

| Establishme 800 N. Owner Gale H Owner's Ac <redac Person in C <redac Responsible Certified Fo <redac< th=""><th>s Spe ent Addres Greer Harpe Idress Cted> harge Cted> Person's Person's</th><th>s (nun 1 Ri r E-mai</th><th>alty Popcorn mber and street, city, state, zip code) ver Rd., Evansville, Indiana, 47715 il</th><th>Telephone Number (812-454-5880) (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted></th><th>Follow-u NO Summary C Menu Tyj</th><th>r) 8/2019 p Releas</th><th>18/2019 IS: R_0 tional page)</th></redac<></redac </redac | s Spe ent Addres Greer Harpe Idress Cted> harge Cted> Person's Person's | s (nun 1 Ri r E-mai | alty Popcorn mber and street, city, state, zip code) ver Rd., Evansville, Indiana, 47715 il | Telephone Number (812-454-5880) (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted> | Follow-u NO Summary C Menu Tyj | r) 8/2019 p Releas | 18/2019 IS: R_0 tional page) |
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| • VIOLATIO | N(S) REPE | ATED | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | MMARY OF VIOLATIONS" AN | D IN THE N | ARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | To Be Co | orrected By |
| | | | No noted violation | ons. | | | |
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| Received by | | - | | Inspected by (name and title pr <redacted></redacted> | rinted): | | |
| Received by | (signature) |): | | Inspected by (signature): | | | |
| cc: | | | сс: | | cc: | | |



| Establishme Milk a Establishme | and S | | Jar nber and street, city, state, zip code) | Telephone Number (812-202-0136 | Date of Ins (mm/dd/yr 05/10 | | њ# 13185 |
|---|-------------|-------|--|--|-----------------------------------|--------------|--------------------|
| | | | ranklin St, Evansville, Indiana, 47712 | <pre>'<redacted></redacted></pre> | | | |
| ^{Owner} Alisha | Didia | a | | Purpose: | Follow-u NO | | se Date 20/2019 |
| Owner's Ad | | | | Follow-up | Summary | of Violation | 15: |
| <reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>\cap</td><td>(</td><td>$_{R} 0$</td></reda<> | | | | Complaint | \cap | (| $ _{R} 0 $ |
| <reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>с_С_</td><td>NC_</td><td></td></reda<> | | | | Pre-Operational | с_ С _ | NC_ | |
| Responsible | | | 1 | Temporary | Menu Typ | be (See addi | tional page) |
| | | | | HACCP | \cap | | |
| Certified Fo | | er | | Other (list) | 1 <u>U</u> 2 | | 14050 |
| • CRITICAL | ITEMS AR | E IDE | NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | IARKED "C" | | | |
| • CRITICAL TIEMS ARE DENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI | | | | MMARY OF VIOLATIONS" AN | D IN THE N | ARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | To Be Co | orrected By |
| | | | No noted violation | ons. | | | |
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| Received by | | | | Inspected by (name and title pr redacted > | inted): | | |
| Received by | (signature) |): | | Inspected by (signature): | | | |
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| Establishme 1021 I Owner Harris Owner's Ac <redac Person in C <redac Responsible Certified Fo <redac< th=""><th>/'s - l ent Addres N. Bu CW I dress cted> harge cted> Person's ood Handle cted></th><th>s (nun rkh Prc E-mai</th><th></th><th>Telephone Number (812-602-5515 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>Follow-u NO Summary C</th><th>r) 9/2019 p Releas</th><th>19/2019 </th></redac<></redac </redac | /'s - l ent Addres N. Bu CW I dress cted> harge cted> Person's ood Handle cted> | s (nun rkh Prc E-mai | | Telephone Number (812-602-5515 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted> | Follow-u NO Summary C | r) 9/2019 p Releas | 19/2019 |
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| | | | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS 1 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 |
| Section | 0,110 | | | beenved | | 102000 | III celea Dy |
| | | | No discrepancies o | bserved | | | |
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| Establishme 2033 V Owner | Alin S ent Addres V Frai Mich Marge Cted> harge Cted> Person's | s (nui nkli nae | et Pizza Factory mber and street, city, state, zip code) in St, Evansville, Indiana, 47712 el Wathen | Telephone Number (765-749-5969 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted> | Follow-u NO Summary C | r))/2019 p Releas | 20/2019 |
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| | | | 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 | | | To Re Co | orrected By |
| 500011# | Unit | IV. | | | | TODECU | Jitellu Dy |
| | | | No noted violation | ons. | | | |
