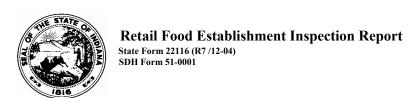


Establishm				Telephone Number	Date of Ins (mm/dd/yr		ID#
La Pr				812-471-9057	07/09		13220
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	01703	2019	
	Green	Κı	ver Rd, Evansville, Indiana, 47715				
Owner Uriel S	Sarmi	ent	:0	Purpose:  Routine	Follow-up No		19/2019
Owner's Ac				Follow-up	Summary	of Violatior	15:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td>4</td><td></td></reda<>				Complaint		4	
Person in C				Pre-Operational	$ _{\rm C}$ $\cup$	NC_1	$R \cup R$
<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 Typ	e (See addii	tional page)
~				Other (list)			$\bigcirc$
Certified Fo	ood Handle	er			$1 \underline{\bigcirc 2}$	<u> </u>	<u>/4050</u>
• CRITICAL	. ITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• 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
347	NC		Hand drying provisions not prov	vided at hand sink		Co	rrected
			, , , , , , , , , , , , , , , , , , , ,				
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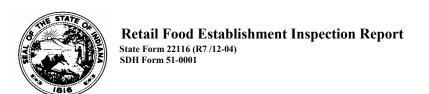
				T			T:
Meije Meije		s S	Station #287	Telephone Number (812-647-2229)	Date of Ins (mm/dd/yr		13011
			mber and street, city, state, zip code) Dr, Evansville, Indiana, 47715	( ) Owner	07/01	/2019	
Owner Meijer	Store	es	Limited Partnership	Purpose:	Follow-u		se Date /11/2019
Owner's Ac	ddress			Follow-up	Summary	of Violation	ns.
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Person in C					()	NG (	$0_{\rm R}$
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td><u>c</u></td><td>NC_</td><td> R</td></reda<>				Pre-Operational	<u>c</u>	NC_	R
Responsible			il	Temporary	Menu Tvi	ne (See addi	tional page)
responsion	0 1 015011 5		•	HACCP		- (500 4441	
Certified Fo		er		Other (list)	102	<u></u>	$)_4$ $\bigcirc_5$ $\bigcirc$
		RE IDE	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
			No violations				
Received by		_		Inspected by (name and title properties)	rinted):		
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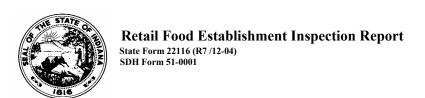
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Missi	on Bl	BC	)	(317-378-9565	07/01/	2010	12393
			mber and street, city, state, zip code)	( ) Owner	07/01/	2019	
1530 N	Gree	n R	iver Rd, Evansville, Indiana, 47715	<re><redacted></redacted></re>			
Owner	DD	$\sim$ 1	Transmille III O	Purpose:	Follow-up		se Date
		Q I	Evansville, LLC	Routine	No	07/	11/2019
Owner's A				Follow-up	Summary of	of Violation	as:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td><math>\cap</math></td></reda<>				Complaint	$\cap$	(	$\cap$
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td><math>R_{\text{R}}</math></td></reda<>				Pre-Operational	C	NC_	$R_{\text{R}}$
Responsible			il	Temporary	Menu Tyne	(See addi	tional page)
responsible	c i cison s			НАССР	- Wiena Type		nonui puge)
Certified F	ood Handle	er		Other (list)	$10_2$	$\bigcirc_3$ $\bigcirc$	$_{4}\bigcirc_{5}\bigcirc$
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• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by	(name and	titla •	printed):	Inspected by (name and title p	rinted):		
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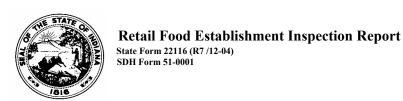
Establishm				Telephone Number	Date of Ins		ID#
Nach	os G	rill	Mexican Restaurant	812-459-3871	07/09		12377
			mber and street, city, state, zip code)	<pre><redacted></redacted></pre>	01/03	2013	
	Gree	n F	River Rd, Evansville, IN, 47715				
Owner Jose N	и Мо	saı	ıeda-Lopez	Purpose:	Follow-up		se Date 719/2019
Owner's Ac		940	1044 E0P02	<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	2	NG 4	$\frac{2}{R}$
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>c<u> </u></td><td>NC_</td><td><u> </u></td></reda<>				Pre-Operational	c <u> </u>	NC_	<u> </u>
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР		$\sim 6$	
Certified Fo		er		Other (list)	1 2	<u>3</u>	<u>)4050</u>
		E IDE	ENTIFIED 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
346	NC	R	Hand soap not provided a	at hand sink.		07/0	09/2019
173	С	R	Improper storage of raw m	neat in cooler.		07/0	09/2019
438	С	R	Chemical bottles not	labeled		07/0	09/2019
399	NC		Ceiling tiles in need of rep	air in kitchen.			
Received by	*	_ *	printed):	Inspected by (name and title p	rinted):		
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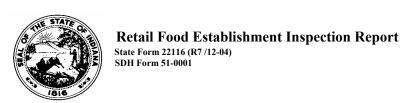
Establishm	A HU	s (nu	#317147 mber and street, city, state, zip code)	**Telephone Number** (812-426-116) ( <redacted)< th=""><th>66 (mm/dd/)</th><th>nspection yr) 9/2019</th><th>12210</th></redacted)<>	66 (mm/dd/)	nspection yr) 9/2019	12210
45U6 I	FIISL F	106	e, Evansville, IN, 47710			D.l	se Date
	HUT	0	F AMERICA LLC c/o DMA	Purpose:  Routine	Follow-NC		19/2019
Owner's Ac				Follow-up	Summar	y of 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			:1	Temporary	Monu T	ype (See addi	itional nago)
Kesponsible	e Person's	L-ma	II	НАССР	Menu 1	ype (see aaai –	tional page)
Certified Fo		er		Other (list)	102	$2 \bigcirc 3 \bigcirc$	$0_4 \bigcirc 5 \bigcirc$
• CRITICAL	L ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMN	S MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "	SUMMARY OF VIOLATIONS'	AND IN THE		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted viola	tions.			
						1	
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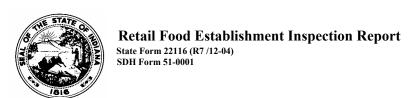
Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#
Frank	din S	tre	et Bazaar	812-550-0996	06/29/		12195
			mber and street, city, state, zip code)	<redacted></redacted>	00/29/	2019	
	VV Fra	nk	lin St, Evansville, IN, 47712	<re><reuacieu></reuacieu></re>			
Owner	l: Ot-		4 <b>Γ</b>	Purpose:	Follow-up		se Date
		ee	t Events Association	Routine	No	07/	09/2019
Owner's Ac				Follow-up	Summary of	of Violation	as:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td><math>\cap</math></td></reda<>				Complaint	$\cap$	(	$\cap$
Person in C				Pre-Operational	C	NC_	P R C
Responsible			;i	Temporary	Menu Type	See addi	tional page)
Kesponsible	c i cison s	L-ma		НАССР	- wichu Type	(See aaai	nonai page)
Certified Fo	ood Handle	er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3$ $\bigcirc$	$)_{4}\bigcirc_{5}\bigcirc$
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• CRITICAL	. ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
			Inspected 5 food trucks ar	nd 12 booths			
			No noted violation				
			140 Hoted violatio	лі <b>з.</b>			
					+		
					T		
Received by	(name and	title j	printed):	Inspected by (name and title pr	rinted):		
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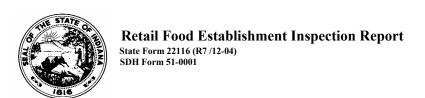
Establishm				Telephone Number	Date of Ins		ID#	
Sky Z	Zone			$\begin{array}{ c c c c c c c c c c c c c c c c c c c$				
Establishm	ent Addres		mber and street, city, state, zip code)		07/08	/2019		
49 N (	Green	<u> Ri</u>	iver Rd, Evansville, IN, 47715	<pre><redacted></redacted></pre>				
Owner	١.,		110	Purpose:	Follow-uj		se Date	
		ntur	es LLC	<b>✓</b> Routine	No	07/	18/2019	
Owner's A				Follow-up	Summary	of Violation	ns:	
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td>NC_</td><td></td></reda<>				Complaint		NC_		
Person in C				Pre-Operational	$C_{\overline{O}}$	. NC		
Responsible				Temporary	Menu Tvi	oe (See addi	tional page)	
Trosponsion.	C 1 015011 5			НАССР				
Certified F	ood Handle	er		Other (list)	$1\bigcirc 2$	$\odot_3$	$)_{4}\bigcirc_{5}\bigcirc$	
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• CRITICAI	L 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				orrected By	
347	NC		Hand drying provisions not pro	vided at hand sink			rrected	
017	110		riana arying proviolene net pro	Trada at Harra on its	1		1100100	
			<u> </u>					
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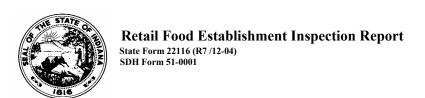
Establishm			_	Telephone Number	Date of Insp	ection	ID#
Subw	ay#	87	0	812-422-5255	(mm/dd/yr)	2040	12174
			mber and street, city, state, zip code)		07/09/	2019	
4218 I	First /	۱ve	e, Evansville, IN, 47711	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Piyush	n Pate	el		Routine	No	07/	19/2019
Owner's Ac				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational		$_{\rm NC}$	J <sub>R</sub> U
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Responsible	e Person's	E-ma	il		Menu Type	(See addi	tional page)
				НАССР			
Certified Fo		er		Other (list)	1 <u>U</u> 2 <u>(</u>	<u> </u>	<u>)4</u> <u>0</u> 5 <u>0</u>
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• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		,	Го Ве Со	orrected By
			No noted violation	ons			
			The Helda Helda.	0.101			
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Received by	*	_ *	printed):	Inspected by (name and title pr	rinted):		
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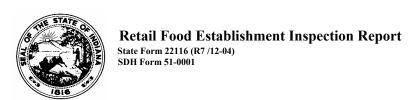
Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#
Perfe	ctly F	-re	sh	812-760-1474	06/27/		12158
			mber and street, city, state, zip code)	( )Owner _	06/27/	2019	
120 N	Rose	nbe	erger Ave, Evansville, IN, 47712	<re><redacted></redacted></re>			
Owner	^ D			Purpose:	Follow-up		se Date
Apple	A Da	y, I	LLC	<b>✓</b> Routine	No	07/	07/2019
Owner's Ac				Follow-up	Summary o	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	$_{\rm C}$	NC_(	$\frac{1}{R}$
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Responsible	e Person's	E-ma	II	НАССР	Menu Type	: (See addi	tional page)
Certified Fo	ood Handl	nr.		Other (list)	$1_1\bigcirc_2$	$\bigcirc$	$)_4\bigcirc_5\bigcirc$
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		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AADVED "C"			
					IN IN THE N	DD 4 TH T	DELOW AC ((D)
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative		<del></del>	10 Be Co	orrected By
			No noted violation	ons.			
