 11/ of Violation NC_	
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	1ARK	ED "C"			
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE " Scotion# C/NC P Normative					RY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
	No noted viola				•			
Received by	acte	d>	· · · · · · · · · · · · · · · · · · ·	-	ected by (name and title pr edacted>	rinted):		
Received by	r (signature):		Inspe	ected by (signature):			
cc:			cc:			cc:		



3951 N	S#3	s (nu	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715			n))/2018	ID# 11047	
^{Owner} MART	IN &	ΒA	YLEY INC	Purpose:	Follow-u Yes		e Date 09/2018	
Owner's A	ddress			Follow-up	Summary	of Violation	15:	
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>-</td><td></td><td></td></reda<>				Complaint	-			
Person in C				Pre-Operational	<u>с</u> З	NC		
Responsible			1	Temporary	Menu Type (See additional page)			
Responsible		L-ma	11	НАССР	Wenu Type (See additional page)			
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u></u> 3	$)_4 \bigcirc_5 \bigcirc$	
†		E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
			PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
129 C Employees not washing				hen required.	Corrected			
177	С		Food in walk-in freezer and cooler not st	tored 6 inches off the	e floor.	Corrected		
291	NC		Sanitizer test kit not a	10/3	31/2018			
193	С		Time being used as a public health control. Food not p	ulled from the shelf at requi	ired time.	Co	rrected	
Received by	(name and	title	printed):	Inspected by (name and title p	rinted):			
<red< td=""><td>acteo</td><td>/></td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></red<>	acteo	/>		<redacted></redacted>				
Received by	v (signature)):		Inspected by (signature):				
cc:			cc:		cc:			



1800 L Owner Charty Owner's Ac <redae Person in C <redae Responsible</redae </redae 	-fil-A ent Addres _incol vells ddress cted> harge cted> e Person's	E-mai		IN, 47722	Telephone Number (812-488-2061 (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C Menu Typ	p Releas 11/ of Violation NC	10/2018
			NTIFIED IN THE CHECKLIST A			ND IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
Section	ente			No violations			10 20 00	incered by
					•			
Received by		-	printed):		Inspected by (name and title p <redacted></redacted>	printed):		
Received by	(signature)):			Inspected by (signature):			
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Establishm 509 S Owner Evans Owner's Ad <redat Person in C <redat Responsible Certified Fe</redat </redat 	sville ent Addres Kent sville (ddress cted> charge cted> e Person's	ss (nu UCI Ch E-ma		(8 (• •	Performance Number 12-423-9222 (redacted) rrpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	p Releas 11/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
Section	CITC	<u>^</u>		200			10 20 00	
	No noted violations.							
Received by			, , , , , , , , , , , , , , , , , , ,	-	bected by (name and title pr redacted>	rinted):		
Received by	(signature)):		Insp	bected by (signature):			
cc:			cc:			cc:		



Establishm 222 E	Head	s (nui	idewalk Cafe mber and street, city, state, zip code) bia St., Evansville, IN, 47711	relephone Number (812-425-2515 (<redacted></redacted>		^{r)} /2018	id # 10900
Owner Charle	ne Int	ามร	son Ir	Purpose:	Follow-u NO		^{ie Date} 10/2018
Owner's Ac				V Routine	_		
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td></td><td>of Violation</td><td></td></reda<>				Follow-up		of Violation	
Person in C				Complaint			2 _R 1
<reda< td=""><td>0</td><td></td><td></td><td>Pre-Operational</td><td>с<u> </u></td><td>NC</td><td><u> </u></td></reda<>	0			Pre-Operational	с <u> </u>	NC	<u> </u>
Responsible			 il	Temporary	Menu Ty	pe (See addit	tional page)
				НАССР	\frown	\sim	
Certified Fo		r		Other (list)	1 <u>0</u> 2		$\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$
• CRITICAL	. ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIC	DN(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
218	NC		Dish machine not properly dis	pensing sanitizer.		Coi	rrected
214	NC	R	Cutting board on first make table ne	eds repaired/repla	aced.	11/10/2018	
				· · · ·			
Received by		-		Inspected by (name and title pr <redacted></redacted>	inted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm 4635 Owner	lers ent Address First A CHEN ddress Cted> Charge Cted> cted> cted> cted>	s (nui AVE S I E-mai	A #453 mber and street, city, state, zip code) e, Evansville, IN, 47710 NORTH FOODS LLC	Telephone Number (812-467-7255 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_1	p Releas 11/ of Violatior NC			
• CRITICAI									
	()		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUP	MMARY OF VIOLATIONS" AN	D IN THE N				
Section#	C/NC	R R	Narrative	i & popcorp area			orrected By 30/2018		
139							Corrected		
100						00	TECLEU		
Received by		-		Inspected by (name and title pr <redacted></redacted>	rinted):				
Received by	(signature)):		Inspected by (signature):					
cc:			cc:		cc:				



