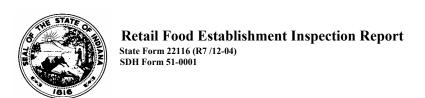
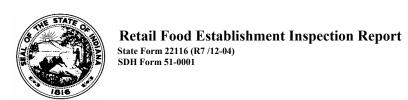


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			mber and street, city, state, zip code)	<pre>(<redacted>)</redacted></pre>	11/20/	2016	
	Logar	<u>ט</u> ו	r, Evansville, IN, 47715				
Owner	, no, o	N Л÷	annumi II.C	Purpose:	Follow-up		se Date
		IVII	ssouri, LLC	<b>✓</b> Routine	No		08/2018
Owner's Ad				Follow-up	Summary o	f Violation	ns:
Person in C				Complaint		NC_	1 1
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Responsible			ii	Temporary Temporary	Menu Type	(See addi	tional page)
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Certified F		er		Other (list)	$_{1}\bigcirc_{2}($	$)_3$ $\bullet$	$)_{4}\bigcirc_{5}\bigcirc$
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• CRITICAL	L ITEMS AF	RE IDE	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	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
430	NC	R	Wall, flooring, and shelving in need	d of repair or replac			28/2018
100	110	. `	rran, neering, and enerring in neer	a or ropan or ropiac	<u>g.</u>		10/2010
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Received by		_	orinted):	Inspected by (name and title properties)	rinted):		
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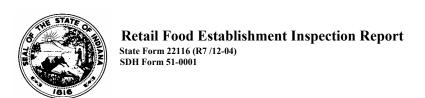
E-4-1-1-1-1	4 NI			T-1h Nh	Date of Inspe	ation	ID #
Establishmo Ruler		d S	Store #233	Telephone Number (812-476-0716	(mm/dd/yr)		10# 12046
			mber and street, city, state, zip code)	( ) Owner	11/28/2	2010	
730 B	S Gre	en	River Rd, Evansville, IN, 47715	<reaacted></reaacted>			
Owner		_		Purpose:	Follow-up		e Date
Jay C		St	ores	<b>✓</b> Routine	No	12/	08/2018
Owner's Ac				Follow-up	Summary of	f Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$ U	NC	$\lfloor_{R} \rfloor$
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Responsible	e Person's	E-ma	il	НАССР	Menu Type	(See addi	tional page)
				Other (list)	$\cap$ (		
Certified Fo		er		— Other (list)	1 2	<u>3</u>	<u> 4050</u>
• CRITICAL	. ITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"	•		
• VIOLATIC	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
431	NC	R	Milk refrigeration and she	elving soiled.		11/2	28/2018
			5				
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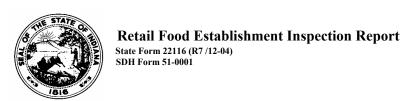
Establishment Nume								T
Establishment Address (number and street, city, state, zip, code)   2100 N Green River Rd, Evansville, IN, 47715   < red acted			#	2148	Telephone Number	(mm/dd/yr	)	ID# 11993
2100 N Green River Rd, Evansville, IN, 47715   <a href="#">Credacted</a> Over   Purpose:   Purpose:   Purpose:   Pattor   Pattor   Purpose:   Purpose:   Pattor   Purpose:   Pattor   Purpose:   Pattor   Purpose:   Pattor   Purpose:   Pattor   Purpose:   Pattor   Purpose:   Purpose:   Pattor   Purpose:   Pattor   Purpose:   Purpos					1	11/29	/2018	11333
Cheddar's Casual Cafe  Owar's Address  Fellow-up  Freson in Charge  Freson in Charge					<pre><redacted></redacted></pre>			
Online's Address   Follow-up   Complaint					Purpose:	Follow-uj		
Camplaint   Camp	Chedo	dar's (	Cas	sual Cafe	<b>✓</b> Routine	Yes	12/	09/2018
Person in Charge  <					Follow-up	Summary	of Violation	ns:
Responsible Person's E-mail  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**					Complaint	2		) 1
Responsible Person's E-mail  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**					Pre-Operational	$_{\rm C}$	NC 4	$\frac{\prime}{R}$ I
Repossible Person's F-mail  Certified Food Handler  Certified Food Handler Certified Food Handler Certified Food Handler Certified Food Handler Certified Food Handler VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATION" AND IN THE NARRATIVE BELOW AS "R" Section# Corrected By C R Employee not washing when required. Corrected 294 C Sanitizer concentration for wiping clothes too weak. 11/29/2018 174 NC Bulk container not identified with common food name. Corrected 259 NC Reach in cooler in need of repair. 12/06/2018 Received by (name and title printed): Credacted> Received by (signature): Inspected by (signature):					Temporary			
