

Establishm La Pr Establishm 819 S Owner Uriel S Owner's Ad <reda Person in C <reda Responsible</reda </reda 	eferie ent Addres Green Sarmi ddress cted> charge cted> e Person's	ent E-ma	Telephone Number (812-471-9057 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_	r) B/2019 P Releas 01/ of Violation NC	· ·	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
Section#	UNU	n				TUDEC	птестей Бу
			No noted violation	ons.			
			-				
Received by		-		Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm	Asiar ent Address 1st A vong L ddress cted> Charge cted>	is (nui Ve _in	xpress mber and street, city, state, zip code) , Evansville, Indiana, 47713	Telephone Number (812-781-1998 (<redacted> Purpose:</redacted>	Follow-u NO Summary C_1	r) 2019 Releas 01/ of Violation NC	ID # 13158 e Date 14/2019 hs: R_1 tional page)	
Certified For		er		Other (list)	1 <u>U</u> 2	$1 \underline{\bigcirc} 2 \underline{\bigcirc} 3 \underline{\bigcirc} 4 \underline{\bigcirc} 5 \underline{\bigcirc}$		
• VIOLATIO	ON(S) REPE	ATED	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N			
Section#	C/NC	R	Narrative				orrected By	
173	C	R	Improper storage of raw n				rrected	
297	NC		Drink dispenser in need	of cleaning.		01/0	04/2019	
Received by	(name and	title r	printed):	Inspected by (name and title p	rinted).			
<reda< td=""><td></td><td>-</td><td>,</td><td><redacted></redacted></td><td>intea).</td><td></td><td></td></reda<>		-	,	<redacted></redacted>	intea).			
Received by	(signature)):		Inspected by (signature):				
cc:			cc:		cc:			



Establishm			Ma inco Desta seri	Telephone Number	Date of In (mm/dd/y	ID #	
			Mexican Restaurant	(812-459-3871		, /2019	12377
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	<pre>(<redacted></redacted></pre>	01/00		
OZI S Owner	Glee	ΠΓ		Purpose:	Follow-u	n Palaa	se Date
	M Mos	squ	Jeda-Lopez	Routine	No		13/2019
Owner's Ad		<u> </u>		Follow-up	Summary	of Violation	15:
<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			2_{R}
<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 de la constant de	НАССР	Menu Ty	pe (See addi	tional page)
Certified Fo	ubreH boo	ər		Other (list)	$1 \bigcirc 2$	$\bigcap_2 \bullet$	$)_{4} \bigcap_{5} \bigcap_{7}$
<redac< td=""><td></td><td>.1</td><td></td><td></td><td></td><td></td><td><u>/4030</u></td></redac<>		.1					<u>/4030</u>
• CRITICAL	LITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	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
173	С		Improper storage of raw m	neat in cooler.		Co	rrected
438	С		Chemical bottles not	labeled.		Co	rrected
218	NC		Walk in freezer in need	of repair. (11/2019
297	NC		Drink dispenser nozzles in n	eed of cleaning.	01/03/2019		
Received by			printed):	Inspected by (name and title p	rinted):		
<reda< td=""><td></td><td></td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></reda<>				<redacted></redacted>			
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



	z N S ent Addres Bnvl- Warg ddress cted> charge cted> e Person's	el E-ma	mber and street, city, state, zip code) HRd, Evansville, IN, 47725	Telephone Number (812-867-7783 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 2/2019 P Releas 01/ v of Violation _ NC_	$\frac{ID \#}{12173}$ $\frac{12}{2019}$ $\frac{12}{2019}$ $\frac{R}{0}$ $\frac{12}{2019}$ $\frac{12}{2019}$ $\frac{12}{2019}$ $\frac{12}{2019}$
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			-	orrected By
5001011#	CINC	Λ				TODEC	nicettu By
			No noted violation	ons.			
Received by				Inspected by (name and title p <redacted></redacted>	rinted):	1	
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