Establishm 800 N Owner Indian Owner's Ad <reda Person in C <reda Responsible Certified F <redac< th=""><th>oon S ent Addres Gree a Nev ddress cted> cted> cted> cted> cted> cted> cted> cted></th><th>en F w E E-ma</th><th></th><th>(8) (~ Pu (~</th><th>elephone Number 312-475-1688 <redacted> rrpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>Follow-u NO Summary C</th><th>p Releas p Releas 11/ r of Violation NC_</th><th></th></redac<></reda </reda 	oon S ent Addres Gree a Nev ddress cted> cted> cted> cted> cted> cted> cted> cted>	en F w E E-ma		(8) (~ Pu (~	elephone Number 312-475-1688 <redacted> rrpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas p Releas 11/ r of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
177 C R Items in cooler not					ered		29/2018	
173 C Improper storage of raw						Corrected		
438 C Chemical bottles n								29/2018
438 C Chemical bottles no				a			10/2	-3/2010
Received by <red< b=""> Received by</red<>	acteo	d>		<	bected by (name and title pr redacted> bected by (signature):	rinted):		
cc:			cc:			cc:		



Establishm 13605 Owner James Owner's Ac <reda Person in C <reda Responsible</reda </reda 	r's G ent Addres Darm S A Ba ddress Cted> Charge Cted> cted> a Person's	ss (nu ISTA AUE E-ma			ephone Number 12-867-3169 redacted> rose: Routine Follow-up Complaint Pre-Operational Femporary HACCP Other (list)	Follow-u NO Summary C	p Releas 11/ of Violation NC	
<redac< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>								
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
Section	0,110		No noted violatio	ons			10 20 00	
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		1						
Received by				-	ected by (name and title pr edacted>	inted):		
Received by	(signature)):		Inspe	ected by (signature):			
cc:			cc:			cc:		



Establishm	ebee ent Addres Pearl Cent ddress cted>	nu Dr ral,	Neighborhood Grill mber and street, city, state, zip code) , Evansville, IN, 47712 LLC	Telephone Number (812-426-2006 (<redacted> Purpose: Routine Follow-up Complaint</redacted>	Follow-u NO Summary	r) /2018 p Releas 11/	10845 10845 10/2018	
<reda< td=""><td></td><td></td><td>a.</td><td>Pre-Operational Temporary</td><td></td><td></td><td></td></reda<>			a.	Pre-Operational Temporary				
Responsible	e Person's	E-ma	u	НАССР	Menu Type (See additional page)			
Certified For		er		Other (list)	1 <u>0</u> 2	<u>3</u>	$\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$	
• 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						ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
187 C R Ready to eat food held above 41 degrees in prep cooler. If			oler. Food voluntarily moved/di	scarded.	Co	rrected		
218	NC	R	Prep cooler not functioni	ng as designed.		10/31/2018		
431	NC		Excessive build up around dish mac	nine and under equip	ment.	10/3	31/2018	
Received by			vrinted):	Inspected by (name and title printed):				
Received by	(signature)):		Inspected by (signature):				
cc:			cc:		cc:			