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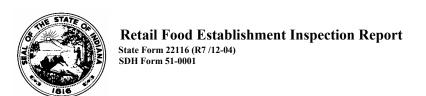
Establishm Mike`		od	Market	Telephone Number (812-423-2275)	Date of Ind (mm/dd/yr	•)	ъ# 12152
			mber and street, city, state, zip code)		07/01	/2019	12.02
			de Dr, Evansville, IN, 47713	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-u		se Date
Yahya	a Malk	aw	/i	<b>✓</b> Routine	No	07/	11/2019
Owner's A	ddress			Follow-up	Summary	of Violation	ns:
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Person in C					$\int_{\Omega} \int_{\Omega} \int_{\Omega} du$	NG	$I_{R}0$
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td><u> </u></td><td>NC</td><td> R</td></reda<>				Pre-Operational	<u> </u>	NC	R
Responsible			il	Temporary	Menu Tvi	oe (See addi	tional page)
•				НАССР			
Certified F	ood Handle	er		Other (list)	1 )2	$(\bullet)_3($	) <sub>4</sub> ( ) <sub>5</sub> ( )
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-		E 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
297	NC		Ice guard in ice machi	ine soiled			01/2019
201	110		lee gaara iii lee macm	iric solica.		0170	71/2013
Received by	(name and	title p	printed):	Inspected by (name and title pr	rinted):		
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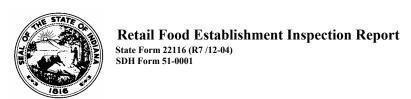
Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#
Little	Caes	sar	`s Pizza	812-401-9555	07/09/		12144
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	07/09/	2019	
	St Jo	se	ph Ave, Evansville, IN, 47711				
Owner	utivo F	-tt~	orta lavostra ente las	Purpose:	Follow-up		se Date
			orts Investments, Inc	Routine	No	07/	19/2019
Owner's Ad				Follow-up	Summary of		
Person in C				Complaint	1	NC_	1 1
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Section#	C/NC	R	Narrative			To Be Co	orrected By
187	С	R	Potentially hazardous food cold holding above 4	1 degrees. Product was	moved.	Co	rrected
256	NC		Thermometers not provided in	refrigeration units.		07/	10/2019
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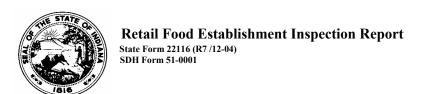
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			mber and street, city, state, zip code)	812-471-9905	07/08	/2019	12134
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Owner			, , ,	Purpose:	Follow-uj		se Date
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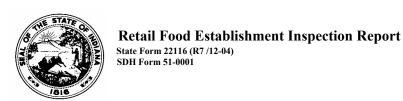
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Swee	t Bet	ty'	s Bakery	812-402-3889	(mm/dd/yr)	0040	12097	
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	( ) Owner	07/08/	2019		
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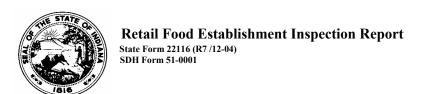
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S & F	Pet	rol	eum Inc.	812-402-8210	06/24/		12086	
			mber and street, city, state, zip code)	<pre></pre>	06/24/	2019		
	Mt Ve	rno	on Ave, Evansville, IN, 47712		Follow-up			
Owner	Cinab			Purpose:		se Date		
Jagir S				<b>✓</b> Routine	No		04/2019	
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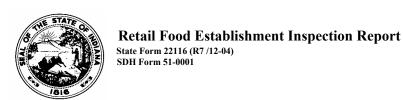
Establishmo Culina		no	vations by April Boeke, LLC	Telephone Number (812-228-7626	Date of Ins (mm/dd/yr	)	ъ# 12083	
			mber and street, city, state, zip code)		07/03	/2019	1 - 3 - 3	
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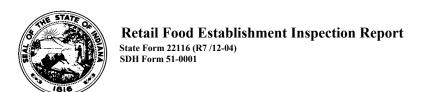
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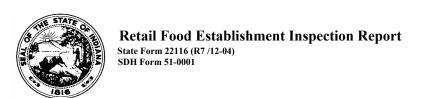
	s Ma		Squeeze		Telephone Number (812-454-2501	Date of Insp (mm/dd/yr) 06/29/		11944	
2025			mber and street, city, state, z lin St, Jasper,		' <redacted></redacted>	00/29/	2019		
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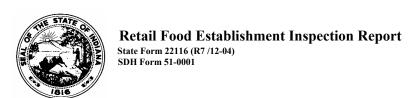
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Tee T	īme	Go	olf	(812-473-7010	(mm/dd/yr) 07/08/2	2010	11940			
			mber and street, city, state, zip code) Ave, Evansville, IN, 47715	( ) Owner	0770672	2019				
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G 10 17				Other (list)	.0.0		$\bigcap$			
Certified Fo		er			102	<u>3</u>	<u>/405</u>			
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMN	NS MARKED "C"						
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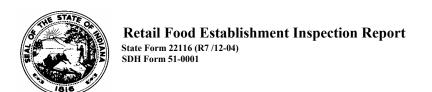
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Establishm K.C.		ne	Out Lounge & Grill	Telephone Number (812-437-9920)	Date of Ins (mm/dd/yr	•)	ть# 11842	
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)  n Square Mall, Evansville, IN, 47715	( ) Owner	07/09	/2019		
Owner		9		Purpose:	Follow-u	n Releas	se Date	
Kerry	Ches	sei	· Jr	Routine	No		19/2019	
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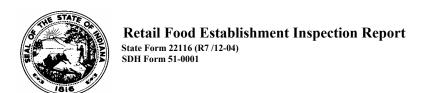
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	E Dia	mo	nd Ave, Evansville, IN, 47711		Follow-up	<del></del>		
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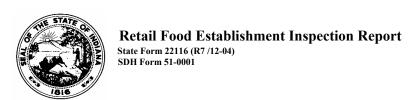
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Major	· Mur	nch	1	(812-499-0160		2040	11816	
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	( ) Owner	07/10/	2019		
101 N	W 1st	St	Ste 100, Evansville, IN, 47708	<pre><redacted></redacted></pre>				
Owner	0:			Purpose:	Follow-up		se Date	
David		ert		<b>✓</b> Routine	No	07/	20/2019	
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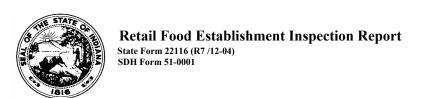
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			ve, Evansville, IN, 47714	1	<redacted></redacted>			
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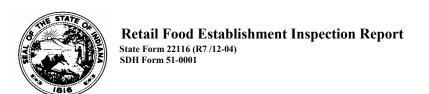
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			mber and street, city, state, zip code)	812-402-7366	06/27	/2019	11702
			ant Dr, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
Owner	oto Cl	had	accetacks LLC	Purpose:	Follow-up		se Date
		nee	esesteaks LLC	Routine	No		07/2019
Owner's A				Follow-up	Summary	of Violation	ns:
		•		Complaint	$\cap$	(	$\cap$
Person in C				Pre-Operational	C_O	NC_	0 R 0
Responsible			SI	Temporary	Manu Tyr	se (Saa addi	tional page)
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Certified F		er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3$	$)_4$ $\bigcirc_5$ $\bigcirc$
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			ENTIFIED 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			To Be Co	orrected By
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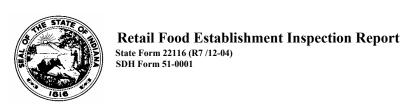
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Burge				8)	312-475-2265	` .	7/2019	11770		
			mber and street, city, state, zip code) ach Ave, Evansville, IN, 47714	(<	<redacted></redacted>	00/21	72013			
Owner Falcor	าe Inv	es <sup>·</sup>	tments Inc		rpose: Routine	Follow-u Yes		o Date 07/2019		
Owner's Ad					ns:					
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Person in C					Pre-Operational	$_{\rm c}$ 1		$\mathbf{R}$ $\mathbf{U}$		
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~				<b>—</b>	Other (list)	$\sim$		$\bigcirc$		
Certified Fo		er				1 <u></u> 2	<u> </u>	<u>/405</u>		
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"					
	` '	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMA	ARY OF VIOLATIONS" AN	D IN THE N				
Section#	C/NC	R	Narrative					orrected By		
295	С		Ice machine in need of	cle	eaning.		06/2	27/2019		
346	NC		Restroom hand sink lac	kin	ig soap.		Corrected			
		$\vdash$								
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			mber and street, city, state, zip code)	( ) Owner	07/06/	2019	
1617	S Wei	nb	ach Ave, Evansville, IN, 47714	<re><redacted></redacted></re>			
Owner	1		(manus (m. lung	Purpose:	Follow-up		se Date
		es'	tments Inc	Routine	No	07/	18/2019
Owner's Ac				Follow-up	Summary of	of Violation	ns:
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Kesponsible	e reison s	L-ma	ш	НАССР	Menu Type	; (see aaai	iionai page)
Certified F	ood Handle	er		Other (list)	1 ( )2(	$\bigcirc_3$ ( $\bullet$	$)_4\bigcirc_5\bigcirc$
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Section#	C/NC	R	Narrative	WIMARY OF VIOLATIONS AN			
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			All violations from 6/27/20	rig corrected.			