943 N Owner Jay To Owner's Au <reda Person in C <reda Responsibl</reda </reda 	n`s D ent Addres Gree ortoric ddress cted> Charge cted> e Person's	ss (nu en F Ce	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	Telephone Number (812-471-9905 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_1	p Releas 01/ of Violation NC_	
Certified F							<u>~+_</u> >_
• VIOLATIO	ON(S) REPE	ATED	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N		
Section#	C/NC	R	Narrative				orrected By
295	С	R	Can opener stored a soile	ed condition.		Co	rrected
Received by				Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature):		Inspected by (signature):			
cc:		_	cc:		cc:		



	/ Buff ent Addres Pearl Hua L ddress cted> Charge cted>	ss (nu Dr _iu	mber and street, city, state, zip code) Ste 3D, Evansville, IN, 47712	Telephone Number (812-437-5050 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-up Yes Summary	p Releas 01/ of Violation NC	
Certified Fo		er		Other (list)	102	<u>O</u> 3C)_45
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		ID IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
	Γ		Rubber based coving currentl	ly being installed.	_		
				<u>, </u>			
		-					
						_	
					_		
Received by	acteo	d>		Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm PIZZ/		T	#316695	Telephone Number (812-867-8540	Date of In: (mm/dd/yr		^{ID #} 11956
			mber and street, city, state, zip code) ew Harmony Rd, Evansville, IN, 47725	()Owner	01/02	/2019	
		0	F AMERICA LLC c/o DMA	Purpose:	Follow-u NO		se Date 12/2019
Owner's A				Follow-up	Summary	of Violation	15:
<reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td></td><td>ſ</td><td></td></reda<>		1		Complaint		ſ	
Person in C				Pre-Operational			J_{R}
<reda< td=""><td></td><td></td><td>n</td><td>Temporary</td><td></td><td></td><td></td></reda<>			n	Temporary			
Responsible	e Person's	E-ma	11	НАССР	Menu Tyj	be (See addi	tional page)
Certified F		er		Other (list)	$1\bigcirc 2$	O_3C	$)_4 \bigcirc_5 \bigcirc$
<redac< td=""><td>cted></td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>	cted>						
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
VIOLATIC	DN(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	(name and	title	printed):	Inspected by (name and title p	rinted):		
<red< td=""><td></td><td></td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></red<>				<redacted></redacted>			
Received by				Inspected by (signature):			
cc:			сс:		cc:		



	In Ga ent Addres Lincol Zhar ddress cted> Charge cted>	n /	mber and street, city, state, zip code) Ave, Evansville, IN, 47714	(8) (~ Pu	Iephone Number 12-471-8881 Credacted> Irpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u NO Summary C	r) B/2019 P Releas 01/ of Violation NC_	· ·
Certified For		er		L	Other (list)	1 <u>U</u> 2		<u>4050</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THF N	JARRATIVE	RELOW AS "R"
					In or Holanons An	≂n (iiiE ľ		
Section#	C/NC	R			<u> </u>		To Be Co	orrected By
			All violations from 12/18/20	118	s corrected.			
Received by	(name and	titla	nrinted):	Inco	bected by (name and title pr	cinted):		
<red< td=""><td></td><td></td><td></td><td><ľ</td><td>redacted></td><td>inica).</td><td></td><td></td></red<>				<ľ	redacted>	inica).		
Received by	(signature):		Insp	bected by (signature):			
cc:			cc:			cc:		



Establishm	ent Name			Telephone Number	Date of In	spection	ID #
		Car	minos	(812-868-8550	r)	11907	
			mber and street, city, state, zip code)		01/02	2/2019	
12100	N Hig	hwa	ay 41 Ste 9, Evansville, IN, 47725	(<redacted></redacted>			
Owner				Purpose:	Follow-u		se Date
Franci		1 L(omeli	✔ Routine	No	01/	12/2019
Owner's A				Follow-up	Summary	of Violatior	15:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>2</td><td></td><td>2_R1</td></reda<>				Complaint	2		2 _R 1
Person in C				Pre-Operational	с _	NC_	R
Responsible			1	Temporary	tional page)		
responsion	e i ersen s		-	НАССР			
Certified For		er		Other (list)	1 <u>0</u> 2		$)_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
• CRITICAI	L ITEMS AF	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIC	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!	MMARY OF VIOLATIONS" A	ND IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
191	С	R	No date marking on ready	v to eat foods.		01/0)2/2019
440	С		No label for sprayer containing to		ing.	Co	rrected
217	NC		Scoops with handles need	•	0	01/0	04/2019
416	NC		Outside storage shed needs clean	•	ects.	01/0	02/2019
				0			
Received by		-		Inspected by (name and title p	orinted):		
<preda< pre=""></preda<>	acteo	 b		<redacted></redacted>			
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