**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	Responsible	e Person's	E-ma	il		Menu Typ	e (See addi	tional page)
**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	C CC IE	177 11			Other (list)	100		$\bigcirc$
**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			er			$1 \bigcirc 2$		<u>/4050</u>
Section# C/NC R Employee not washing when required. Corrected By 129 C R Employee not washing when required. Corrected 294 C Sanitizer concentration for wiping clothes too weak. 11/29/2018 174 NC Bulk container not identified with common food name. Corrected 259 NC Reach in cooler in need of repair. 12/06/2018			E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
129						D IN THE N	ARRATIVE	BELOW AS "R"
294 C Sanitizer concentration for wiping clothes too weak.  174 NC Bulk container not identified with common food name.  259 NC Reach in cooler in need of repair.  12/06/2018  Received by (name and title printed):  259 Received by (signature):  150 Inspected by (signature):	Section#	C/NC	R	Narrative			To Be Co	orrected By
174 NC Bulk container not identified with common food name.  259 NC Reach in cooler in need of repair.  12/06/2018  Received by (name and title printed):    Inspected by (signature):   Inspected by (signature):	129	С	R	Employee not washing when	hen required.		Co	rrected
Received by (name and title printed): <redacted>  Received by (signature):  Received by (signature):  Inspected by (signature):  Inspected by (signature):  Inspected by (signature):  Inspected by (signature):</redacted>	294	С		Sanitizer concentration for wipin	g clothes too weal	۲.	11/2	29/2018
Received by (name and title printed): <redacted>  Received by (signature):  Inspected by (signature):  Inspected by (signature):</redacted>	174	NC		Bulk container not identified with	common food nam	ne.	Co	rrected
< redacted>       < redacted>         Received by (signature):       Inspected by (signature):	259	NC		Reach in cooler in need	d of repair.		12/0	)6/2018
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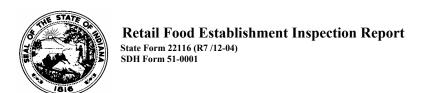
Establishm		of o	f Evansville, OLEvansville LLC	Telephone Number	Date of Ins (mm/dd/yr)		ID#
			mber and street, city, state, zip code)		11/27	/2018	11955
701 N			rdt Rd, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
Owner Allisor	n Phil	lips		Purpose:	Follow-up		se Date /07/2018
Owner's Ac		p c		Follow-up		of Violation	
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Person in C				Pre-Operational		NC_	J b O
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				HACCP		$\bigcirc$ 6	
Certified Fo		er		Other (list)	1 <u>U</u> 2		<u>/4</u> 05
• CRITICAL	ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be C	orrected By
			No noted violation	ons.			
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Establishm MJ'S		١		Telephone Number	Date of Ins (mm/dd/yr		то# 11902
				812-402-6313	11/27	/2018	11902
			nber and street, city, state, zip code) Dr, Evansville, IN, 47714	<pre><redacted></redacted></pre>			
Owner MARY	/ JO E	3Rl	JGMANN	Purpose:	Follow-uj		se Date /07/2018
Owner's A				Follow-up	Summary	of Violation	
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Certified F		er		Other (list)	1 <u>U</u> 2		<u>/4</u> 05
• CRITICAI	L ITEMS AF	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be C	orrected By
294	С		Sanitizer concentration for wipir	ng cloths too weak	_		
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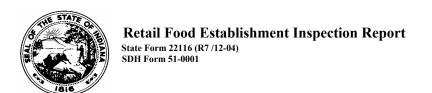
Establishme				Te	lephone Number	Date of In: (mm/dd/y)		ID#
Bone	fish (	<b>3</b> ril	II #7505	(8	12-401-3474	`	)/2018	11707
			mber and street, city, state, zip code)	(	redacted>	11/30	<i>  </i>	
	: Lloyd	<u>1 E</u>	xpressway, Evansville, IN, 47715					
Owner	ich C	ı:۱۱	110		rpose:	Follow-u		se Date
Bonef		<u> []]</u>	LLC	~	Routine	No	12/	10/2018
Owner's Ad					Follow-up	Summary	of Violation	18:
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Responsible			ii	Ŀ	Temporary	Menu Tv	pe <i>(See addii</i>	tional nage)
responsible	, i cison s				НАССР	- Wiena Tyj	pe (see aaan	
Certified Fo	ood Handle	er		L	Other (list)	$1\bigcirc 2$	$\bigcirc_3$	)4 ( 5 ( )
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• CRITICAL	ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARK	ED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