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| 1354 I Owner Larry Owner's Ac <redae Person in C <redae Responsible Certified Fe <redae< th=""><th>Asa ent Addres Divi Polloc Idress cted> cted> cted> cted> cted> cted> cted> cted> cted> cted> cted></th><th>s (nun SIO CK, E-mai</th><th>nber and street, city, state, zip code) on ST, Evansville, IN, 47714 David Y.</th><th></th><th>Follow-u NO Summary C Menu Tyj 12</th><th>p Releas $05/$ of Violation NC $(See \ addin 0)$</th><th>$\frac{20/2019}{R}$</th></redae<></redae </redae | Asa ent Addres Divi Polloc Idress cted> cted> cted> cted> cted> cted> cted> cted> cted> cted> cted> | s (nun SIO CK, E-mai | nber and street, city, state, zip code) on ST, Evansville, IN, 47714 David Y. | | Follow-u NO Summary C Menu Tyj 12 | p Releas $05/$ of Violation NC $(See \ addin 0)$ | $\frac{20/2019}{R}$ |
|---|--|-------------------------------|---|--|--|---|---------------------|
| | . , | | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | MMARY OF VIOLATIONS" AN | D IN THE N | | |
| Section# | C/NC | R | Narrative | | | | orrected By |
| 191 | С | | Some items lacking dat | te marking. | | Co | rrected |
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| Received by | | | printed): | Inspected by (name and title pr <redacted></redacted> | rinted): | | |
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| cc: | | | cc: | | cc: | | |



| 6226 Owner LOS BI Owner's Ad <redae Person in C <redae Responsible</redae </redae | ent Addres Water Nater ravos Idress cted> cted> e Person's cted> | es (nui for Inc E-ma | | Telephone Number (812-474-9078 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted> | Follow-u Yes Summary C | r) D/2019 P Releas 05/ of Violatior | 19/2019 |
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| | | | 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 |
| 116 | NC | | Daily temperature logs not maintained for | or review Started ne | | |)9/2019 |
| 110 | | | | | w iog. | 00/0 | 572013 |
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| Establishme | Ice of ent Address Bell R Taylo Idress Cted> harge Cted> Person's | s (nui d, Dr | Evansville 'Kiosk' mber and street, city, state, zip code) Chandler, IN, 47610 | Telephone Number (812-965-6620 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted> | Follow-u Summary C | r) p Releas 05/ of Violation NC pe (See addin | <u> </u> |
|-------------|---|--------------------|--|--|--------------------------|---|--------------|
| | | | NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | | D IN THE N | ARRATIVE | BELOW AS "R" |
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| Section# | C/NC | R | Narrative | | | 10 Be Co | orrected By |
| | | | No noted violation | ons. | | | |
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| Establishma 2126 Owner FST P Owner's Ac <redac Person in C <redac Responsible Certified Fo <redac< th=""><th>cted> cted> cted> cted> cted> cted> cted> cted> cted> cted> cted> cted></th><th>s (nu ank tie E-ma</th><th></th><th>Telephone Number (812-401-1313 (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted></th><th>Follow-u NO Summary C Menu Tyj</th><th>r) 5/2019 p Releas</th><th>16/2019 hs: R tional page)</th></redac<></redac </redac | cted> cted> cted> cted> cted> cted> cted> cted> cted> cted> cted> cted> | s (nu ank tie E-ma | | Telephone Number (812-401-1313 (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted> | Follow-u NO Summary C Menu Tyj | r) 5/2019 p Releas | 16/2019 hs: R tional page) |
|--|--|-----------------------------|--|---|--|--------------------------|--|
| • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN TH | | | | | | | |
| Section# | C/NC | R | Narrative | | | To Be Co | orrected By |
| 187 | С | | Potentially hazardous food hot held under 135 degrees. | Using time as a public healt | h control. | Co | rrected |
| 438 | С | | Spray bottles containing toxic ch | emicals not labele | d. | Co | rrected |
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| Received by | | | | Inspected by (name and title pr <redacted></redacted> | rinted): | | |
| Received by | (signature) |): | | Inspected by (signature): | | | |
| cc: | | | cc: | | cc: | | |



| 601 E Bi Owner SERV Owner's Ac <redae Person in C <redae Responsible Certified Fe</redae </redae | IY'S # ent Address nvl-New US, I Idress Cted> harge Cted> cted> harge cted> nod Handld | s (nun / Ha nc. E-mai | mber and street, city, state, zip code) armony Rd Ste 800, Evansville, IN, 47725 | Purpose: Routine Follow-up Complaint Pre-Operational HACCP Other (list) MARKED "C" | Follow-u NO Summary C | r) D/2019 P Releas 05/ of Violation NC Pe (See addin 03 | 19/2019 s: <u>R</u> 0 ional page) |
|--|---|--------------------------------|---|---|--------------------------------|--|--|