	roxel ddress cted>	Ln	mber and street, city, state, zip code) Suite A, Evansville, IN, 47715	Telephone Number (812-475-9488 (<redacted> Purpose: Routine Follow-up Complaint</redacted>	No 01/ Summary of Violatio		
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>с<u></u></td><td></td><td>R_{R}</td></reda<>				Pre-Operational	с <u></u>		R_{R}
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
Certified Fo		er		HACCP Other (list)	1 <u>0</u> 2	<u></u> 3	$)_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
• CRITICAL	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATEI) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
		1					
Received by	acte	d>		Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	v (signature):		Inspected by (signature):			
cc:			cc:		cc:		



Establishment Address (number and street, city, state, zip code) 01/04/2019 1121 Washington Square Mall, Evansville, IN, 47715 Owner Purpose: Follow-up	$\frac{4/2019}{R}$ R D R D
Establishment Address (number and street, etty, state, zip code) (<redacted> 1121 Washington Square Mall, Evansville, IN, 47715 (<redacted> Owner Purpose: No Kerry Chesser Jr Release Dr. Owner's Address Follow-up <redacted> Follow-up Certified Food Handler Pre-Operational <redacted> Other (list) • 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 BEI Section# C/NC R</redacted></redacted></redacted></redacted>	$\frac{4/2019}{R}$ R D R D
Owner Purpose: Follow-up Release Day Owner's Address Image: Pollow-up Image: Pollo	$\frac{4/2019}{R}$ R D R D
Kerry Chesser Jr Routine Owner's Address Follow-up <redacted> Complaint Person in Charge Pre-Operational <redacted> Pre-Operational Responsible Person's E-mail HACCP Other (list) Image (See additional <redacted> Other (list) <redacted> Image (See additional Image (See additional</redacted></redacted></redacted></redacted></redacted></redacted></redacted></redacted>	$\frac{4/2019}{R}$ R D R D
<redacted> </redacted>	nal page)
Person in Charge	nal page)
<iecacted> Temporary Responsible Person's E-mail HACCP HACCP Other (list) Certified Food Handler Other (list) <redacted> 1020304 • 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 BEI Section# C/NC R Narrative To Be Correction</redacted></iecacted>	nal page)
Responsible Person's E-mail Imporary HACCP HACCP Certified Food Handler Other (list) <redacted> Imporary • 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 BEI Section# C/NC R Narrative To Be Corre</redacted>	<u>5</u> Llow AS "R"
Certified Food Handler Other (list) 1020304 <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 BEI Section# C/NC R Narrative To Be Corre</redacted>	<u>5</u> Llow AS "R"
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" • 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 BEI Section# C/NC R Narrative To Be Corre	
• 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 BEI Section# C/NC R To Be Corre	
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BEI Section# C/NC R To Be Corre	
Section# C/NC R Narrative To Be Corre	
	citeu By
Image: Index volations. Image: Index volations. Image: Imag	
Image: Section of the section of th	
Image: Section of the section of th	
Image: Sector of the sector	
Image: Sector of the sector	
Image: Sector	
Image: Sector	
Image:	
Image:	
Received by (name and title printed): <redacted> Inspected by (name and title printed): <redacted></redacted></redacted>	
<ieuacieu> Received by (signature): Inspected by (signature):</ieuacieu>	
inspected by (signature):	
cc: cc: cc:	