171	С		Ready-to-eat food item being hand	طام	d with hare han	ds		30/2018
171			ready to eat rood item being han	<u>uic</u>	a with bare han	us.	11/0	70/2010
						ļ		
		$\vdash$						
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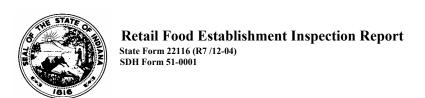
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			mber and street, city, state, zip code)	<redacted></redacted>	11/21/	2010	
	<u>Vann</u>	A۷	e, Evansville, IN, 47714				
Owner	V DC	<b>N</b> 1	AD Ctores of INLLD	Purpose:	Follow-up		se Date
Owner's A		JLL	_AR Stores of IN LP	Routine	No		07/2018
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Person in C				Complaint		$_{\rm NC}$	) ()
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Responsible			il	Temporary	Menu Type	(See addi	tional page)
				HACCP		~ ~	
Certified F		er		Other (list)	1 <u>0</u> 2	<u>_</u> 3 <u>_</u>	<u>)4U5U</u>
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• CRITICAL	L ITEMS AF	RE IDE	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	RRATIVE	BELOW AS "R"
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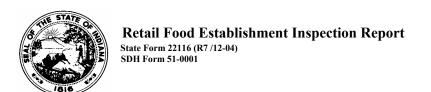
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			mber and street, city, state, zip code)	<redacted></redacted>	11/2//	2018			
701 N	Burk	haı	rdt Rd, Evansville, IN, 47715	<redacted></redacted>					
Owner	<del></del>			Purpose:	Follow-up		se Date		
KEN E		EK	, II	<b>✓</b> Routine	No	12/	07/2018		
Owner's A				Follow-up	Summary of	of Violation	ns:		
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Person in C				Pre-Operational	C	NC_	P R O		
Responsible			:1	Temporary	Manu Tyn	(Saa addi	tional page)		
Kesponsion	e i eison s	L-ilia	ш	HACCP	Wichu Type	, (see aaai	nonai page)		
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}($	$\bigcirc_3$ $\bigcirc$	$)_{4}\bigcirc_{5}\bigcirc$		
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• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"	1				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE NA	ARRATIVE	RELOW AS "R"		
Section#	C/NC	R	Narrative	MARKET OF VIOLATIONS AND			orrected By		
Section	C/ITC	IX	No noted violation	one		10 BC CC	HICCICA By		
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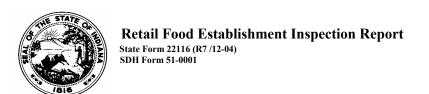
Establishm McDo		s (	CEK ENTERPRISES LLC)	Telephone Number (812-471-3015)	Date of Ins (mm/dd/yr	·j	то# 11591
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	( )Owner	11/28	3/2018	
Owner			ATHERINE KENWORTHY	Purpose:	Follow-u		se Date 08/2018
Owner's A	ddress			Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	<sub>c</sub> <b>Z</b>	NC (	$0_{R}$
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Responsible	e Person's	E-ma	il	Temporary	Menu Typ	oe (See addi	tional page)
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Certified F		er		Other (list)	1 <u>U</u> 2	<u>3</u>	<u> 1405</u>
• CRITICAI	ITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
294	С		Sanitizer concentration for wipir	ng cloths too weak		Co	rrected
129	С		Employee not washing wl	hen required.		Co	rrected
Received by	,			Inspected by (name and title posterior < redacted >	rinted):		
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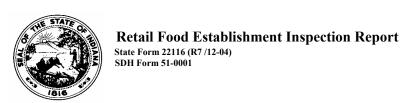
Establishm	ent Name			Telephone Number	Date of Ins		ID#
Darm	stad	t Ir	nn	(812-867-7300	(mm/dd/yr 11/29		11543
			mber and street, city, state, zip code) tadt Rd, Evansville, IN, 47725	<pre>(<redacted></redacted></pre>	11/29	/2010	
		nn	edy - JLK Bar Holdings II Inc.	Purpose:	Follow-up Yes		ne Date 09/2018
Owner's Ac				<b>✓</b> Follow-up	Summary	of Violation	18:
<reda< td=""><td></td><td>•</td><td></td><td>Complaint</td><td>1</td><td>(</td><td>) 1</td></reda<>		•		Complaint	1	(	) 1
Person in C				Pre-Operational	C	NC_	<u> </u>
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
•				НАССР			
Certified Fo		er		Other (list)	1 2	<u>3</u>	<u>)</u> 4 <u>U</u> 5 <u>U</u>
• CRITICAL	ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	IARKED "C"			
• VIOLATIO	ON(S) REPE	CATEL	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
			Follow up from 10-1	7-2018.			