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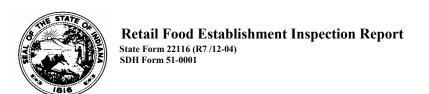
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			Pass Golf Course	<u> </u> <sup>(</sup> 812-426-2166	06/26	/2019	11719
			mber and street, city, state, zip code)  Jrg Rd, Evansville, IN, 47711	( ) Owner			
Owner	CtCI		119 rta, Evansville, 114, 477 rr	Purpose:	Follow-up	Relea	se Date
	ville \	√ar	nderburgh Airport Authority	Routine	No		06/2019
Owner's A				Follow-up	Summary	of Violatio	ns.
<reda< td=""><td>cted&gt;</td><td>1</td><td></td><td>Complaint</td><td>4</td><td>•</td><td></td></reda<>	cted>	1		Complaint	4	•	
Person in C				Pre-Operational	$\begin{bmatrix} \mathbf{c} \end{bmatrix}$	NC (	$\int_{\mathbb{R}} U$
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Responsibl	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	itional page)
				Other (list)	$I \cap I$		
Certified F	ood Handl	er		Other (list)	$1 \bigcirc 2$	<u>J</u> 3 <u>C</u>	<u> 1405</u>
• CRITICAL	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	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
415	С		Insect activity present i	n bar area.		06/2	26/2019
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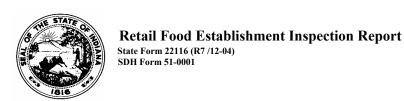
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Mena	ırds			(812-475-8970	` '	2040	11709	
			mber and street, city, state, zip code)	( ) Owner	06/28/2	2019		
2808 l	Mena	rd	Dr, Evansville, IN, 47715					
Owner				Purpose:	Follow-up		se Date	
Menai				<b>✓</b> Routine	No	07/	08/2019	
Owner's Ac				Follow-up	Summary of	f Violation	ns:	
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Person in C				Pre-Operational	$_{\rm C}$	NC_	J <sub>R</sub> U	
Responsible			:1	Temporary	Menu Type	(Coo addi	tional nace)	
Responsible	e r erson s	E-ma	ш	НАССР	Wienu Type	(see aaan	nonai page)	
Certified F	ood Handl	er		Other (list)	$1 \bigcirc 2$	$)_3$	$)_4\bigcirc_5\bigcirc$	
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• CRITICAL	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE NA	RRATIVE	RELOW AS "R"	
Section#	C/NC	R	Narrative	MINIMI OF VIOLATIONS AND			orrected By	
Section	C/ITC	K	No violations			I DC CC	niceted by	
			140 Violations	)•				
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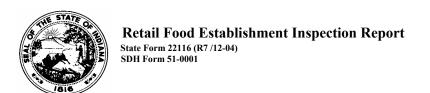
Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#
Gas 8	& Foo	od	Mart	812-477-2920			11692
			mber and street, city, state, zip code)	( ) Owner	06/27/	2019	
2912 l	Linco	n A	Ave, Evansville, IN, 47715				
Owner				Purpose:	Follow-up		se Date
Shiva		Kha	atrı	Routine	No	07/	07/2019
Owner's A				<b>✓</b> Follow-up	Summary of	of Violation	ns:
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Responsible	e Person's	E-ma	il	НАССР	Menu Type	: (See addi	tional page)
Certified F	ood Hondl	210		Other (list)	1000	<b>1</b> ,(	),()_5()
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		E IDE	ENTERED IN THE CHECKLIST AND NADDATIVE COLUMNS A	AADVED «C»			
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
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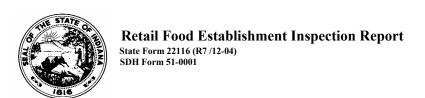
Establishm					Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
			ar and Lounge		812-423-0872	06/28/	2019	11621
			mber and street, city, state, zip code) Ve, Evansville, IN, 47710		<pre>(<redacted></redacted></pre>	00/20/	2010	
Owner					Purpose:	Follow-up		se Date
RICH	ARD I	<b>〈Ε</b>	NNEDY		<b>✓</b> Routine	No	07/	08/2019
Owner's A					Follow-up	Summary o	f Violation	ns:
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Person in C					Pre-Operational	$_{\rm C}$	NC	$R_{\rm R}$
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• CRITICAL	LITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COL	UMNS M	IARKED "C"			
• VIOLATIO			FROM PREVIOUS INSPECTIONS ARE DENOTED IN T	THE "SUI	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrat					orrected By
310	NC		Hood vents a	are so	oiled.		06/2	29/2019
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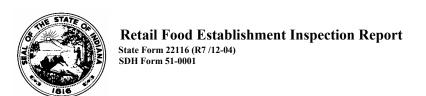
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			uite A, Evansville, IN, 47711		' <redacted></redacted>			
Owner Pathil			, ,		Purpose:  Routine	Follow-up		se Date 05/2019
Owner's Ac					Follow-up	Summary of	of Violation	ns:
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Person in C					Pre-Operational	$_{ m c}$ U	NC_(	$\mathcal{I}_{R}$ $\mathcal{U}_{R}$
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Section#	C/NC	R	Narrativ				To Be Co	orrected By
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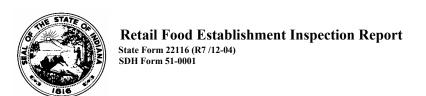
Establishm			1100000	Telephone Number	Date of Insp (mm/dd/yr)		ID#
			#28908	812-473-0040	06/24/		11555
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	( <redacted></redacted>	00/2 1/	2010	
Owner Bell In	diana	ı LI	_C	Purpose:	Follow-up No		se Date 04/2019
Owner's Ac				Follow-up	Summary o	of Violation	ns:
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Person in C				Pre-Operational	$ _{\rm C}$ U	NC_(	J <sub>R</sub> U
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Responsible	e Person's	E-ma	il	НАССР	Menu Type	: (See addi	tional page)
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "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
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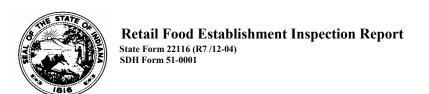
Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Mays	e Fa	rm	Market	812-963-3175	06/28/2	2010	11551
			mber and street, city, state, zip code)	<pre></pre>	00/20/	2019	
6400 I	N St J	<u>loe</u>	Ave, Evansville, IN, 47720	<re><redacted></redacted></re>			
Owner PAUL	MAY	SE		Purpose:  Routine	Follow-up NO		se Date 08/2019
Owner's Ac	ddress			Follow-up	Summary of	f Violation	ns:
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Person in C				Pre-Operational	$\begin{bmatrix} c \end{bmatrix}$	NC_	) R O
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Responsible	e Person's	E-ma	il	HACCP	Menu Type	(See addi	tional page)
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Certified Fo		er		Other (list)	1 2	<u>3</u>	<u>/4</u> <u>5</u> <u>5</u>
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• CRITICAL	L ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		ŗ	Го Ве Со	orrected By
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Establishm		1 P	al #2760	Telephone Number	Date of Ins (mm/dd/yr		1D# 11550
			mber and street, city, state, zip code)	812-476-8514	06/26	/2019	11550
2131	S We	inb	ach Ave, Evansville, IN, 47714				
Owner DOLG	SENC	OR	RP LLC	Purpose:  Routine	Follow-up		se Date 706/2019
Owner's A				Follow-up	Summary	of Violation	ns:
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Responsible	e Person's	E-ma	il		Menu Typ	e (See addi	tional page)
				HACCP		$\sim$ $\sim$	
Certified F	ood Handl	er		Other (list)	1 2	<u>3</u>	<u> 14050</u>
• CRITICAI	L ITEMS AI	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"	<u> </u>		
• 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
			No noted violation	ons.			