101 N Owner David Owner's Ad <reda Person in C <reda Responsible</reda </reda 	r Mur ent Address W 1st Siew ddress cted> Charge cted> e Person's	E-ma	mber and street, city, state, zip code) Ste 100, Evansville, IN, 47708	Telephone Number (812-499-0160 (<redacted> Purpose: V Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 01/ of Violation NC	ID # 11816 The Date 12/2019 The Date 12/2019
<redac< 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
324	NC	R	Hand sink in need o	fronair)8/2019
524						01/0	10/2019
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm Dolla Establishm 800 S Owner Dollar Owner's Ad <reda Person in C <reda Responsible</reda </reda 	r Tree ent Addres Gree Tree ddress cted> charge cted> e Person's	ss (nur n F E-ma	nber and street, city, state, zip River Rd, Evans	sville, IN, 47715	Telephone Number (812-476-3426 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 2019 P Releas 01/ of Violation NC_	
<redac< td=""><td>cted></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>	cted>							
	ON(S) REPE			AND NARRATIVE COLUMNS M		D IN THE N		
Section#	C/NC	R		Narrative			To Be Co	orrected By
				No noted violation	ons.			
Received by		-	printed):	Inspected by (name and title pr <redacted></redacted>	rinted):			
Received by	(signature)):			Inspected by (signature):			
cc: cc:						cc:		



Establishm				Telephone Number Date of Inspection ID # (mm/dd/yr) (mm/dd/yr)				
Salva	ation	Arr	my Community Center	(812-425-1375	` ·	, /2019	11481	
			mber and street, city, state, zip code)	<pre>(<redacted>)</redacted></pre>	01/04	/2019		
	N Ful	ton	Ave, Evansville, IN, 47710	<reuacieu></reuacieu>				
Owner		NI A		Purpose:	Follow-u		se Date	
SALV		IN F	ARIVI Y	V Routine	No	01/	14/2019	
Owner's A				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		(
<reda< td=""><td>0</td><td></td><td></td><td>Pre-Operational</td><td>с<u></u></td><td>(</td><td></td></reda<>	0			Pre-Operational	с <u></u>	(
Responsibl			il	Temporary	Menu Tvi	ne <i>(See addi</i>	tional page)	
				НАССР		~ ~		
Certified F	ood Handl	er		Other (list)	$1\bigcirc 2$	()₃●	$)_4 \bigcirc_5 \bigcirc$	
<reda< td=""><td>cted></td><td></td><td></td><td></td><td></td><td></td><td></td></reda<>	cted>							
• CRITICAI	L ITEMS AI	RE IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"				
• VIOLATIO	ON(S) REPF	EATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI	UMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				orrected By	
Section	Citte	K	No noted violation	ons		10 20 00	nitette Dy	
				0113.				
Received by	y (name and	d title r	printed):	Inspected by (name and title p	rinted):			
<red< td=""><td>,</td><td>- 1</td><td></td><td><redacted></redacted></td><td>~</td><td></td><td></td></red<>	,	- 1		<redacted></redacted>	~			
Received by	y (signature	;):		Inspected by (signature):				
cc:			cc:	1	cc:			
					<u> </u>			