118	С	R	Food establishment does not have a	certified food emp	loyee.	01/1	10/2019
			All other violations were				
Received by	*		•	Inspected by (name and title properties)	rinted):		
Received by	(signature	):		Inspected by (signature):			
ce:			cc:		cc:		



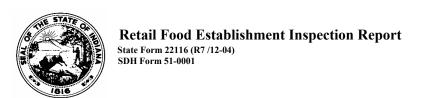
Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Famil	y Do	lla	r #21549	812-474-1679	` '	2040	11527
			mber and street, city, state, zip code)		11/28/2	2018	
1617 l	Lodge	<u>A</u>	ve, Evansville, IN, 47714	<redacted></redacted>			
Owner	\ D (		AB 0: (IN LB	Purpose:	Follow-up		se Date
		)LL	_AR Stores of IN, LP	Routine	No	12/	08/2018
Owner's Ac				Follow-up	Summary of	`Violation	1S:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td>) (</td></reda<>				Complaint	$\cap$	(	) (
Person in C	0			Pre-Operational	$_{\rm C}$	NC_	$\frac{1}{R}$
<reda< td=""><td></td><td></td><td>2</td><td>Temporary</td><td></td><td></td><td></td></reda<>			2	Temporary			
Responsible	e Person's	L-ma	11	НАССР	Menu Type	(See aaan	nonai page)
Certified Fo	ood Handle	or		Other (list)	102	$)_{3}$	),(),()
<redag< td=""><td></td><td></td><td></td><td></td><td>102</td><td><u></u></td><td><u>/4030</u></td></redag<>					102	<u></u>	<u>/4030</u>
		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MADKED "C"	1		
	. ,		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			fo Be Co	orrected By
			No violations	S			
					<del></del>		
Received by		_	printed):	Inspected by (name and title p	rinted):		
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Received by	(signature)	):		Inspected by (signature):			
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Establishm				Telephone Number	Date of Insp		ID#
Stop	& Go	<b>) -</b>	LS Petroleum Inc	812-421-8190	(mm/dd/yr)		11521
			mber and street, city, state, zip code)	<pre>(<redacted>)</redacted></pre>	11/29/	2016	
	Bark	er <i>i</i>	Ave, Evansville, IN, 47712				
Owner	~4 C~	مما	lei	Purpose:	Follow-up		se Date
Parmo		ıan	KI	<b>✓</b> Routine	No		09/2018
Owner's A				Follow-up	Summary	of Violation	
Person in C				Complaint	1 1		$1_{R}$
<reda< td=""><td></td><td>,</td><td></td><td>Pre-Operational</td><td>C</td><td>NC</td><td>R</td></reda<>		,		Pre-Operational	C	NC	R
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР			
Certified F		er		Other (list)	$1 \bigcirc 2$	<u>3</u>	<u>)4</u> <u>0</u> 5 <u>0</u>
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• CRITICAI	L ITEMS AI	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
191	С	R	Potentially hazardous food lack	king date marking.		Co	rrected
199	NC	R	Improper thawing of rav	w chicken.		Co	rrected
Received by	•	_ *	printed):	Inspected by (name and title pr	rinted):		
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Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Made	eleine	S		812-491-8611	11/29/	2010	11500
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	( ) Owner	11/29/	2016	
	E Sec	con	d Street, Evansville, IN, 47713	<pre>(<redacted></redacted></pre>			
Owner	·· · ·			Purpose:	Follow-up		se Date
Tyra S		K		<b>✓</b> Routine	No	12/	09/2018
Owner's A				Follow-up	Summary o	f Violatio	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td>(</td><td><math>\cap</math></td></reda<>				Complaint		(	$\cap$
Person in C				Pre-Operational	$_{\rm C}$	NC_	$\mathcal{L}_{R}$
Responsible			9	Temporary	Manu Trinc	(Can addi	tional page)
Kesponsibio	e rerson s	c-ilia	ш	НАССР	Menu Type	(see aaai	iionai page)
Certified F	ood Handl	er		Other (list)	$1_1\bigcirc_2$	$\bigcirc$ 3( $\bullet$	$)_4\bigcirc_5\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
					ID IN THE NA	DD ATIME	DELOW AC 4D9
	C/NC		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	WIMARY OF VIOLATIONS AN			
Section#	C/NC	R	Narrative		<del></del>	то ве С	orrected By
			No noted violation	ons.			
Received by	*	_ *		Inspected by (name and title p	rinted):		
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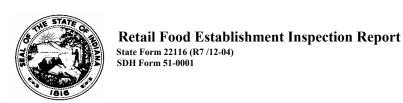
Establishm Starb		$C_{i}$	offee Co #8693	Telephone Number	Date of Ins (mm/dd/yr		ID#
			mber and street, city, state, zip code)	812-421-0461	11/29	/2018	11496
			e, Evansville, IN, 47710	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
1		Cot	fee Co	<b>✓</b> Routine	No	12/	09/2018
Owner's A				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td>) ()</td></reda<>		1		Complaint	$\cap$	(	) ()
Person in C				Pre-Operational	$_{\rm C}$	NC_	$\frac{0}{R}$
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Responsible	e Person's	L-ma	11	НАССР	Menu Typ	e (See aaai	tionai page)
Certified F	ood Handl	or		Other (list)	102	(•) <sub>2</sub> (	$)_4\bigcirc_5\bigcirc$
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		e ini	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AADKED "C"			
					D IN THE N		DEL OW 16 (D
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by		_		Inspected by (name and title p < redacted>	rinted):		
Received by				Inspected by (signature):			
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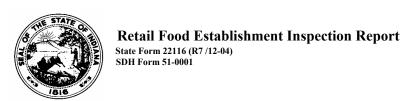
			<u> </u>				
Establishm		<b>`</b> L:	- -	Telephone Number	Date of Ins (mm/dd/yr		ID#
Taste				812-422-1260	11/26	/2018	11390
			nber and street, city, state, zip code) by Dr., Evansville, IN, 47712	<pre><redacted></redacted></pre>			
Owner	OTIIVO	1310	y Dr., Evansvine, 114, 477 12	Purpose:	Follow-uj	Relea	se Date
Wai T	ak La	m		Routine	No		06/2018
Owner's A				<b>✓</b> Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	$ _{\mathcal{C}}$ $\mathbf{U}$	NC_(	J <sub>R</sub> U
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Responsible	e Person's	E-mai	I	НАССР	Menu Typ	e (See addi	tional page)
Certified F	3 11 31			Other (list)	100	$\bigcirc$	$\bigcirc$
<reda< td=""><td></td><td>er</td><td></td><td></td><td></td><td></td><td><u>/4050</u></td></reda<>		er					<u>/4050</u>
		RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"	ı		
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
			Follow up from 11-2	20-2018.			