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| Section# | C/NC | R | Narrative | af ala a ' | | | orrected By |
| 232 | NC | | Microwave oven in need | — | | Co | rected |
| 136 | С | | Uncovered employee drink | ks on counter. | | Co | rected |
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| <red< td=""><td></td><td>- 1</td><td></td><td>Inspected by (name and title pr <redacted></redacted></td><td>inited):</td><td></td><td></td></red<> | | - 1 | | Inspected by (name and title pr <redacted></redacted> | inited): | | |
| Received by | (signature) |): | | Inspected by (signature): | | | |
| cc: | | | cc: | | cc: | | |



| | n`S ent Address WFra Engli Idress cted> harge cted> ood Handle | ink sh | | Telephone Number (812-401-1699 () Owner Purpose: ✓ Routine Follow-up Complaint Pre-Operational Gemporary HACCP Other (list) | Follow-u NO Summary C | .))/2019 p Releas | 20/2019 IS: R_1 |
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| • CRITICAL | ITEMS AR | E 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 N | ARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | | orrected By |
| 296 | С | | Can opener soil | ed. | | 05/1 | 0/2019 |
| 431 | NC | R | Walls and floors soiled und | er equipment. | | 05/1 | 0/2019 |
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| Received by | | | | Inspected by (name and title pr <redacted></redacted> | rinted): | | |
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| cc: | | | cc: | | cc: | | |



| Establishme 307 N Owner Charle Owner's Ac <redae Person in C <redae Responsible Certified Fe <redae< th=""><th>yme ent Addres First es M H ddress cted> harge cted> e Person's ood Handlo cted></th><th>s (nui Av Hol E-ma</th><th></th><th>Telephone Number (812-401-1030 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted></th><th>Follow-u No Summary C</th><th>r))/2019 p Releas</th><th>20/2019 s: R</th></redae<></redae </redae | yme ent Addres First es M H ddress cted> harge cted> e Person's ood Handlo cted> | s (nui Av Hol E-ma | | Telephone Number (812-401-1030 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted> | Follow-u No Summary C | r))/2019 p Releas | 20/2019 s: R |
|--|--|-----------------------------|--|---|--------------------------------|--------------------------|--------------------|
| | | | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | | D IN THE N | ARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | To Be Co | rrected By |
| Section | ente | IX. | | | | 10 20 00 | Treeteu By |
| | | | No noted violation | ons. | | | |
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| | macł | | 's Cafe | Telephone Number (812-488-2952 | Date of Ins (mm/dd/yr | | id# 11471 |
|---|----------------------|---------------|--|--|--------------------------|---------------|---|
| Establishme 1800 I | ent Addres _incol | s (nur n A | mber and street, city, state, zip code) Ave, Evansville, IN, 47722 | (<redacted></redacted> | 03/00 | 72019 | |
| Owner Charty | vells | | | Purpose: | Follow-u Yes | | ^{he Date} 16/2019 |
| Owner's Ac | | | | 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 | _ <u>_</u> <u>R</u> |
| Responsible | | | | Temporary | Menu Ty | pe (See addit | tional page) |
| | | | | НАССР | | \sim | |
| Certified Fo | | er | | Other (list) | 1 <u>02</u> | <u></u> 3 | $\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$ |
| • CRITICAL | ITEMS AR | E IDE | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | - AARKED "C" | | | |
| • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE | | | | | | | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | To Be Co | orrected By |
| 129 | С | | Employee not washing whether the second seco | hen required. | | Cor | rrected |
| 324 | С | | Hand sink in need of | f repair. | | 05/0 |)9/2019 |
| 347 | NC | | Hand sink lacking dispos | able towels. | | Cor | rrected |
| 294 | С | | Sanitizer for wiping clothe | es too weak. | | Сог | rrected |
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| Establishme 1800 L Owner Chartw Owner's Ad <redat Person in C <redat Responsible Certified Fo <redat< th=""><th>mach ent Addres _incol vells ddress cted> harge cted> Person's pood Handle</th><th>E-mai</th><th>r's Cafe mber and street, city, state, zip code) Ave, Evansville, IN, 47722</th><th>Telephone Number (812-488-2952 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redacted></th><th>Follow-u NO Summary C</th><th>p Releas 05/ 05/ of Violatior</th><th>19/2019 </th></redat<></redat </redat | mach ent Addres _incol vells ddress cted> harge cted> Person's pood Handle | E-mai | r's Cafe mber and street, city, state, zip code) Ave, Evansville, IN, 47722 | Telephone Number (812-488-2952 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redacted> | Follow-u NO Summary C | p Releas 05/ 05/ of Violatior | 19/2019 | |