5050 Owner EVANS Owner's Ad <reda Person in C <reda Responsible Certified F <redac< th=""><th>w Pa ent Addres Lincol /ILLE R ddress Cted> Cted> cted> cted> cted> cted> cted> cted></th><th>ss (nu IN / ETII E-ma</th><th></th><th>Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u NO Summary C_1</th><th>r) 1/2019 P Releas 01/ of Violation NC_</th><th></th></redac<></reda </reda 	w Pa ent Addres Lincol /ILLE R ddress Cted> Cted> cted> cted> cted> cted> cted> cted>	ss (nu IN / ETII E-ma		Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C_1	r) 1/2019 P Releas 01/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
		K		the set the set the set of second	. 1. 1		· ·
345 C Hand sink used for other purposes other than hand wa				sning.	01/0	04/2019	
Received by			· /	Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm				Telephone Number	Date of Ins (mm/dd/yr		ID #	
Papa				(812-473-5200	01/02	2/2019	11248	
			mber and street, city, state, zip code) a St, Evansville, IN, 47715	<pre>(<redacted></redacted></pre>				
^{Owner} KGK E	Enterr	oris	ses Inc	Purpose:	Follow-uj NO		^{e Date} 12/2019	
Owner's Ad				Follow-up	Summary	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		NC	<u>R</u>	
<reda< td=""><td>cted></td><td></td><td></td><td>Temporary</td><td>C</td><td>. nc</td><td> K</td></reda<>	cted>			Temporary	C	. nc	K	
Responsible	Person's	E-ma	il		Menu Typ	pe (See addit	ional page)	
Certified Fo		r		Other (list)	1 <u>U</u> 2		$\underline{0}_{4} \underline{0}_{5} \underline{0}$	
• CRITICAL	. ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
295	С	R	Can opener stored a soile	ed condition.		01/0)2/2019	
430	NC	R	Various components and attachments wit	hin facility in need of	repair.	01/30/2019		
						1		
	ļ							
						I		
Received by		-		Inspected by (name and title pr <redacted></redacted>	inted):			
Received by	(signature)):		Inspected by (signature):				
cc:			cc:		cc:			



Establishm				Telephone Number Date of Inspection ID # (mm/dd/yr) (mm/dd/yr)				
Merry	/-G0-	R	bund	(812-423-6388	· ·	。 8/2019	11212	
			mber and street, city, state, zip code)	<pre>(<redacted>)</redacted></pre>	01/03	0/2019		
	N ⊦ar	es	Ave., Evansville, IN, 47711					
^{Owner} ERIC	RAE	BE	R	Purpose:	Follow-u NO		se Date 13/2019	
Owner's A				Follow-up	Summary	of Violation	ns:	
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td></td><td></td></reda<>				Complaint				
Person in C				Pre-Operational			$\mathbf{D}_{\mathbf{R}}$	
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary				
Responsible	e Person's	E-ma	il	НАССР	Menu Tyj	be (See addi	tional page)	
	1 11 11			Other (list)	\Box	\bigcirc	$\mathcal{O}_{\mathcal{O}}$	
Certified For		er			$1 \underline{\bigcirc} 2$	$\underline{\bigcirc}_{3\underline{\bigcirc}}$	<u>/4050</u>	
1								
CRITICAL	L ITEMS AR	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
VIOLATIC	DN(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 p <redacted></redacted>	rinted):			
Received by	(signature)):		Inspected by (signature):				
cc:			cc:	cc:				
			<i>c.</i>		00.			



Establishm 101 N Owner	Phar ent Addres Burk (-SUF ddress Cted> Cted> cted> cted> a Person's	ss (nu ha PEI	acy #4482 ^{mber and street, city, state, zip code)} rdt Rd, Evansville, IN, 47715 RX LLC	Telephone Number (812-471-8207 (<redacted> Purpose: Purpose: Purpose: Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u Summary C	r) $\frac{1}{2019}$ P Releas 01/ r of Violation _ NC pe (See addi	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		ND IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
Section	ente	n	No noted violatio	200		10 20 00	Jii Cetted Dy
				JII5.			
Received by				Inspected by (name and title p <redacted></redacted>	orinted):		
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



1301 Owner Carrol Owner's Ad <reda Person in C <reda Responsible</reda </reda 	er Kir ent Addres Cover s, LL ddress cted> Charge cted> e Person's	E-ma	mber and street, city, state, zip code) Ve, EVANSVILLE, IN, 47714	Telephone Number ⁽⁸¹²⁻⁴⁷⁹⁻⁵⁹⁶⁸⁾ ⁽ <redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 01/ of Violation NC	ID # 11117 ie Date 13/2019 is: \mathbf{R} tional page) \mathbf{A}
<redac< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>							
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
431	NC	R	Floors in the walk in and free	ezer are soiled)4/2019
						01/0	/4/2010
Received by	acteo	d>		Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



	er Kir ent Addres First A s, LL ddress cted> cted> cted> cted> a Person's	s (nu AVE C	mber and street, city, state, zip code) e, Evansville, IN, 47710	(8) (< Pu	lephone Number 12-426-0303 Cedacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u Summary C	r) 2/2019 p Releas 01/) _R _0
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"			
• VIOLATIC	ON(S) REPE	ATEE	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
			No noted violation	ons				
Received by		-		-	ected by (name and title pr edacted>	rinted):		
Received by	(signature):		Insp	ected by (signature):			
cc:			cc:			cc:		