			All violations from the previous insp		cted.		
Received by			rinted):	Inspected by (name and title p < redacted>	rinted):		
Received by				Inspected by (signature):			
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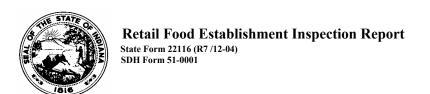
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Establishm		~ <i>(</i>	inomos	Telephone Number	Date of Ins (mm/dd/yr		ID#
			Dinemas mber and street, city, state, zip code)	812-479-9732	11/28	/2018	11316
			enter Dr., EVANSVILLE, IN, 47715	<pre>(<redacted></redacted></pre>			
Owner	-			Purpose:	Follow-uj		se Date
North	Park	Cir	nemas Inc	<b>✓</b> Routine	No	12/	08/2018
Owner's Ac				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_	$0_{R}$
Responsible			:1	Temporary	Monu Tur	o (Saa addi	tional page)
Kesponsibil	c i ci son s	L-ma		<b>П</b> НАССР	wichu Typ	c (see aaai	nonui puge)
Certified F	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}$	$\odot_3$ C	$_{4}O_{5}O$
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• CRITICAL	ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by	(name and	l title p		Inspected by (name and title p	rinted):		
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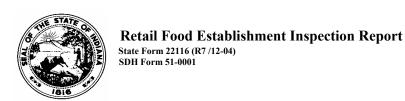
Establishm Raffe				Telephone Number (812-471-0024	Date of In (mm/dd/yr		ID# 11273	
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	( )Owner .	11/20	0/2010		
Owner Raffer	tys In	c/[	Dan Davis	Purpose:  Routine	Follow-u Yes		e Date 08/2018	
Owner's Ac				Follow-up	Summary	of Violation	ns:	
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>1</td><td>1</td><td><math>\cap</math></td></reda<>				Complaint	1	1	$\cap$	
Person in C	_			Pre-Operational	C_ <b></b>	_ NC	$R_{\rm R}$	
Responsible			:1	Temporary	Manu Tv	pe (See addi	tional naga)	
Kesponsible	e i cison s	L-IIIa	11	НАССР	wichu i y	pc (see addi	ionai page)	
Certified Fo		er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3$	$0_4$ $0_5$	
		E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	I IARKED "C"				
• VIOLATIO	N(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	
431	NC		Soiled areas around cooking and dish v	wash areas need cl	eaned.	12/0	)5/2018	
294	С		Sanitizer concentration for wipin			Corrected		
187	С		Cold foods not being held at the r	equired temperatu	re.	Co	Corrected	
295	С		Ice scoop improperly stored	in soiled area.		Col	rrected	
345	С		Hand washing sink at dish wash and bar area being used	for purpose other than hand	washing.	Co	rrected	
Received by	*	_ *		Inspected by (name and title p	rinted):			
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Received by	(signature)	):		Inspected by (signature):				
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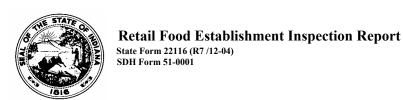
Establishm		2.4	16		elephone Number	Date of Ins (mm/dd/yr		ID#
Circle				3	312-479-6491	11/28	3/2018	11245
			mber and street, city, state, zip code) ICh Ave., Evansville, IN, 47714	(<	<redacted></redacted>	,	, = 0 . 0	
Owner	_			Pu	rpose:	Follow-u		e Date
Mac's	Conv	/er	nience Store LLC	~	Routine	No	12/	08/2018
Owner's Ac					Follow-up	Summary	of Violation	18:
<reda< td=""><td></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	$\mathbf{c}^{-1}$	NC(	, ROΙ
<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	$\vdash$	НАССР	Menu Tyj	oe (See addi	tional page)
				<b>—</b>	Other (list)			$\setminus \cap \cap$
Certified Fo		er		<u> </u>	Differ (list)	1 <u></u> 2	<u>3</u>	<u>/405</u>
• CRITICAL	. ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"			
• VIOLATIO	ON(S) REPE	ATEL	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
295	С		Soda machine drink nozzles in need of cleaning. Manage	∍mer	nt increasing cleaning fre	equency.	Co	rrected
					pected by (name and title pr	rinted):		
					redacted>			
Received by	(signature)	):		Insp	pected by (signature):			
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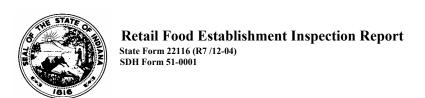
Establishmo McGa		lido	dle School 6-8	Telephone Number (812-469-5088)	Date of Ins (mm/dd/yr	·)	1D# 11209
Establishm	ent Addres	s (nu	mber and street, city, state, zip code) Ve, EVANSVILLE, IN, 47714	' <redacted></redacted>	11/26	/2018	