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| • VIOLATIO | N(S) REPE | ATED | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUP | 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 05/06/20 | 019 corrected. | | | | |
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| Establishm | ent Name | | $\mathbf{v}^{\mathbf{T}}$ | Telephone Number | Date of In (mm/dd/y | | ID # |
| CAFÉ | | | | (812-488-2952 | | 5/2019 | 11418 |
| | | | mber and street, city, state, zip code) | () Owner | 03/00 | /2013 | |
| 1800 I | lincol | n A | Ave., Evansville, IN, 47722 | | | | |
| Owner | | | | Purpose: | Follow-u | | |
| Chart | vells | | | ✔ Routine | No | 05/ | 16/2019 |
| Owner's Ac | | | | 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 | | |) _R _0 |
| <reda< td=""><td>cted></td><td></td><td></td><td></td><td>C</td><td></td><td> K</td></reda<> | cted> | | | | C | | K |
| Responsible | e Person's | E-mai | a | Temporary | Menu Ty | pe (See addii | tional page) |
| | | | | НАССР | \frown | $\cap \mathcal{C}$ | $\sim \sim \sim$ |
| Certified Fo | | er | | Other (list) | $1 \bigcirc 2$ | <u>3</u> | $4 \underline{\bigcirc}_{5} \underline{\bigcirc}_{5} \underline{\bigcirc}_{5}$ |
| <redac< td=""><td>cted></td><td></td><td></td><td></td><td></td><td></td><td></td></redac<> | cted> | | | | | | |
| CRITICAL | LITEMS AR | E IDE | NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N | - MARKED "C" | | | |
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| | () | | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | MMARY OF VIOLATIONS" AN | D IN THE P | | |
| Section# | C/NC | R | Narrative | | | | orrected By |
| 295 | С | | Ice bucket storage location in | need of cleaning. | | 05/0 | 06/2019 |
| 136 | С | | Personal cell phone usage in | food prep area. | | 05/0 | 06/2019 |
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| Establishm | s Roa ent Address Eagle Road Idress Cted> Cted> Cted> cted> cted> cted> cted> cted> | dhc | | Telephone Number (812-477-7427 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted> | Follow-u NO Summary C | r) 3/2019 p Releas | 18/2019 | |
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| | | | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | | | | | |
| | ON(S) REPE C/NC | ATED R | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI Narrative | | | | | |
| Section# 324 | NC | л | Dishmachine table leakin | a Servicina | | |)9/2019 | |
| 024 | | | | g. oervieling. | | 00/0 | 1572015 | |
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| Establishme 310 N Owner PIZZA Owner's Ac <redac Person in C <redac Responsible Certified Fo</redac </redac | A HU ent Addres St.Jc A HUT Idress Cted> harge Cted> e Person's pood Handle cted> | s (nu) DSC O E-ma | | Telephone Number (812-424-4433 (<redational) Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redational) | Follow-u NO Summary C | r) B/2019 P Releas 05/ of Violation NC pe (See addit | 18/2019 s: R ional page) |
|--|---|----------------------------|--|---|--------------------------------|--|--|
| | | | NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | | D IN THE N | ARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | To Be Co | rrected By |
| Section | 0,110 | | | | | 10 20 00 | II colou Dy |
| | | | No noted violation | DIIS. | | | |
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| 4604 Owner YUE Y Owner's Ad <redae Person in C <redae Responsible</redae </redae | A LU I ent Addres Vogel ing Y ddress cted> cted> cted> cted> cted> cted> cted> cted> | er | nber and street, city, state, zip code) d., Evansville, IN, 47715 g | Telephone Number (812-471-9999) (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted> | Follow-u Yes Summary C_4 | r) 9/2019 p Releas | 19/2019 | |
|--|--|----|---|--|-----------------------------------|--------------------------|--------------|--|
| | | | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU! | | D IN THE N | VARRATIVE | BELOW AS "R" | |
| Section# | C/NC | R | Narrative | | | To Be Co | orrected By | |
| 324 | С | | Lacking proper grease trap hook up. (| Consult with Sewer | Dept. | 05/1 | 0/2019 | |
| 324 | С | | Lacking adequate three compartment | sink sizing to wash | pans. | ans. 05/09/2019 | | |
| 118 | С | | Lacking certified food safe | ety employee. | | 11/11/2019 | | |
| 413 | NC | R | Back door not sealed | . Repair. | | 06/10/2019 | | |
| 128 | С | | Employees not washing hands before or after | er packaging or prep o | of food. | 05/0 |)9/2019 | |
| 347 | NC | R | Lacking soap for han | id sinks. | | 05/09/2019 | | |
| 346 | NC | R | Lacking disposable towels | for hand sink. | | 05/0 |)9/2019 | |