Establishm 1 N Bu Owner	ns Ro ent Addres urkha NS R ddress cted> cted> cted>	rdt COA	dhouse #316 ^{mber and street, city, state, zip code)} Rd, Evansville, IN, 47715 ADHOUSE INC	Telephone Number (812-471-8403 (<redacted> Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: HACCP</redacted>	Follow-u Yes Summary c_2	p Releas 01/ of Violation NC	ID # 11092 are Date 14/2019 ns: B R tional page)	
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u>O</u> 3C		
• VIOLATIC	ON(S) REPE	ATED	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N			
Section#	C/NC	R	Narrative	hararaa			orrected By	
415	C		Fruit flies present in					
345	C		Hand sink in back kitchen area u					
430	NC	R	Tile and coving in walk-in cooler in r	· · ·	acing.		25/2019	
431	NC	R	Walls in dish area				1/2019	
410	NC		Lacking light shielding in dis	h washing area.		01/0	07/2019	
Received by	·	-	printed):	Inspected by (name and title printed): <redacted></redacted>				
Received by	(signature)):		Inspected by (signature):				
cc:			cc:		cc:			



Establishm	N T			Telephone Number Date of Inspection ID #					
		Pi	zza #2574	⁽ 812-423-5511	(mm/dd/y	r)	10922		
			mber and street, city, state, zip code)		01/02	2/2019	10022		
			e, Evansville, IN, 47710	() Owner					
Owner		177		Purpose:	Follow-u		se Date		
		IZZ	ZA, INC	✔ Routine	No	01/	12/2019		
Owner's A				Follow-up	Summary	of Violation	ns:		
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td>(</td><td></td></reda<>				Complaint		(
Person in C				Pre-Operational		NC_	$\mathbf{D}_{\mathbf{R}}$		
1				Temporary	N T	(C 11:			
Responsible	e Person's	E-ma	11	НАССР	Menu Ty	pe (See adai	tional page)		
Certified F	ood Hondl	or		Other (list)	$ _1 \bigcirc 2$	\bigcap_{2}	$)_{1} \bigcirc _{5} \bigcirc$		
<redac< td=""><td></td><td>er</td><td></td><td></td><td></td><td></td><td><u>/4030</u></td></redac<>		er					<u>/4030</u>		
1		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"					
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		ID IN THE N	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative				orrected By		
Section	ente		No noted violatio	าทร		102000	<u> </u>		
				5115.					
		ļ				ļ			
Received by	(name and	l title j	printed):	Inspected by (name and title p	rinted):	<u></u>			
<reda< td=""><td>acteo</td><td> b</td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></reda<>	acteo	 b		<redacted></redacted>					
Received by	(signature):		Inspected by (signature):					
cc:			сс:	cc:					



Establishm 1127 Owner	ican ent Addres Chest can L ddress cted> Charge cted>	ss (nu tnu .eg	egion Post #354 ^{mber and street, city, state, zip code)} t St., EVANSVILLE, IN, 47713 ion # 354		Pephone Number 12-423-0962 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u NO Summary C	p Releas 01/ of Violation NC_	
Certified Fo		er			Other (list)	102	<u>O</u> 3)_45
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THF N	ARRATIVE	RFI OW AS "R"
Section#	C/NC	R	Narrative		IN OF VIOLATIONS AN	DINTINE		orrected By
Section#	C/IIC	K	No noted violatio				TO BE CO	frected by
				5115				
Received by			· /		redacted>	rinted):		
Received by	(signature):		Insp	bected by (signature):			
cc:			cc:			cc:		