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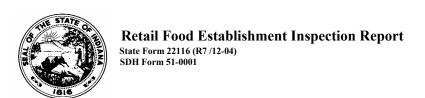
Establishm Stop		٠ -	LS Petroleum Inc	Telephone Number (812-421-8190	Date of Ins (mm/dd/yr		тр# 11521
			mber and street, city, state, zip code)	<b>=</b>	07/02	/2019	11521
			Ave, Evansville, IN, 47712	<pre><redacted></redacted></pre>			
Owner Parmo	nd Sn	lan		Purpose:	Follow-uj		se Date //12/2019
Owner's A		iaii	N	Routine			
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>l _ `</td><td>of Violation</td><td>_</td></reda<>				Follow-up	l _ `	of Violation	_
Person in C				Complaint	. ()	(	$\frac{0}{R}$
<reda< td=""><td></td><td>,</td><td></td><td>Pre-Operational</td><td><math> ^{c}</math></td><td>NC_</td><td> R</td></reda<>		,		Pre-Operational	$ ^{c}$	NC_	R
Responsible			il	Temporary	Menu Tyr	e (See addi	tional page)
				НАССР		~ ~	
Certified F		er		Other (list)	1 2	<u>3</u>	) <sub>4</sub> <u>0</u> 5 <u>0</u>
• CRITICAI	L 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 Co	orrected By
			No noted violation	ons.			
Received by		_		Inspected by (name and title properties)	rinted):		
Received by				Inspected by (signature):			
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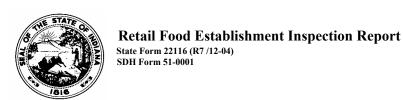
					_		
Establishm Salva		Arı	my Community Center	Telephone Number (812-425-1375)	Date of Ins (mm/dd/yr	)	тр# 11481
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	, , , ,	07/08	/2019	11101
1040 I	N Fult	ton	Ave, Evansville, IN, 47710	<pre>(<redacted></redacted></pre>			
Owner SALV	ATIO	N A	ARMY	Purpose:  Routine	Follow-uj		ne Date 18/2019
Owner's Ac				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>1</td><td>(</td><td>) (</td></reda<>				Complaint	1	(	) (
Person in C				Pre-Operational	$_{\rm C}$ 1	NC_	$\mathcal{L}_{R}$
<reda< td=""><td></td><td></td><td>2</td><td>Temporary</td><td>М Т</td><td></td><td></td></reda<>			2	Temporary	М Т		
Responsible	e Person's	L-ma	Ш	НАССР	Menu Typ	se (see aaai –	tional page)
Certified Fo		er		Other (list)	102	<u>3</u>	<u>4</u> 050
		RE IDE	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
173	С		Improper storage of raw e	ggs in cooler.		Co	rrected
Received by				Inspected by (name and title predacted>	rinted):		
Received by				Inspected by (signature):			
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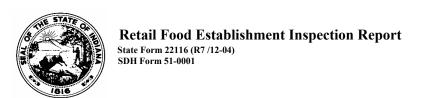
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
			s-Royal	812-479-8603	07/03/	2010	11446
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	<pre></pre>	07/03/	2019	
	N Fuli	ton	Ave, Evansville, IN, 47710	<u> </u>			
Owner Winkle	er Inc			Purpose:  Routine	Follow-up NO		se Date /13/2019
Owner's Ac				Follow-up	Summary o	f Violatio	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	$_{\rm c}$ U	NC_	J <sub>R</sub> U
<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	HACCP	Menu Type	(See addi	tional page)
Certified F	3 77 31			Other (list)	1000	7,6	$\bigcirc$
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		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MADKED "C"	<u> </u>		
						DD 4 #11 #2	DELOW AC ((D)
			PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative		<del></del>	10 Be Co	orrected By
			No noted violation	ons.			
					<del></del>		
Received by	(name and	title p	printed):	Inspected by (name and title p	rinted):		
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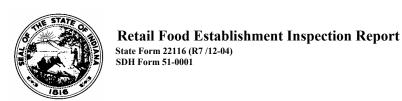
Establishm			_	Telephone Number	Date of Insp (mm/dd/yr)		ID#
Wess	elma	ins	Sonntag	812-424-3549	07/01/		11442
			mber and street, city, state, zip code)	( ) Owner	07/01/	2019	
	<u>onnta</u>	g A	Ave., EVANSVILLE, IN, 47712	<re><reuacieu></reuacieu></re>			
Owner Winkle	er Inc			Purpose:	Follow-up NO		se Date /11/2019
Owner's Ac				Follow-up	Summary of	of Violation	ns.
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Complaint</td><td></td><td>_</td><td></td></reda<>	cted>			Complaint		_	
Person in C				Pre-Operational		NC_(	J <sub>R</sub> U
<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 Type	: (See addi	tional page)
				Other (list)	$I \cap \iota$		
Certified Fo		er			$1 \bigcirc 2$		<u>/405</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by	(name and	title p	printed):	Inspected by (name and title p	rinted):		
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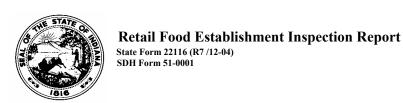
Establishm					lephone Number	Date of In (mm/dd/y		ID#
Wend				8)	12-425-2359	,	4/2019	11435
			mber and street, city, state, zip code)		redacted>	00/22	+/2019	
	-ırst /	<del>\</del> ve	e, Evansville, IN, 47710					
Owner SERV	US, I	nc.			rpose: Routine	Follow-u No		Se Date 04/2019
Owner's Ac	ddress			Т	Follow-up	Summary	of Violation	ns:
<reda< td=""><td>cted&gt;</td><td></td><td></td><td></td><td>Complaint</td><td>-</td><td></td><td></td></reda<>	cted>				Complaint	-		
Person in C	_				Pre-Operational	$_{\rm C}$ ${ m U}$	NC 4	$\frac{2}{R}$
<reda< td=""><td></td><td></td><td></td><td>=</td><td>Temporary</td><td></td><td></td><td></td></reda<>				=	Temporary			
Responsible	Person's	E-mai	il	$\vdash$	HACCP	Menu Ty	pe (See addii	tional page)
				-	<del>{</del>			
Certified Fo		er			Other (list)	1 <u>U</u> 2	$0$ 3 $\bigcirc$ 3 $\bigcirc$ 3	<u>/405</u>
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARK	ED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMA	RY OF VIOLATIONS" AN	D IN THE !	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
431	NC	R	Walk in freezer floor in nee	ed (	of cleaning.		06/2	24/2019
295	NC		Ice guard soiled in ice		<del>-</del>			24/2019
200	- 110		100 gaara 00.10400	11.0			00,-	-T/ <b>Z</b> 0 : 0
		$\vdash$					<del> </del>	
		$\vdash$					<u> </u>	
		$\vdash$					<del> </del>	
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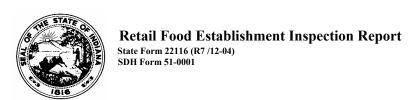
Establishm	4 NI			Telephone Number	Date of Ins	mastica	ID#
		R	estaurant	(812-479-7600)	(mm/dd/yr	·j	11379
Establishm	ent Addre	ss (nu	mber and street, city, state, zip code)	( ) Owner	07/02	/2019	
	Gree	n F	River Rd, Évansville, IN, 47715				
Owner Jingya	an I i			Purpose:	Follow-u		se Date //12/2019
Owner's Ac				Follow-up		of Violation	
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Person in C				Complaint	3	NC	1 54
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Pre-Operational</td><td>L</td><td>. NC</td><td> K</td></reda<>	cted>			Pre-Operational	L	. NC	K
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	oe <i>(See addi</i>	tional page)
				HACCP		$\bigcirc$ 6	
Certified Fo		er		Other (list)	1 <u>0</u> 2		<u> 14050</u>
• CRITICAL	ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "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	orrected By
344	С	R	Hand sink obstruction	cted.		Co	rrected
438	С	R	Chemical bottles not	labeled.		07/0	02/2019
191	С	R	Ready to eat food lacking	date marking.		07/0	02/2019
413	NC	R	Door sweep in need	of repair.		07/0	09/2019
Received by	(name and	l title j	printed):	Inspected by (name and title p	rinted):		
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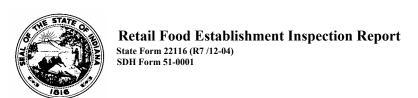
E ( LE L	4 NT			TO I I NY I	D-4CI	4:	ID #
Establishmo Subw		30	714	Telephone Number (812-437-3750)	Date of Ins (mm/dd/yr	•)	то# 11371
			mber and street, city, state, zip code)	1	07/10	/2019	
			Unit A, EVANSVILLE, IN, 47720	' <redacted></redacted>			
Owner				Purpose:	Follow-uj		se Date
Larry	Patel			<b>✓</b> Routine	No	07/	20/2019
Owner's Ac	ldress			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	Temporary	Menu Typ	oe (See addi	tional page)
				НАССР		$\sim c$	
Certified Fo		er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3$	$)_4 \bigcirc 5 \bigcirc$
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• CRITICAL	ITEMS AR	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
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Received by	*			Inspected by (name and title p	rinted):		
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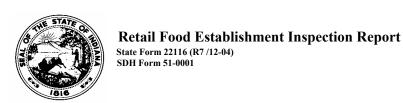
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Establishm				Telephone Number	Date of Ins (mm/dd/yr		ID#
Subw				812-429-0090	07/01	/2019	11361
			Expwy, Evansville, IN, 47712	' <redacted></redacted>	01,01		
Owner PATH	IL AN	11N		Purpose:	Follow-up		te Date 11/2019