| 146 | NC | R | Lacking labeling of some p | ackaged fish. | | 05/0 |)9/2019 | |
| | | | Holding fish in freezer until plumbing | g issues are correc | ted. | | | |
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| Received by (name and title printed): Inspected by (name and title printed): <redacted> <redacted></redacted></redacted> | | | | | | | | |
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| Establishme | | rou | | Telephone Number | Date of Ins (mm/dd/yr | | ID # | |
|--|--------------------|------------------------|---|--|----------------------------|------------------------|---------------------------------------|--|
| China | | | | ⁽ 812-428-3838 | | 9/2019 | 11145 | |
| Establishme | ent Addres S GO | s (nur / eri | nber and street, city, state, zip code) NOT St., Evansville, IN, 47713 | <pre>'<redacted></redacted></pre> | | | | |
| Owner | - | | | Purpose: | Follow-u | p Releas | | |
| Quan | Iran | | | ✔ Routine | Yes | 05/ | 19/2019 | |
| Owner's Ad | | | | Follow-up | Summary | of Violation | 15: | |
| <reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td>2</td><td>2 ∩</td></reda<> | | | | Complaint | | 2 | 2 ∩ | |
| Person in C | | | | Pre-Operational | <u>с</u> U | | $3_{R}0$ | |
| <reda< td=""><td></td><td></td><td></td><td>Temporary</td><td>МТ</td><td>/C 11:</td><td>· · · · · · · · · · · · · · · · · · ·</td></reda<> | | | | Temporary | МТ | /C 11: | · · · · · · · · · · · · · · · · · · · | |
| Responsible | e Person's | E-mai | 1 | НАССР | Menu I y | pe (See addit | ional page) | |
| Certified Fo | od Handl | | | Other (list) | $1 \bigcirc 2$ | $\bigcap_2 \bullet$ | $)_{4} \bigcirc _{5} \bigcirc$ | |
| <redac< td=""><td></td><td>:1</td><td></td><td></td><td>$1 \underline{\bigcirc 2}$</td><td>$\underline{\bigcirc}$</td><td><u>_4_3</u>_</td></redac<> | | :1 | | | $1 \underline{\bigcirc 2}$ | $\underline{\bigcirc}$ | <u>_4_3</u> _ | |
| | | E IDE | NTEED IN THE CHECKLIST AND MADD ATRIE COLUMNS A | A DIZED "C" | | | | |
| | | | NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | | | | | |
| | . , | | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | MMARY OF VIOLATIONS" AN | D IN THE N | | | |
| Section# | C/NC | R | Narrative | | | | orrected By | |
| 295 | NC | | Hood vent soile | ed. | | 05/1 | 6/2019 | |
| 431 | NC | | Floor under cooking ar | rea soiled. | | 05/1 | 6/2019 | |
| 431 | NC | | Shelving at kitchen ha | and sink. | | 05/16/2019 | | |
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| Received by | | | | Inspected by (signature): | | | | |
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| cc: | | | сс: | | cc: | | | |



| Establishm 600 N Owner | s Gril ent Addres Gree west ddress cted> harge cted> e Person's | s (nu n F Dir | a Bar #900 ^{mber and street, city, state, zip code)} River Rd, Evansville, IN, 47715 ning Inc Attn: Jill Condon | Telephone Number (812-475-1510 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted> | Follow-u NO Summary C Menu Tyj | r) 9/2019 p Releas | 19/2019 s: R 1 ional page) |
|------------------------------|---|---------------------|---|--|--|--------------------------|--|
| | | | 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 | | | | rrected By |
| | | | | | | | ě |
| 187 | С | R | Ready to eat food not being held at 41 degree | es or less in prep table | cooler. | 05/0 | 9/2019 |
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| 1119 I Owner Scott S Owner's Ad <redae Person in C <redae Responsible Certified Fo <redae< th=""><th>ed ent Addres Parre Schyr Idress Cted> harge Cted> Person's</th><th>E-ma</th><th></th><th>Telephone Number (812-402-2230) (<redational) Purpose: Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redational) </th><th>Follow-u Summary C</th><th>p Releas 05/ of Violatior NC (See addin</th><th>19/2019 </th></redae<></redae </redae | ed ent Addres Parre Schyr Idress Cted> harge Cted> Person's | E-ma | | Telephone Number (812-402-2230) (<redational) Purpose: Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redational) | Follow-u Summary C | p Releas 05/ of Violatior NC (See addin | 19/2019 |
|--|---|------|---|--|--------------------------|--|---------------------|
| • VIOLATIC | N(S) REPE | ATED | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | MMARY OF VIOLATIONS" AN | D IN THE N | ARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | To Be Co | orrected By |
| 334 | С | | Kitchen hose at sink and dish machine sink hose lacking r | equired air gap/backsiphona | ge device | 05/1 | 6/2019 |
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| Received by | (signature) |): | | Inspected by (signature): | | | |
| cc: | | | cc: | | cc: | | |
| | | | с. | | | | |