3501 F Owner Owner's Ad Person in C Responsible Certified Fo <redac< th=""><th>ech C ent Addres First A Idress harge Person's Pood Handle Sted></th><th>s (nun AVE E-mai</th><th>nber and street, city, state, zi e., Evansville, II</th><th>N, 47710</th><th></th><th>(8) (Pui</th><th>ephone Number 12-492-0574) Owner rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u NO Summary C</th><th>r) 2/2019 p Releas</th><th>12/2019 IS: R</th></redac<>	ech C ent Addres First A Idress harge Person's Pood Handle Sted>	s (nun AVE E-mai	nber and street, city, state, zi e., Evansville, II	N, 47710		(8) (Pui	ephone Number 12-492-0574) Owner rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r) 2/2019 p Releas	12/2019 IS: R
			NTIFIED IN THE CHECKLIST FROM PREVIOUS INSPECTIO					D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrat	ive				To Be Co	orrected By
				No noted vi	iolatio	ons				•
Received by	(name and	title r	printed):			Inspe	ected by (name and title pr	rinted):		
<reda< td=""><td></td><td>-</td><td>,</td><td></td><td></td><td>-</td><td>edacted></td><td>,</td><td></td><td></td></reda<>		-	,			-	edacted>	,		
Received by	(signature)	1				Inspe	ected by (signature):			
cc:				cc:				cc:		



628 E Owner MHD Owner's Ad <reda Person in C <reda Responsible Certified F <redac< th=""><th>s Etc ent Addres Diam Holdin ddress cted> cted> cted> e Person's</th><th>ss (nu IOP NGS E-ma</th><th></th><th>(8) (< Put ()</th><th>ephone Number 12-909-2945 redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th colspan="2">Date of Inspection (mm/dd/yr) 01/03/2019 Follow-up NO Release 01/7 Summary of Violation C C Menu Type (See additta $1 \bigcirc 2 \bigcirc 3 \bigcirc 2$</th><th>13/2019 </th></redac<></reda </reda 	s Etc ent Addres Diam Holdin ddress cted> cted> cted> e Person's	ss (nu IOP NGS E-ma		(8) (< Put ()	ephone Number 12-909-2945 redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Date of Inspection (mm/dd/yr) 01/03/2019 Follow-up NO Release 01/7 Summary of Violation C C Menu Type (See additta $1 \bigcirc 2 \bigcirc 3 \bigcirc 2$		13/2019 		
	 CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R" 									
Section#	C/NC	R	Narrative					orrected By		
Section#	CITC	Λ		000			TODUC	Jitella By		
			No noted violation	ons						
				Inspected by (name and title printed): <redacted></redacted>						
					Inspected by (signature):					
cc:			cc:			cc:				



Establishm	ort B ent Addres lain S a Tuc ddress cted> cted> cted> cted> cted> ood Handle	dela E-ma		Telephone Number ⁽⁸¹²⁻⁷⁶⁰⁻⁷¹⁶⁷⁾ ⁽ <redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) —</redacted>	Follow-u NO Summary C_1	p Releas 01/ of Violation NC			
• CRITICAI	• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"								
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N				
Section#	C/NC	R	Narrative				prrected By rrected		
187	С		Ready to eat foods not mainta	Ready to eat foods not maintained at 41f or less.					
				Inspected by (name and title printed): <redacted></redacted>					
Received by	(signature)):		Inspected by (signature):					
cc:			cc:	cc:					



Establishment Name GaylaCake Establishment Address (number and street, city, state, zip code) 320 N.Main, Evansville, IN, 47711 Owner Owner's Address Person in Charge Responsible Person's E-mail Certified Food Handler					Telephone Number (812-454-9791 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Mother (list) Final</redacted>	Follow-u NO Summary C	p Releas 01/ of Violation	14/2019 	
 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	Ν	Narrative			To Be Co	orrected By	
			Approved	for oper	ations			v	
			, (pp)0000						
			Finish installing rubber based coved molding.						
				Inspected by (name and title printed): <redacted></redacted>					
Received by	(signature)):			Inspected by (signature):				
cc:			cc:		cc:				