Owner's Ac				Follow-up	Summary	of Violation	
<reda< td=""><td>cted&gt;</td><td>1</td><td></td><td>Complaint</td><td>4</td><td></td><td>1</td></reda<>	cted>	1		Complaint	4		1
Person in C				Pre-Operational		NC (	) <sub>R</sub> 1
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Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
G 10 17				Other (list)	-		$\bigcirc$
Certified Fe <redact< p=""></redact<>		er			1 2	<u> </u>	<u> 1405</u>
• CRITICAL	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
294	С	R	Sanitizer concentration in buc	ket was too weak.		Co	rrected
Received by	•		printed):	Inspected by (name and title precised)	rinted):		
Received by	(signature	):		Inspected by (signature):			
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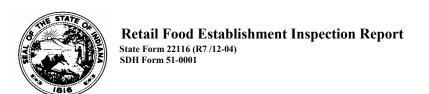
Establishm		_		Telephone Number	Date of Insp (mm/dd/yr)		ID#
Stock	well	Inr	า	812-476-2384	06/28/		11355
			mber and street, city, state, zip code)	( ) Owner	00/20/	2019	
	= Eich	nel	Ave., EVANSVILLE, IN, 47715	<re><redacted></redacted></re>			
Owner	Ob	! _ 4!		Purpose:	Follow-up		se Date
Audre		ISti	e	Routine	No	07/	08/2019
Owner's Ad				Follow-up	Summary	of Violation	ns:
Person in C				Complaint	$\cap$		$3_{R}1$
<reda< td=""><td>_</td><td></td><td></td><td>Pre-Operational</td><td>  C</td><td>NC_</td><td><b>7</b> R 1</td></reda<>	_			Pre-Operational	C	NC_	<b>7</b> R 1
Responsible			il	Temporary	Menu Typ	: (See addi	tional page)
F				НАССР			
Certified Fo	ood Handle	er		Other (list)	$_{1}\bigcirc_{2}($	$\bigcirc_3$ $\bigcirc$	$)_{4} \bigcirc_{5} \bigcirc$
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• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "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
430	NC	R	Various areas of the premises	in need of repair.		07/2	29/2019
291	NC		Sanitizer test kit not p	orovided.		06/2	28/2019
410	NC		Lacking light shielding in the			07/0	01/2019
			3 3				
Received by	(name and	title 1	printed):	Inspected by (name and title p	rinted):		
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Received by				Inspected by (signature):			
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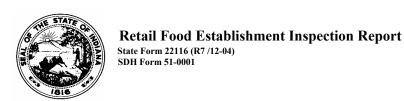
Establishmo		۰i ۱	/lart		ephone Number	Date of Ins (mm/dd/yr		ID#
			mber and street, city, state, zip code)		12-963-5761	07/09	/2019	11338
			e Rd., Evansville, IN, 47720	(<	redacted>			
Owner	· . D	1			rpose:	Follow-u		e Date
Summ		<u>eı</u>		~	Routine	No	07/	19/2019
Owner's Ad				Щ	Follow-up	Summary	of Violation	IS:
<reda< td=""><td></td><td></td><td></td><td>┸</td><td>Complaint</td><td>1</td><td>(</td><td>) ()</td></reda<>				┸	Complaint	1	(	) ()
<reda< td=""><td></td><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td><math>\frac{1}{2}</math> R <math>\frac{1}{2}</math></td></reda<>					Pre-Operational	C	NC_	$\frac{1}{2}$ R $\frac{1}{2}$
Responsible			il	┨	Temporary	Menu Tvi	ne (See addi)	tional page)
F			_		НАССР			
Certified Food Handler					Other (list)	$_{1}\bigcirc_{2}$	$\bigcirc_3$ $\bigcirc$	)4050
<redacted></redacted>								
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	MARK	ED "C"			
• VIOLATIO			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
191	С		Ready to eat, potentially hazardous for	boc	lacking date ma	arking.	07/0	)9/2019
			Approved for prepackaged	pro	ducts only.			
Received by	(name and	title 1	printed):	Inspe	ected by (name and title pr	rinted):		
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Received by	(signature	):		Inspe	ected by (signature):			
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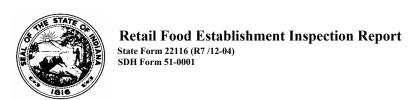
St Jo				Telephone Number	Date of Ins (mm/dd/yr		ID#
			mber and street, city, state, zip code)	812-963-9310	07/10	/2019	11337
			el Rd., EVANSVILLE, IN, 47720	<pre>(<redacted></redacted></pre>			
Owner St Joe	e Inn I	nc		Purpose:  Routine	Follow-uj		se Date 20/2019
Owner's A				Follow-up		of Violation	
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Complaint</td><td>l _ `</td><td>_</td><td>_</td></reda<>	cted>			Complaint	l _ `	_	_
Person in C				Pre-Operational	$\begin{bmatrix} C \end{bmatrix}$		0 R 0
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Responsible	e Person's	E-ma	ai .	HACCP	Menu Typ	e (See addi	tional page)
Certified F		er		Other (list)	1 2		<u>/4_5_</u>
• CRITICAI	L ITEMS AI	RE IDI	ENTIFIED 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
			No noted violation	ons.			
Received by				Inspected by (name and title p	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



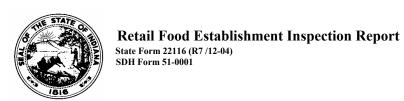
					1		
O'Bri		Sp	orts Bar & Grill	Telephone Number (812-401-4630)	Date of Ins (mm/dd/yr	·)	то# 11322
			mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	( ) Owner	06/26	3/2019	
Owner			ts Bar & Grill	Purpose:	Follow-u		se Date 08/2019
Owner's Ac				Follow-up	Summary	of Violation	us.
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Complaint</td><td>-</td><td></td><td>_</td></reda<>	cted>			Complaint	-		_
Person in C					$_{\rm c}$ 1		$3_{\rm R}0$
<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 Tvi	oe (See addi	tional page)
•				НАССР			
Certified Fo		er		Other (list)	102	<u></u>	<u>)</u> 4 <u>O</u> 5 <u>O</u>
• CRITICAL	ITEMS AR	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATEL	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
291	NC		Establishment lacking sanitizer cor	ncentration test str	ips.	06/2	28/2019
324	С		Water at hand washing sinks not reaching required tem	nperature of 100 degrees fa	hrenheit.	06/2	28/2019
218	NC		Reach in cooler/prep table door seal	in need of replace	ment.	07/0	05/2019
234	NC		Improper storage of utensil bet	tween equipment.		Co	rrected
Received by	(name and	l title :	printed):	Inspected by (name and title p	rinted).		
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Received by				Inspected by (signature):			
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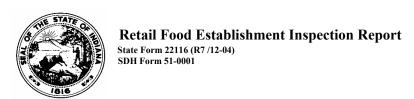
Establishm		_		Telephone Number	Date of Inspec (mm/dd/yr)	ction	ID#
Rally	s #5	8		812-425-8119	06/28/2	010	11276
			mber and street, city, state, zip code)	<pre></pre>	00/20/2	.019	
1201 I	E Virg	jini	a St., Evansville, IN, 47711	<re><redacted></redacted></re>			
Owner			. ,	Purpose:	Follow-up		se Date
JVCR.		OCI	ates	<b>✓</b> Routine	No	07/	08/2019
Owner's A				Follow-up	Summary of	Violation	18:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>1</td><td>1</td></reda<>				Complaint	$\cap$	1	1
Person in C	0			Pre-Operational	$_{\rm C}$	NC_1	RI
Responsible			:1	Temporary	Menu Type (	Caa addi	tional nace)
Kesponsibio	e rerson's	c-ilia	п	НАССР	Menu Type (	see aaan	ionai page)
Certified F	ood Handle	er		Other (list)	1(),(	$)_{3}$	$)_4\bigcirc_5\bigcirc$
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		F IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MADKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative				orrected By
430	NC	R	Replace ceiling tiles with washa	ble, coated surface	<del>)</del> .	07/1	12/2019
Received by		_		Inspected by (name and title p	rinted):		
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Received by	(signature)	):		Inspected by (signature):			
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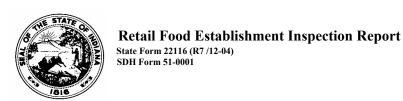
Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#
Papa	Johr	าร		812-477-7700	07/10/		11250
			mber and street, city, state, zip code)	( ) Owner	07/10/	2019	
303 N	Weir	<u>ıba</u>	ch Ave., Evansville, IN, 47711	<re><redacted></redacted></re>			
Owner	_ ,			Purpose:	Follow-up		se Date
		oris	ses Inc	<b>✓</b> Routine	No	07/	20/2019
Owner's Ac				Follow-up	Summary o	of Violation	ns:
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Person in C				Pre-Operational	$C_{\underline{\mathbf{U}}}$	NC_	$\mathcal{L}_{R}$
Responsible			9	Temporary	Manu Trini	(Can addi	tional page)
Kesponsible	e Person's	L-ma	Ш	НАССР	Menu Type	e (See aaai	tional page)
Certified Fo	ood Handle	er		Other (list)	$ _{1}\bigcirc_{2}($	7,(•	$)_4\bigcirc_5\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
					ID IN THE NA	DDATIVE	DELOWAS 6D2
Section#	C/NC		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	WIMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			то ве С	orrected By
			No noted violation	ons.			