Owner			nderburgh School Corp.	Purpose:	Follow-uj		se Date 06/2018
Owner's Ac	ddress			Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational		NC (	$0_{\rm R}$
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Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
Certified Fo		er		Other (list)	1 2		<u>/4</u> <u>5</u> <u> </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 N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by	*		orinted):	Inspected by (name and title properties)	rinted):		
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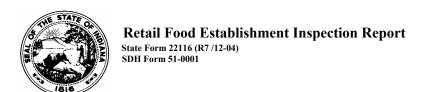
				I			
Circle		<b>a</b> 1		Telephone Number	Date of Ins (mm/dd/yr		то# 11106
				812-461-2373	11/29	/2018	11106
			mber and street, city, state, zip code) e, Evansville, IN, 47710	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-uj		se Date
Mac's	Conv	ver	nience Store LLC	<b>✓</b> Routine	No	12/	09/2018
Owner's Ac				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	$\mathbf{c}^{-1}$	NC 4	$\frac{2}{R}$
<reda< td=""><td>cted&gt;</td><td>1</td><td></td><td>Temporary</td><td>·</td><td>. 1,0</td><td></td></reda<>	cted>	1		Temporary	·	. 1,0	
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)
Certified Fo		er		Other (list)	1 <u></u> 2	$\bigcirc$ 3 $\bigcirc$	<u>/405</u>
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• CRITICAL	ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATEL	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		Potentially hazardous food held above 41 degre	ees. Product moved to	walk in.	Co	rrected
218	NC		Cooler under the roller grill is not	functioning proper	ly.	11/29/2018	
297	NC	R	Drink nozzles soi	iled.		11/29/2018	
Received by	(name and	title	printed):	Inspected by (name and title p	rinted):		
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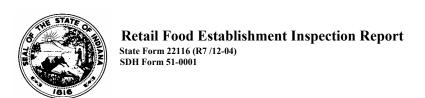
			<u> </u>					
Establishm		٠		Telephone Number	Date of Ins (mm/dd/yr		ID#	
Lic's				812-477-3131	11/29	/2018	11084	
			mber and street, city, state, zip code)	<pre><redacted></redacted></pre>	11720	,20.0		
Owner	LINCO	/	Ave., Evansville, IN, 47714		E II	In I	<u> </u>	
Don S	mith			Purpose:  Routine	Follow-uj		se Date //09/2018	
Owner's A				<del>- </del>				
<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	$_{\rm C}$ 1	NC_(	) , 1	
<reda< td=""><td></td><td>ı</td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td><u> </u></td></reda<>		ı		Pre-Operational	C	NC_	<u> </u>	
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	itional page)	
				HACCP				
Certified F		er		Other (list)	1 2		<u> 1405</u> 0	
<redag< td=""><td>ctea&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td></redag<>	ctea>							
• CRITICAI	ITEMS AI	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"				
• VIOLATIO	ON(S) REPE	ATEI	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
303	С	R	Three compartment sink not set up with third	basin filled with sanitize	r water.	Co	rrected	
Received by	`		. ,	Inspected by (name and title p < redacted>	rinted):			
Received by	(signature	):		Inspected by (signature):				
cc:			cc:		cc:			



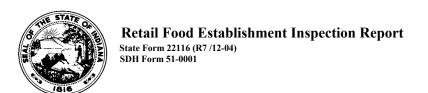
Establishmo Fazol	i´s #				lephone Number 312-474-9167	Date of Inc (mm/dd/yr		то# 10964
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	(<	redacted>	11/20	<i>,,</i> 2010	
		JOI	INT VENTURE, LTD		rpose: Routine	Follow-u No		Date 06/2018
Owner's Ac					Follow-up		of Violation	_
Person in C					Complaint	2	NC	. 2
<reda< td=""><td>_</td><td></td><td></td><td>=</td><td>Pre-Operational</td><td>C</td><td>_ NC</td><td> R<u></u>_</td></reda<>	_			=	Pre-Operational	C	_ NC	R <u></u> _
Responsible	Person's	E-ma	il	=	Temporary HACCP	Menu Tyj	pe <i>(See addii</i>	ional page)
G 101 15					Other (list)		$\bigcirc_3$	$\bigcirc$
Certified Fo		er				1 <u>0</u> 2	<u> </u>	<u>′4∪5</u>
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	ED "C"			
• VIOLATIO	N(S) REPE	ATEL	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	ММА	RY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
187	С		Pasta not maintained at a temperature of 41° F			ok line.	11/2	26/2018
294	С	R	Sanitizer solution for wiping of	clot	ths too weak.		Corrected 11/26/2018	