| 1800 L Owner Charty Owner's Ad <redat Person in C <redat Responsible Certified Fo <redat< th=""><th>-fil-A ent Addres _incol vells ddress cted> cted> rerson's od Handld cted> rerson's</th><th>E-mai E IDE</th><th>NTIFIED IN THE CHECKLIST AND NARRATIVE COLUM</th><th></th><th></th><th>Follow-u NO Summary C Menu Typ 12</th><th>b) 6/2019 P Releas 05/ of Violation NC De (See addin 03</th><th>$\frac{16/2019}{R}$</th></redat<></redat </redat | -fil-A ent Addres _incol vells ddress cted> cted> rerson's od Handld cted> rerson's | E-mai E IDE | NTIFIED IN THE CHECKLIST AND NARRATIVE COLUM | | | Follow-u NO Summary C Menu Typ 12 | b) 6/2019 P Releas 05/ of Violation NC De (See addin 03 | $\frac{16/2019}{R}$ |
|--|---|----------------|--|------|--|--|--|---------------------|
| • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S | | | | | IAKT OF VIOLATIONS" AN | U IN THE N | | |
| Section# | C/NC | R | Narrative No violetia | | | | To Be Co | orrected By |
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| Establishme Ace's | | e | | | Telephone Number () Establishment | Date of Ins (mm/dd/yr | ;) | њ# 11015 | |
|---|------------|---------|--|----------|--|--------------------------|--------------|---|--|
| | | | nber and street, city, state, zip code) | | - | 05/06 | 6/2019 | 11010 | |
| | | | ve., Evansville, IN, 4772 | 2 | () Owner | | | | |
| Owner | | | | | Purpose: | Follow-u | p Releas | | |
| Charty | | | | | ✓ Routine | No | | 16/2019 | |
| Owner's Ad | | | | | Follow-up | Summary | of Violation | IS: | |
| <reda< td=""><td></td><td></td><td></td><td></td><td>Complaint</td><td>0</td><td>(</td><td></td></reda<> | | | | | Complaint | 0 | (| | |
| Person in C <reda< td=""><td></td><td></td><td></td><td></td><td>Pre-Operational</td><td>с_U</td><td></td><td></td></reda<> | | | | | Pre-Operational | с_ U | | | |
| Responsible | e Person's | E-mai | l | | Γemporary Menu Type (See additional particular) | | | | |
| | | | | | HACCP | \frown | | $\cap \cap$ | |
| Certified Fo | | er | | | Other (list) | 1 <u>U</u> 2 | | $\underline{0}_{4} \underline{\bigcirc}_{5} \underline{\bigcirc}$ | |
| | | E IDE | NTIFIED IN THE CHECKLIST AND NARRATIVE C | OLUMNS N | MARKED "C" | | | | |
| • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S | | | | | JMMARY OF VIOLATIONS" ANI |) IN THE N | ARRATIVE | BELOW AS "R" | |
| Section# | C/NC | R | Nar | rative | | | To Be Co | rrected By | |
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| Establishme 423 M Owner Riland Owner's Ad <redat Person in C <redat Certified Fo <redat Certified Fo</redat </redat </redat | Harvent Address etro A , LLC Idress cted> harge cted> cted> idress idress idress cted idress idres idres idress idres idres idres idres idres idres | s (nun AVE E-mai E IDE | NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS | | Follow-u NO Summary C | r) p Releas 05/ of Violation NC $(See \ addit)$ $rac{1}{2}$ | $\frac{1}{2} \frac{1}{2} \frac{1}$ |
|---|--|---------------------------------|---|--|--------------------------------|--|--|
| | | | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S | UMIMARY OF VIOLATIONS" AN | D IN THE N | | |
| Section# | C/NC | R | Narrative | | | To Be Co | orrected By |
| | | | No discrepano | cies | | | |
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| Received by | (signature) |): | | Inspected by (signature): | | | |
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| Establishm 410 To Owner KMT I Owner's Ac <redao Person in C <redao Responsible</redao </redao | e's C ent Addres ekopp nc ddress cted> harge cted> e Person's | s (nui D el E-ma | venience mber and street, city, state, zip code) Ave., Evansville, IN, 47712 | | Telephone Number (812-429-1137 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted> | Follow-u NO Summary C1 | r) 9/2019 p Releas | 19/2019 |
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| <redac< td=""><td></td><td>E IDE</td><td>NTIFIED IN THE CHECKLIST AND NARRATIVE COLUM</td><td>ARKED "C"</td><td></td><td></td><td></td></redac<> | | E IDE | NTIFIED IN THE CHECKLIST AND NARRATIVE COLUM | ARKED "C" | | | | |
| • VIOLATIC | N(S) REPE | ATED | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE | "SUI | MMARY OF VIOLATIONS" AN | D IN THE N | ARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | | To Be Co | rrected By |
| 191 | С | | Ready to eat, potentially hazardous | s fo | od lacking date ma | arkina | | 9/2019 |
| 101 | 0 | | ready to cat, potentially hazardout | 5 10 | | anning. | 00/0 | 13/2013 |