							-
Dagain 11	(na	4;41	arinto d).	Imamostod by Grown 1991	minto d).		
Received by				Inspected by (name and title p < redacted>	rintea):		
Received by							
keceived by	(signature	).		Inspected by (signature):			
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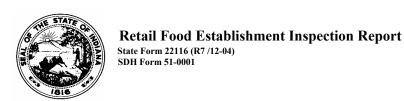
Establishmo PaPa		ne		Telephone Number	Date of Insp (mm/dd/yr)		ID# 11249
			mber and street, city, state, zip code)	812-423-7272	06/24	/2019	11249
			Expressway, Evansville, IN, 47712	' <redacted></redacted>			
Owner	Entorr	ric	ses Inc	Purpose:	Follow-up		se Date 04/2019
		טווכ	962 HIC	Routine			
Owner's Ad				Follow-up	Summary		
Person in C				Complaint	( )	NC_	l _ ()
<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	e Person's	E-ma	il	Temporary HACCP	Menu Typ	e (See addi	tional page)
Certified Fo	17			Other (list)	.0.0	$\bigcirc$	$\bigcirc$
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• CRITICAL	LITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
399	NC		Flooring tiles broken and in	need of repair.		07/0	05/2019
Received by				Inspected by (name and title properties)	rinted):		
Received by				Inspected by (signature):			
cc:			сс:		cc:		



Establishm					lephone Number	Date of In (mm/dd/y		ID#
PaPa				3)	12-425-2345	`	9/2019	11247
Establishm	ent Addres	s (nui	mber and street, city, state, zip code)		redacted>	01700	<i>,,</i> 2013	
	TIISL F	106	e, Evansville, IN, 47710				15.1	
		oris	ses Inc		rpose: Routine	Follow-u No		19/2019
Owner's Ac					Follow-up	Summary	of Violation	ns:
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Person in C					Pre-Operational	C	NC_	$R_{\rm R}$
Responsible				╀	Temporary	M T	pe <i>(See addi</i>	4:1 \
Responsible	e Person's	rmai	Ш		НАССР	Menu Ty	pe (see aaai	nonai page)
Certified Fo	ood Handle	er			Other (list)	$10^{\circ}$	$(\bullet)_3$	$)_4\bigcirc_5\bigcirc$
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• CRITICAL	L ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	IARK	ŒD "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AN	D IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
415	С		Fly activity pres	ent			07/0	09/2019
431	NC		Walls in pizza prep area in n	ee	d of cleaning.		07/0	09/2019
			·					
Received by	(name and	title p	,		ected by (name and title pr	rinted):	<u> </u>	
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Received by	(signature)	):		Insp	ected by (signature):			
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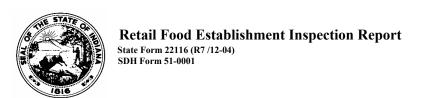
Establishme Nisbe					elephone Number	Date of In (mm/dd/yr		ID#
			mber and street, city, state, zip code)	1	312-963-9305	06/26	6/2019	11223
			tation Rd, Haubstadt, IN, 47639	_(<	<redacted></redacted>			
Owner Jim &	Beck	v F			rpose: Routine	Follow-u No		ne Date 06/2019
Owner's Ad		<del></del>		▝	Follow-up		of Violation	
<reda< td=""><td>cted&gt;</td><td></td><td></td><td></td><td>Complaint</td><td>Summary</td><td>_</td><td></td></reda<>	cted>				Complaint	Summary	_	
Person in C				⊨	Pre-Operational	$C_{\mathbf{U}}$	_ NC_	) <sub>B</sub> U
<reda< td=""><td>cted&gt;</td><td></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-mai	il	⊨	i - i	Menu Ty	pe <i>(See addii</i>	tional page)
					HACCP			
Certified Fo		er		_	Other (list)	1 <u>0</u> 2	<u>3</u>	<u>/405</u>
• CRITICAL	ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violation	ns				
							<u> </u>	
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Received by	(name and	title r	printed):	Insr	pected by (name and title pr	rinted):		
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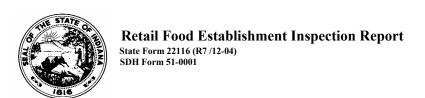
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Moto	mart	#4	202	812-473-0028	07/01/	2010	11218
			mber and street, city, state, zip code)	( ) Owner	07/01/	2019	
1900 N	N Gre	en	River Rd, Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner	)			Purpose:	Follow-up		se Date
FKG (				<b>✓</b> Routine	No	07/	11/2019
Owner's Ac	_			Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	C	NC_	$\frac{\mathbf{J}}{\mathbf{R}}$
Responsible			:1	Temporary	Monu Tyme	(Saa addi	tional page)
Kesponsibil	e i eison s	L-ma	ш	НАССР	Wichu Type	(see aaai	nonai page)
Certified F	ood Handle	er		Other (list)	$ _{1}\bigcirc_{2}($	•),(	$)_4\bigcirc_5\bigcirc$
						<u></u>	<u> </u>
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	TARKED "C"			
					ID IN THE NA	DD A TIME	DELOW AC "D"
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No violations				
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Received by	•	•	printed):	Inspected by (name and title p	rinted):		
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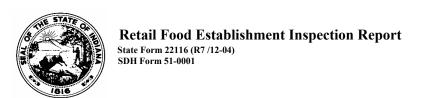
Establishm	ent Name			Telephone Number	Date of Insp	ection	ID#
		s ‡	<i>‡</i> 35457	812-425-5922	(mm/dd/yr)		11206
			mber and street, city, state, zip code)		07/02/	2019	11200
			Ave, Evansville, IN, 47711	<pre>(<redacted></redacted></pre>			
Owner	01.115		_	Purpose:	Follow-up		se Date
PAUL		<u>) E</u>	₹	<b>✓</b> Routine	No	07/	12/2019
Owner's Ac				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_	$R_{\rm R}$
Responsible			9	Temporary	М Т		tional page)
Responsible	e Person's	L-ma	II	НАССР	Menu Type	(See aaai	nonai page)
Certified F	ood Handle	er		Other (list)	$1 \bigcirc 2$	$)_3(\bullet)$	$)_{4}\bigcirc_{5}\bigcirc$
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• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
295	NC		Ice guard soiled in ice	machine.		07/0	02/2019
			Ğ				
		L					
Received by			printed):	Inspected by (name and title pr	rinted):		
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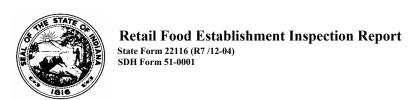
Establishmo		s t	#11365		Telephone Number	Date of In (mm/dd/yr		ть# 11200
			mber and street, city, state, zip code)		812-425-0635	06/24	/2019	11200
20 N I			EVANSVILLE, IN, 47711		<redacted></redacted>			
Owner P&L	ENTE	ΞRI	PRISES		urpose: Routine	Follow-u No		Date 04/2019
Owner's Ac					Follow-up	Summary	of Violation	ıs:
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Person in C	0			▔╠	Pre-Operational	$_{\rm C}$ ${\bf U}$	NC 4	$\frac{2}{R}$
<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-mai	il	F	НАССР	Menu Ty	pe (See addii	tional page)
~					Other (list)			$\bigcirc\bigcirc$
Certified Food Handler <redacted></redacted>						1 <u></u> 2	<u> </u>	<u> 405</u>
• CRITICAL	. ITEMS AR	Æ IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMN	S MAR	KED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE	SUMM	ARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
295	NC	R	Non-contact food surfaces of equip	ome	nt in need of clea	aning.	06/2	24/2019
430	NC	R	Floor in walk-in in ne	ed c	of repair.		07/1	12/2019
Received by	`		printed):		redacted>	rinted):		
Received by	(signature)	):		Ins	spected by (signature):			
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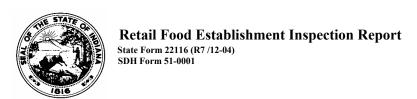
Establishm			_	Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Marx	Bar I	B (	Q	812-425-1616	06/26/	2010	11191
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	06/26/	2019	
3119 \	<u>W Ma</u>	ryl	and St., Evansville, IN, 47720	<re><redacted></redacted></re>			
Owner				Purpose:	Follow-up		se Date
Roy A		Х, ч	Jr.	<b>✓</b> Routine	No	07/	06/2019
Owner's A				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	C	NC_	$\mathcal{L}_{R}$
Responsible			9	Temporary	Manu Tyma	(Can addi	tional page)
Kesponsibio	e rerson's	c-ma	ш	НАССР	Menu Type	(see aaai	nonai page)
Certified F	ood Handle	er		Other (list)	1(),(	),(•	$)_4\bigcirc_5\bigcirc$
<redag< td=""><td></td><td><b>,</b>1</td><td></td><td></td><td></td><td><u></u></td><td><u>/4030</u></td></redag<>		<b>,</b> 1				<u></u>	<u>/4030</u>
		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AADVED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	-		
Section#	C/NC	R	Narrative			Fo Be Co	orrected By
177	С		Improper storage of ra	aw eggs.			