297	NC	R	Left side soda dispenser in	Left side soda dispenser in lobby soiled.				
Received by	*			-	redacted>	rinted):		
Received by	(signature	):		Insp	ected by (signature):			
cc:			cc:			cc:		



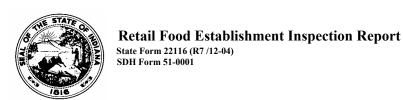
Establishm		FΧ	ICAN RESTAURANT	Telephone Number (812-471-1400	Date of Ins (mm/dd/yr	·)	то# 10942	
			mber and street, city, state, zip code)	( ) Owner	11/30	/2018	10342	
			River Rd, Evansville, IN, 47715	Owner				
Owner				Purpose:	Follow-u			
Gusta		oto		<b>✓</b> Routine	Yes	12/	10/2018	
Owner's Ad				Follow-up	Summary	of Violation	as:	
Person in C		1		Complaint	1		$\frac{2}{R}$	
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td> R</td></reda<>				Pre-Operational	C	NC_	R	
Responsible			il	Temporary	Menu Ty	oe (See addi	tional page)	
•				НАССР				
Certified Fo	ood Handl	er		Other (list)	1 2	$\bigcirc_3$	<u>)4</u> <u>0</u> 5 <u>0</u>	
• CRITICAL	LITEMS AF	RE 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	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
118	С	R	Establishment lacking certified food	safe handler certif	icate.	02/2	28/2019	
291	NC		Sanitizer test kit not available fo	or chemical testing		11/3	30/2018	
171	NC		Scoop for bulk container lackir	ng proper handle.		Corrected		
Received by	`		· ·	Inspected by (name and title p	rinted):			
Received by				Inspected by (signature):				
				, , ,				
cc:			cc:		cc:			



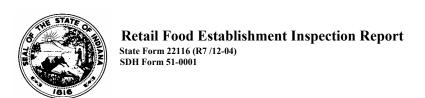
				_	1		-
Establishme		$G^{I}$	\ #452	Telephone Number	Date of Ins (mm/dd/yr		то# 10882
				812-475-6730	11/29	/2018	10002
2220 I	ent Addres E Moi	rga	n Ave., Evansville, IN, 47711	<pre><redacted></redacted></pre>			
Owner HOUC	CHEN	1 S	NORTH FOODS LLC	Purpose:	Follow-uj		se Date 09/2018
Owner's Ac				Follow-up		of Violation	
<reda< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td>_</td></reda<>							_
Person in C				Complaint	()	(	$0_{\rm R}$
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>c_<b>C</b>_</td><td>NC_</td><td>- R -</td></reda<>				Pre-Operational	c_ <b>C</b> _	NC_	- R -
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР		~ ~	
Certified Fo		er		Other (list)	1 2	$\bigcirc_3$	<u>)</u> 4 <u>U</u> 5 <u>U</u>
		RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			All violations from 11/8/20	)18 corrected.			