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| Establishm 421 N Owner J & C Owner's Ad <redat Person in C <redat Responsible Certified For <redat< th=""><th>no's ent Addres St.Jc Pizza ddress cted> cted> cted> e Person's cod Handle cted></th><th>s (nun DSC I IN E-mai</th><th></th><th>Telephone Number (812-424-7333) () Owner Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u NO Summary C1</th><th>•; 9/2019 p Releas</th><th>19/2019 </th></redat<></redat </redat | no's ent Addres St.Jc Pizza ddress cted> cted> cted> e Person's cod Handle cted> | s (nun DSC I IN E-mai | | Telephone Number (812-424-7333) () Owner Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) | Follow-u NO Summary C1 | •; 9/2019 p Releas | 19/2019 |
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| • VIOLATIC | 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 |
| 438 | С | | Working container of toxic ma | terial not labeled. | | Coi | rrected |
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| Establishma 222 E Owner Charle Owner's Ac <redac Person in C <redac Responsible Certified Fo <redac< th=""><th>Head ent Addres Coluit es Joh ddress cted> harge cted> e Person's pood Handle cted></th><th>s (nun mb nns E-mai</th><th></th><th>Telephone Number (812-425-2515 (<redational) Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redational) </th><th>Follow-u NO Summary C1</th><th>r) 3/2019 p Releas</th><th>18/2019 </th></redac<></redac </redac | Head ent Addres Coluit es Joh ddress cted> harge cted> e Person's pood Handle cted> | s (nun mb nns E-mai | | Telephone Number (812-425-2515 (<redational) Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redational) | Follow-u NO Summary C1 | r) 3/2019 p Releas | 18/2019 |
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| • VIOLATIC | N(S) REPE | ATED | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | MMARY OF VIOLATIONS" AN | D IN THE N | ARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | To Be Co | orrected By |
| 191 | С | | Date marking needed on rea | ady to eat foods. | | Co | rrected |
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| Received by | (signature) |): | | Inspected by (signature): | | | |
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| 800 N ^{Owner} | s & E ent Addres Gree a Smi Idress cted> harge cted> Person's | s (nui en F ith E-mai | nber and street, city, state, zip code) River, Evansville, IN, 47 & Phyllis Wolf | Telephone Number (812-457-8566 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted> | Follow-u NO Summary C | r) 3/2019 p Releas | 18/2019 | |
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| • violario Section# | C/NC | R | FROM PREVIOUS INSPECTIONS ARE DENOT | Narrative | MMARY OF VIOLATIONS" AN | DINTHEN | | orrected By |
| S CCCIOIIII | ente | | | ed violatio | ons. | | 10 20 00 | |
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| 1114 F Owner Slopbu Owner's Ad <redat Person in C <redat Responsible Certified Fo <redat< th=""><th>Hous Parre Lucket Ldress Cted> harge Cted> Person's Mod Handle Lted> ITEMS AR</th><th>s (nun tt S , LL E-mai</th><th>I NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS</th><th></th><th>Follow-u NO Summary C</th><th>r) p Releas 05/ of Violation NC <math>(See \ addin03</math></th><th>$\frac{19/2019}{R}$</th></redat<></redat </redat | Hous Parre Lucket Ldress Cted> harge Cted> Person's Mod Handle Lted> ITEMS AR | s (nun tt S , LL E-mai | I NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS | | Follow-u NO Summary C | r) p Releas 05/ of Violation NC $(See \ addin03$ | $\frac{19/2019}{R}$ |
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| Section# | C/NC | R | Narrative | | | To Be Co | orrected By |
| | | | No noted violati | ons. | | | |
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| cc: | | | cc: | | cc: | | |



| Establishme 1800 L Owner Chartw Owner's Ad <redad Person in C <redad Responsible Certified Fo</redad </redad | t Mai ent Addres _incol vells ddress cted> harge cted> e Person's ood Handle cted> | s (nu n / E-ma | et (Koch Building) mber and street, city, state, zip code) Ave, Evansville, IN, 47722 il | Telephone Number (812-488-2952 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redacted> | Follow-u NO Summary C Menu Tyj | of Violation | 16/2019 15: R (ional page) |
|--|--|----------------------|---|---|--|--------------|--|
| • VIOLATIO | N(S) REPE | ATED | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | JMMARY OF VIOLATIONS" AN | D IN THE N | ARRATIVE | BELOW AS "R" |
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| | | | No noted violati | ons. | | | |
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| Establishme 209 N Owner John M Owner's Ac <redac Person in C <redac Responsible Certified Fo <redac< th=""><th>ens E ent Addres Wab Mills Idress Cted> Cted> Person's</th><th>E-mai</th><th>wery & Pub mber and street, city, state, zip code) n Ave., Evansville, IN, 47712 a a a contribution of the state of</th><th>Telephone Number (812-909-1956 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted></th><th>Follow-u NO Summary C1</th><th>r))/2019 p Releas 05/</th><th>20/2019 </th></redac<></redac </redac | ens E ent Addres Wab Mills Idress Cted> Cted> Person's | E-mai | wery & Pub mber and street, city, state, zip code) n Ave., Evansville, IN, 47712 a a a contribution of the state of | Telephone Number (812-909-1956 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted> | Follow-u NO Summary C1 | r))/2019 p Releas 05/ | 20/2019 |