							_
Received by			printed):	Inspected by (name and title pr	rinted):		
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Received by	(signature)	):		Inspected by (signature):			
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Establishm			_	Telephone Number	Date of Insp	ection	ID#
Co-op	o Coi	unt	ry Corner	812-428-4593	(mm/dd/yr) 06/28/2	2040	11162
			mber and street, city, state, zip code)	( ) Owner	06/26/	2019	
	N St.J	os	eph Ave, Evansville, IN, 47720	<re><redacted></redacted></re>			
Owner			O DECOLIDATE	Purpose:	Follow-up		se Date
		( A	G RESOURCES	Routine	No	07/	08/2019
Owner's Ac				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	c_ <b>U</b>	NC_	R = R
Responsible			:1	Temporary	Manu Tyma	(Saa addi	tional page)
Kesponsible	e r erson s	L-IIIa	ш	НАССР	Wienu Type	(see addi	nonai page)
Certified F	ood Handle	er		Other (list)	$1_1\bigcirc_2($	•)3(	$)_4\bigcirc_5\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	TARKED "C"			
					ID IN THE NA	DD ATIVE	DELOW AC "D"
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	WIMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			10 ве С	orrected By
			No noted violation	ons.			_
Received by		_	printed):	Inspected by (name and title pr	rinted):		
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Establishm		۰	0.00	Telephone Number  Date of Inspection (mm/dd/yr)  10 #				
Lic's				812-422-4862	07/09	/2019	11085	
			mber and street, city, state, zip code) d Ave, Evansville, IN, 47711	<pre><redacted></redacted></pre>				
Owner	Dian	1011	u Ave, Evansville, IIV, 47711	Purpose:	Follow-up	Dalan	se Date	
Don S	Smith			Routine	No		19/2019	
Owner's A				Follow-up		of Violation		
<reda< td=""><td>cted&gt;</td><td>,</td><td></td><td>Complaint</td><td>-</td><td></td><td></td></reda<>	cted>	,		Complaint	-			
Person in C	Charge		_	Pre-Operational	$\begin{bmatrix} 1 \end{bmatrix}$	NC (		
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Responsible	e Person's	E-ma	il .	Temporary	Menu Typ	e <i>(See addi</i>	tional page)	
				HACCP				
Certified F	ood Handl	er		Other (list)	1 <u>U</u> 2		<u> 1405</u>	
• 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	
118	С	R	Food safety certificatio	n needed.		08/0	09/2019	
Received by	(name and	l title p	printed):	Inspected by (name and title pr	rinted):			
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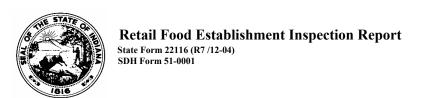
			<u> </u>				
Establishm		•4		Telephone Number	Date of Ins (mm/dd/yr		ID#
Quick				812-477-7588	06/27	/2019	11048
2508 \			mber and street, city, state, zip code) ton Ave., Evansville, IN, 47714				
Owner Divyal	Pate	J		Purpose:	Follow-uj		se Date /07/2019
Owner's A		1		Routine			
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td> </td><td>of Violation</td><td></td></reda<>				Follow-up		of Violation	
Person in C				Complaint	$\int_{\Omega} \int_{\Omega} dt$	NC_	) , ()
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Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	itional page)
				HACCP		$\bigcirc$ 6	
Certified Fo		er		Other (list)	1 <u>0</u> 2	$\bigcirc_3$	<u> 1405</u>
• CRITICAL	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 C	orrected By
			All violations from 6/20/20	19 corrected.			
Received by	,			Inspected by (name and title p < redacted>	rinted):		
Received by				Inspected by (signature):			
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Establishm	_			Telephone Number	Date of Ins		ID#
			Temple	812-423-4285	`	, /2019	11002
			mber and street, city, state, zip code)	<pre></pre>	07/01	/2019	
	nut S	t, E	Evansville, IN, 47708				
Owner	СПБІ	NIE	TEMPLE	Purpose:	Follow-u		se Date 711/2019
Owner's A		INE	TEMPLE	Routine	Yes		
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>Summary</td><td>of Violation</td><td></td></reda<>				Follow-up	Summary	of Violation	
Person in C				Complaint	1 1	1	$\frac{1}{R}$
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>. NC'</td><td> R_<del></del>_</td></reda<>				Pre-Operational	C	. NC'	R_ <del></del> _
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	se (See addi	tional page)
				НАССР		$\bigcirc$ G	
Certified F		er		Other (list)	1 <u></u> 2	$\bigcirc_3$	<u> 1405</u>
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• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATEI	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
187	С	R	Potentially hazardous food cold holding above 41 degrees.	. Using time as a public healt	h control.	Co	rrected
218	NC	R	Salad bar table is not maintaining the	ne proper tempera	ture.	07/0	02/2019
Received by	(name and	l title	printed):	Inspected by (name and title p	rinted):		
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Received by				Inspected by (signature):			
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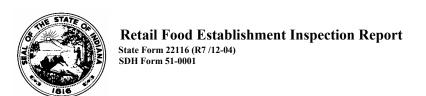
Establishmo Hadi		e .	Temple	Telephone Number (812-423-4285)	Date of Ins (mm/dd/yr	o)	11002
			mber and street, city, state, zip code)		07/02	/2019	11002
			Evansville, IN, 47708	<pre><redacted></redacted></pre>			
Owner	01.101	–	TEMBLE	Purpose:	Follow-uj		se Date
HADI	<u>SHRI</u>	ΝE	TEMPLE	Routine	No	07/	12/2019
Owner's Ac				<b>✓</b> Follow-up	Summary	of Violation	ns:
<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				Pre-Operational	$_{\rm C}$ U	NC (	$0_{R}$
<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	HACCP	Menu Typ	e (See addi	tional page)
				Other (list)			$\bigcap\bigcap$
Certified Fo		er			$1 \underline{\bigcirc 2}$	$\bigcirc 3 \bigcirc$	<u> 405</u>
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• CRITICAL	LITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			All violations from 7-1-2019	are corrected.			
Received by	(name and	title p		Inspected by (name and title pr	rinted):		
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Establishm		ari	an Haus	Telephone Number	Date of Ins (mm/dd/yr		ID#
			mber and street, city, state, zip code)	812-424-1420	06/27	/2019	10985
			lin St, Evansville, IN, 47712	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-uj		se Date
Jerry (	Chan	dle	r LLC	<b>✓</b> Routine	Yes	07/	07/2019
Owner's A				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>1</td><td>(</td><td>) (</td></reda<>				Complaint	1	(	) (
Person in C				Pre-Operational	C	NC (	$0_{R}$
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Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)
Certified F	ood Handl	0.10		Other (list)	100	$\bigcirc$	$)_{4}\bigcirc_{5}\bigcirc$
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		RE IDI	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	IARRATIVE	RELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
415	С		Live pest activity p	resent			11/2019
110			Live poor delivity pr	1000111.		017	11/2010
Received by			printed):	Inspected by (name and title properties)	rinted):		
Received by				Inspected by (signature):			
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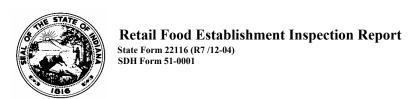
G.D. Ritzy's  Fatablishment Address (number and street, city, state, zip code) 601 N Green River Rd, EVANSVILLE, IN, 47715  Parpose: Position Charles   Follow-up   Robustup   R	Establishme		.' <u> </u>			lephone Number	Date of In (mm/dd/yr		ID#
Establishment Address (number and street, city, state, 2p code)  601 N Green River Rd, EVANSVILLE, IN, 47715    Owner					1		06/24	1/2019	10980
Dan Grunow/Chad Grunow   Routine   No   07/04/2019					(<	:redacted>			
Complain   Charge   Complain		runo	w/C	Chad Grunow	L				
Person in Charge   Complaint   Pre-Operational   Pre-Operationa					$\blacksquare$		Summary	of Violation	1S:
Person in Charge					$\equiv$	-	1		
Temporary   HACCP   HADDED		_			$\blacksquare$	-	$\mathbf{c}^{-1}$	NC 4	$\frac{2}{R}$
Responsible Person's I:-mail    Certified Food Handler   Credacted>   Certified Food Handler   Credacted Food Previous Inspections are Denoted in the "summary of Violations" and in the Narrative Below as "R"									
Certified Food Handler <	Responsible	e Person's	E-mai	il	=		Menu Ty	pe (See addii	tional page)
*CRUTICAL 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	G 101 15				$\vdash$		-		$\bigcirc$
VIOLATIONS) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"    Section#   C/NC   R			er					<u> </u>	<u>/405</u>
Section# C/NC R Hood vent in need of cleaning. 06/28/2019  199 NC Improper thawing of raw meat. 06/24/2019  246 C Employees not changing gloves as often as needed. Corrected	• CRITICAL	ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	ED "C"			
310 NC R Hood vent in need of cleaning. 06/28/2019 199 NC Improper thawing of raw meat. 06/24/2019 246 C Employees not changing gloves as often as needed. Corrected	• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AND	D IN THE N	IARRATIVE	BELOW AS "R"