Received by	*		orinted):	Inspected by (name and title properties)	rinted):		
Received by				Inspected by (signature):			
cc:			сс:		cc:		



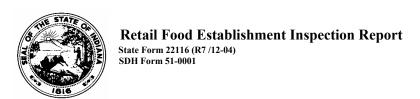
Establishment Name					ephone Number	Date of In (mm/dd/y		ID#
Applebee's Neighborhood Grill					12-471-0942	`	5/2018	10844
Establishment Address (number and street, city, state, zip code)					redacted>	11/20	0/2010	
5100 E Morgan Ave, Evansville, IN, 47715								
Owner	Cont	ral	110		pose:	Follow-u		se Date
Apple		ıaı,	LLC		Routine	No	12/	06/2018
Owner's Ad				Ш	Follow-up	Summary	of Violation	18:
Person in C					Complaint	$\cap$		$\frac{2}{R}$
<reda< td=""><td>0</td><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td>- R</td></reda<>	0				Pre-Operational	C	NC_	- R
Responsible					Гетрогагу	Menu Tv	pe <i>(See addi</i>	tional nage)
responsible	c i cison s				HACCP	inoid Type (see daditional page)		
Certified Fo	ood Handle	er			Other (list)	$10^{2}$		
<redac< td=""><td></td><td></td><td></td><td>-</td><td></td><td><u> </u></td><td><u> </u></td><td><u></u></td></redac<>				-		<u> </u>	<u> </u>	<u></u>
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKI	ED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	JARRATIVE	RELOW AS "R"
Section#	C/NC	R	Narrative	IVIIVIZAI	CI OF VIOLATIONS AN	DINTHE		
		R		200	ailad			orrected By
295	NC		Microwave on cook lin			Corrected		
430	NC	R	Tiles missing or broken in dish area and o	pen	studding at ice ma	nachine. 12/26/2018		
Received by (name and title printed): <redacted>  Inspected by (name and title printed):  <redacted></redacted></redacted>								
					ected by (signature):			
cc:			сс:			cc:		



Establishment Name Al`s Corner Pub  Establishment Address (number and street, city, state, zip code) 301 W Columbia St., Evansville, IN, 47710					(812-550-2409 ( <redacted></redacted>	Date of Inspo (mm/dd/yr)  11/29/2		10834	
Owner Perry				Purpose:	Follow-up NO		e Date 09/2018		
Owner's Ad					Follow-up	Summary of	_	_	
Person in C					Complaint	1.0	$_{\rm NC}$	) "()	
<reda< td=""><td>cted&gt;</td><td></td><td></td><td></td><td>Pre-Operational</td><td><u> </u></td><td>NC</td><td> R</td></reda<>	cted>				Pre-Operational	<u> </u>	NC	R	
Responsible	e Person's	E-ma	il		Temporary HACCP	Menu Type (See additional page)			
Certified Fo					Other (list)	1020304050			
<redag< td=""><td></td><td>ег</td><td></td><td></td><td></td><td>102</td><td><u></u></td><td><u> </u></td></redag<>		ег				102	<u></u>	<u> </u>	
• CRITICAL	ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST	AND NARRATIVE COLUMNS M	AARKED "C"				
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIO	ONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"	
Section#	C/NC	R		Narrative		1	Го Ве Со	orrected By	
				No noted violation	ons.				
					Inspected by (name and title printed): <redacted></redacted>				
Received by (signature):					Inspected by (signature):				
cc:				cc:		cc:			



Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#		
Starb	ucks	at	Doubletree	812-423-5002	11/28/		13926		
			mber and street, city, state, zip code)	<pre><redacted></redacted></pre>	1 1/20/	2010			
	amut	SI	, Evansville, IN, 47708		E	I n ı	D /		
Owner HCW	Evan	svi	lle Hotel LLC	Purpose:  Routine	Follow-up NO		Se Date 08/2018		
Owner's Ac				Follow-up	Summary of	of Violation	ns:		
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>2</td><td>(</td><td>) (</td></reda<>				Complaint	2	(	) (		
Person in C				Pre-Operational	$c_2$	NC_	$\mathcal{L}_{R}$		
<reda< td=""><td></td><td></td><td>9</td><td>Temporary</td><td></td><td></td><td></td></reda<>			9	Temporary					
Responsible	e Person's	L-ma	II.	НАССР	Menu Type (See additional page)				
Certified F	ood Handle	er		Other (list)	10,0,0,0,0				
<redag< td=""><td></td><td>-</td><td></td><td></td><td></td><td><u></u></td><td><u> </u></td></redag<>		-				<u></u>	<u> </u>		
• CRITICAL	ITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"					
• VIOLATIO	N(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 Co	orrected By		
415	С		Drain gnats present in	mop sink.	11/28/2018				
294	С		Sanitizing solution wea			Co	rrected		
			<u> </u>						
					+				
					+				
					+				
					+				
Received by	Received by (name and title printed):  Inspected by (name and title printed):								
<reda< td=""><td>acte</td><td> k</td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></reda<>	acte	 k		<redacted></redacted>					
Received by	(signature)	):		Inspected by (signature):					
cc:			cc:		cc:				



Establishm	o Pr	s (nu	o Chef  mber and street, city, state, zip code) River Rd., Evansville, IN, 47715	Telephone Number ( ) Establishment ( ) Owner	pection ) /2018	14001	
Owner				Purpose:	Follow-up Release Date Yes 12/06/20		
Owner's Ac				Routine Follow-up Complaint	Summary	of Violation	ns:
Person in C	Charge			Pre-Operational	$C_{C}$	NC_	$0_{R}$
Responsible	e Person's	E-ma	il	Temporary HACCP	Menu Typ	e (See addi	tional page)
Certified Fo	ood Handl	er		Other (list)	102	<u>3</u>	)4050
• CRITICAL	LITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			Approved for opera	ations.			
D : 11		141	· ( D	Y ( 11 ( 16)1	· D		
Received by	*			Inspected by (name and title posterior < redacted >	rinted):		
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		