Establishm	r Tha ent Address Bnvl-N agon f ddress cted> Charge cted> cted> cted> ood Handlo	ew Mey E-ma		(8) (~ Pu	lephone Number 12-867-2741 (redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r) /2018 p Releas 11/ of Violation NC	ID # 13759 ie Date 11/2018 is: R_2 tional page) 40_5
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M			DIM		DELOW 10 /D"
		-	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMA	KY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative					prrected By
293NCRImproper use of 3 comp187CRChicken not being held at						Corrected		
187		к	Chicken not being held at 1	-			Corrected 11/01/2018	
229	C		Slicer soiled.					
345	С		Hand washing sink used for	oth	er purposes.		Co	rrected
Received by	acteo	d>		<r< td=""><td>ected by (name and title pr edacted></td><td>rinted):</td><td></td><td></td></r<>	ected by (name and title pr edacted>	rinted):		
Received by	(signature)):		Insp	ected by (signature):			
cc:			cc:			cc:		



Establishm	non ent Addres	ss (nu	ound Community Kitchen ^{mber and street, city, state, zip code)} t, Evansville, IN, 47708	Telephone Number (812-425-7029 (<redacted></redacted>	Date of Ins (mm/dd/yr 10/29		^{ID#} 13786		
41JIN Owner	vv Su	10	I, Evalisville, IN, 47700	Purpose:	Follow-u	n Releas	e Date		
Peggy	Pirro)		✓ Routine	No 11/08/201				
Owner's A				Follow-up	Summary of Violations:				
<reda< td=""><td></td><td>•</td><td></td><td>Complaint</td><td></td><td colspan="4">0 0 0</td></reda<>		•		Complaint		0 0 0			
Person in C				Pre-Operational	с_О	<u>c_0 nc_ r_0</u>			
Responsible			1	Temporary	Menu Type (See additional page)				
				HACCP					
Certified For		er		Other (list)	$1 \underbrace{\bigcirc} 2 \underbrace{\bigcirc} 3 \underbrace{\bigcirc} 4 \underbrace{\bigcirc} 5 \underbrace{\bigcirc}$				
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative				orrected By		
			No noted violation	ons.					
			Inspected by (name and title printed): <redacted></redacted>						
Received by (signature):				Inspected by (signature):					
cc:			cc:	cc:					



Establishm 2225 Owner	's Fo ent Addres N Far a & Ba ddress cted> Charge cted> e Person's	es (nu es ayle E-ma	Store mber and street, city, state, zip code) Ave, Evansville, IN, 47711 ey INC		lephone Number 12-213-5465 Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C_1) 2018 P Releas 11/ of Violation NC			
	• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"									
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N				
Section#	C/NC	R	Narrative				To Be Corrected By			
173	С		Improper storage of raw m	aw meat in cooler.			Co	rrected		
		-								
Paceived by	(name and	titla	nrinted):	Incr	ected by (name and title n	inted):				
				Inspected by (name and title printed): <redacted></redacted>						
Received by (signature):				Inspected by (signature):						
cc:			cc:	cc:						



Establishm Vendor	& Irv	ss (nu	Midwest, LLC mber and street, city, state, zip code) 90, 191, & 192, Vincennes , IN, 47591			^{.,})/2018	^{ID #} 13887		
Owner Chels	ea Me	eek	XS	Purpose:	Follow-u NO		se Date 08/2018		
Owner's A				Follow-up		of Violation			
<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					
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td colspan="4"></td></reda<>				Temporary					
Responsible	e Person's	E-ma	a	НАССР	Menu Type (See additional page)				
				Other (list)					
Certified For		er		Opening	$1 \underline{\bigcirc} 2$	$1 \underline{\bigcirc} 2 \underline{\bigcirc} 3 \underline{\bigcirc} 4 \underline{\bigcirc} 5 \underline{\bigcirc}$			
1					L				
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		D IN THE N	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative			To Be Co	orrected By		
			Ready to open at Showplace	e Cinemas East.					
	Ļ		<u> </u>	· · ·					
Received by		-		Inspected by (name and title provided by (name and title p	rinted):				
Received by (signature):				Inspected by (signature):					
cc:			cc:	cc:					