199 NC Improper thawing of raw meat.  246 C Employees not changing gloves as often as needed.  Corrected  Corrected  Corrected  Improper thawing of raw meat.  Corrected  Corrected  Improper thawing of raw meat.  Improve the second of the second	Section#	C/NC	R	Narrative				To Be Co	orrected By
246 C Employees not changing gloves as often as needed. Corrected  Corrected  Inspected by (signature):  Inspected by (signature):	310	NC	R	Hood vent in need of	clea	aning.		06/2	28/2019
Received by (signature):  Inspected by (signature):  Inspected by (signature):  Inspected by (signature):	199	NC		Improper thawing of ra	aw	meat.		06/2	24/2019
<redacted>  Received by (signature):  Inspected by (signature):</redacted>	246	С		Employees not changing gloves	as	often as needed	Corrected		
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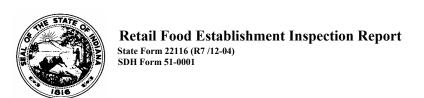
Establishm Evan		R	asketball Academy	Telephone Number (812-476-6654	Date of Ins (mm/dd/yr	)	то# 10956
			mber and street, city, state, zip code)		07/08	/2019	10930
2800	Kotte	r A	ve., EVANSVILLE, IN, 47715	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-u		se Date
Tracy	Kess	ler		<b>✓</b> Routine	Yes	07/	18/2019
Owner's A				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td>•</td><td></td><td>Complaint</td><td>1</td><td>(</td><td>) (</td></reda<>		•		Complaint	1	(	) (
Person in C				Pre-Operational	$\mathbf{C}$	NC_	J <sub>R</sub> U
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Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
Certified F		er		Other (list)	1 2		<u> 1405</u> 0
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• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(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				orrected By
415	С		Live pest activity p	rasant			10/2019
713			Live pest activity p	iesent.		017	10/2013
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Received by	(signature	):		Inspected by (signature):			
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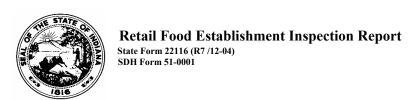
Establishm Evan		C	hristian Life Center	Telephone Number    812-423-9222			
Alexander of the second of the			mber and street, city, state, zip code)		07/05	/2019	10930
509 S	Kent	ucł	ky Ave, Evansville, IN, 47714	<pre><redacted></redacted></pre>			
Owner		<u> </u>	detien Life Oenten	Purpose:	Follow-up		se Date
4		اال	ristian Life Center	Routine	No	07/	15/2019
Owner's A				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	c_O	NC_	$0_{R}$
Responsible			:1	Temporary	Monu Tyr	o (Saa addi	tional page)
Kesponsion	e i eison s	L-IIIa	ш	HACCP	Wichu Typ	c (see aaai	iionai page)
Certified F	ood Handl	er		Other (list)	$10^{\circ}$	$\bigcirc$ 3 $\bigcirc$	$)_4\bigcirc_5\bigcirc$
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• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"	ļ		
• 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				Inspected by (name and title p < redacted>	rinted):		
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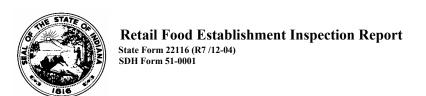
Establishm	O'S It	ss (nu	an Oven mber and street, city, state, zip code)	Telephone Number (812-868-8071	Date of Ins (mm/dd/yr 07/10		10898
13220	Darr	nst	adt Rd., Evansville, IN, 47725	' <redacted></redacted>			
Owner Andy	Guard	d		Purpose:	Follow-uj		se Date //20/2019
Owner's A				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_	$\mathcal{L}_{R}$
Responsible				Temporary	Monu Tyr	o (Saa addi	tional page)
Responsible	c i ci son s	L-ma	u	<b>П</b> НАССР	Wichu Typ	c (see aaai	nonui puge)
Certified Fo		er		Other (list)	$10^{2}$	<u>3</u>	$0_4 \bigcirc 5 \bigcirc$
• CRITICAI	. ITEMS AF	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
			No noted violation	ons.			
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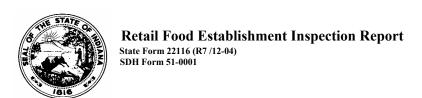
Establishm			_	Telephone Number	Date of Inspe	ection	ID#
Arby´	s #5′	132	2	(812-477-2888	(mm/dd/yr)	2040	10846
			mber and street, city, state, zip code)	()Owner	06/28/	2019	
1340 N	V Gre	en	River Rd, Evansville, IN, 47715	<pre>(<redacted></redacted></pre>			
Owner	_			Purpose:	Follow-up		se Date
		tau	rant Group	<b>✓</b> Routine	No	07/	08/2019
Owner's A				Follow-up	Summary o	f Violatio	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>_ 1</td><td>(</td><td>) ()</td></reda<>				Complaint	_ 1	(	) ()
Person in C				Pre-Operational	C	NC_	$\frac{1}{R}$
<reda< td=""><td></td><td></td><td>2</td><td>Temporary</td><td>M T</td><td>/C 11:</td><td>· 1</td></reda<>			2	Temporary	M T	/C 11:	· 1
Responsible	e Person's	L-ma	II.	НАССР	Menu Type	(See aaai	tional page)
Certified F	ood Handle	or		Other (list)	1(),(	),(•	),(),5()
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		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IADVED "C"			
					D DIE	DD A MEX 250	DELOW 10 //P*
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative				orrected By
129	С		Employees not washing hand	ls when required.		Co	rrected
Received by		_		Inspected by (name and title p	rinted):		
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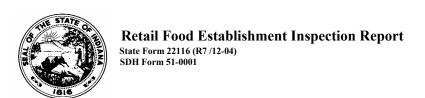
Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Cross	sroad	ls l	GA	812-867-0828		2040	13440
			mber and street, city, state, zip code)	() Owner	06/25/2	2019	
6401 N	I Gree	nri	ver Rd, Evansville, Indiana, 47725	' <redacted></redacted>			
Owner		_		Purpose:	Follow-up		se Date
		Fo	od Group	<b>✓</b> Routine	No	07/	05/2019
Owner's Ac				Follow-up	Summary of	f Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_	J <sub>R</sub> U
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Responsible	e Person's	L-ma	II.	НАССР	Menu Type	(See aaai	tional page)
Certified Fo	ood Handle	or		Other (list)	1()2(	),(•	),(),()
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
					D IN THE NA	DD ATIVE	DELOWAS 6D2
Section#	C/NC		PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			то ве С	orrected By
			No noted violation	ons.			
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Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Pand	a Ex <sub>l</sub>	ore	ess #2906	626-372-8203	06/27/2	2010	13770
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	06/27/	2019	
2445 I	<u>Mena</u>	rds	Drive, Evansville, IN, 47715	<redacted></redacted>			
Owner	_			Purpose:	Follow-up		se Date
Panda		res	s inc	<b>✓</b> Routine	No	07/	07/2019
Owner's A				Follow-up	Summary o	f Violation	ns:
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Responsible	e Person's	E-ma	ıı	НАССР	Menu Type	(See addi	tional page)
Certified F	ood Handle	nr.		Other (list)	$1_1\bigcirc_2$	$\bigcirc_3$	$)_4\bigcirc_5\bigcirc$
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		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MADIZED %C?			
						DD 4 7717 77	DELOW AC ((D)
	C/NC		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	UMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative	_		10 Be Co	orrected By
			No violations	S			
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Establishment Name Xpress Mart  Establishment Address (number and street, city, state, zip code) 1921 E. Franklin, Evansville, IN, 47711  Owner Amrinder J. Kaur  Owner's Address <i "c"<="" <i="" and="" are="" certified="" charge="" checklist="" columns="" complaint="" critical="" e-mail="" follow-up="" food="" handler="" identified="" in="" is="" items="" marked="" narrative="" percoperational="" person="" th="" the="" •=""><th colspan="4">00/27/2013</th></i>				00/27/2013			
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	JARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
345	С	IX.	Hand washing sink not	accessible			rrected
295	C		Food contact surfaces in ne				24/2019
200			1 dea comact danaced in he	ou or olourning.		00/2	1,2010
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Establishm		_		Telephone Number	Date of Insp (mm/dd/yr)		ID#
Comr	non (	Gro	ound Community Kitchen	812-425-7029	07/03/		13786
			mber and street, city, state, zip code) t, Evansville, IN, 47708	<pre>(<redacted></redacted></pre>	07/03/	2019	
Owner			.,	Purpose:	Follow-up	Releas	se Date
Peggy	/ Pirro	)		Routine	No		13/2019
Owner's A				Follow-up	Summary of	of Violation	ns:
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Person in C				Pre-Operational	$\mid_{\mathbf{C}} \mathbf{U} \mid$	NC_	J <sub>R</sub> U
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Responsible	e Person's	E-ma	il	HACCP	Menu Type	(See addi	tional page)
Certified F	ood Handl	nr.		Other (list)	$10^{\circ}$	$\bigcirc$	),(),()
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• CRITICAL	ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "C"	I		
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
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