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| | . , | | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUN | MMARY OF VIOLATIONS" AN | D IN THE N | | |
| Section# | C/NC | R | Narrative | | | | orrected By |
| 173 | С | | Improper storage of egg | js in cooler. | | Co | rrected |
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| Received by | (signature) |): | | Inspected by (signature): | | | |
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| White Swan Coffee Lab Establishment Address (number and street, city, state, zip code) 2025 W Franklin St, Evansville, IN, 47712 Owner David Rudibaugh Owner's Address <redacted> Person in Charge <redacted> Responsible Person's E-mail Certified Food Handler • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU</redacted></redacted> | | | | Telephone Number (812-402-0233 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted> | Follow-u NO Summary C Menu Tyj | r) D/2019 P Releas 05/ of Violatior | 20/2019 s: | |
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| | | | | | | D IN THE N | ARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | | Narrative | | | | rrected By |
| | | | | No noted violatic | ons. | | | · |
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| Establishm 420 S Owner Tracy Owner's Ac <redac Person in C <redac Responsible Certified Fo <redac< th=""><th>sville ent Addres Gree Elbah ddress cted> cted> cted> e Person's cod Handlo cted></th><th>er nga er</th><th>1</th><th>Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u Yes Summary C_2</th><th>r) 9/2019 p Releas</th><th>19/2019 BR</th></redac<></redac </redac | sville ent Addres Gree Elbah ddress cted> cted> cted> e Person's cod Handlo cted> | er nga er | 1 | Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) | Follow-u Yes Summary C_2 | r) 9/2019 p Releas | 19/2019 BR | | |
|--|---|-----------------|---|--|-----------------------------------|--------------------------|---------------|--|--|
| | | | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | | D IN THE N | ARRATIVE | BELOW AS "R" | | |
| Section# | C/NC | R | Narrative | | | To Be Co | orrected By | | |
| 173 | C | | Improper storage of raw m | neat in cooler. | | | | | |
| 346 | NC | | Hand soap not provided a | | | | | | |
| 347 | NC | | Hand drying provisions not prov | • | | | | | |
| 345 | С | | | ink used for other purposes other than hand washing. | | | | | |
| 342 | NC | | | No hot water at hand sink in frying area. | | | | | |
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| Received by | (signature) |): | | Inspected by (signature): | | | | | |
| cc: | | | cc: | | cc: | | | | |



| 101 S Owner Jamie Owner's Ad <redae Person in C <redae Responsible</redae </redae | d Bre ent Addres <u>E 1st</u> <u>A Ell</u> ddress <u>cted></u> charge <u>cted></u> e Person's | s (nun St, iott E-mai | mber and street, city, state, zip code) Evansville, IN, 47708 | Telephone Number (812-402-1515 (<redational Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redational | Follow-u NO Summary C Menu Tyj | r) D/2019 P Releas 05/ | 20/2019 IS: R (ional page) |
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| | | | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | MMARY OF VIOLATIONS" AN | D IN THE N | | |
| Section# | C/NC | R | Narrative | | | | orrected By |
| 430 | NC | | Install door sweeps on outer | & interior doors. | | 05/1 | 7/2019 |
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| Establishme 2124 V Owner Kerry Owner's Ad Person in C Responsible Certified Fo <redac< th=""><th>Roc ent Addres W Fra Chess Idress harge e Person's cood Handlo cted></th><th>s (nun INK Ser E-mai</th><th></th><th>Telephone Number (812-401-1730 () Owner Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</th><th>Follow-u NO Summary C Menu Ty</th><th>r) 6/2019 P Releas 05/ of Violation NC</th><th>) R 0</th></redac<> | Roc ent Addres W Fra Chess Idress harge e Person's cood Handlo cted> | s (nun INK Ser E-mai | | Telephone Number (812-401-1730 () Owner Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C" | Follow-u NO Summary C Menu Ty | r) 6/2019 P Releas 05/ of Violation NC |) R 0 |
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| | | | No noted violati | ons. | | | |
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