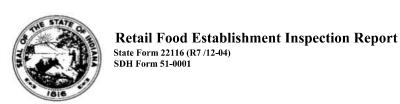
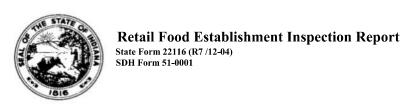


State Form 22116 (R7 /12-04) SDH Form 51-0001 Vanderburgh County Department of Health Telephone 812-435-2400 opt 3 Fax 812-435-5871

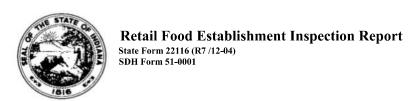
808 S Owner Cente Owner's Ac <redac< th=""><th>er of ent Addres E Thi r of H ddress cted&gt;</th><th>op</th><th>mber and street, city, state, z Evansville, IN,</th><th></th><th>(8) (<b>v</b></th><th>S12-402-5106  In the state of t</th><th>Follow-u</th><th>6/2019  Releas</th><th>23/2019</th></redac<>	er of ent Addres E Thi r of H ddress cted>	op	mber and street, city, state, z Evansville, IN,		(8) ( <b>v</b>	S12-402-5106  In the state of t	Follow-u	6/2019  Releas	23/2019
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Certified Fo		er				HACCP Other (list)	1 2	<u></u>	)4050
				Γ AND NARRATIVE COLUMNS M					
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMA Section#   C/NC   R   Narrative						ARY OF VIOLATIONS" AN	D IN THE N		orrected By
Section	C/IC	IX		No noted violation	ons			то ве се	Trected By
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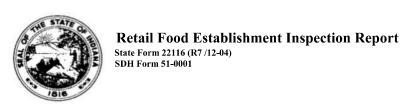
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			e Fun Factory  mber and street, city, state, zip code)		312-471-5867	08/16	/2019	11975	
			Dr. Ste B, Evansville, IN, 47715	<u> </u>	<redacted></redacted>				
Owner All Blo	wn U	рI	nflatable Rentals		rpose: Routine	Follow-uj		26/2019	
Owner's Ad		<u>.                                      </u>			Follow-up	Summary	of Violation	ns:	
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					Other (list)	$10^{2} \cdot 0^{3} \cdot 0^{4} \cdot 0^{5} \cdot 0^{4}$			
Certified Fo		er			Other (list)	1 2	<u> </u>	<u>/4\( 5\) </u>	
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMN      VIOLATION(S) DEBEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE					ŒD "C"				
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				To Be Co	orrected By	
			No violations	<b>;</b>					
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Establishm		Sr	oorts Grill	Telephone Number	Date of Ins (mm/dd/yr	9)	11717	
			mber and street, city, state, zip code)	812-425-1912	08/14	/2019	''''	
			e, Evansville, IN, 47713	<pre><redacted></redacted></pre>				
Owner Oscar	Vele	7		Purpose:  ✓ Routine	Follow-uj		se Date 24/2019	
Owner's Ac						-		
<reda< td=""><td></td><td></td><td></td><td>Follow-up Complaint</td><td>Summary</td><td>of Violatio</td><td></td></reda<>				Follow-up Complaint	Summary	of Violatio		
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Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)	
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• CRITICAL	ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	AARKED "C"				
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Section# C/NC R Narrative						To Be Co	orrected By	
344	С		Hand washing sink not	accessible.		Co	rrected	
347 NC Hand drying provisions not pro								
295	NC		lce guard soiled in ice	machine.		Co	rrected	
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Establishmen Pana		h	ys Take N Bake	Telephone Number	Date of Insp (mm/dd/yr)		то# 11614
				812-491-7272	08/16/	2019	11014
			t Dr Suite C, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
Owner	`rioo			Purpose:	Follow-up		se Date
Chad G				<b>√</b> Routine	No	UO/	26/2019
Owner's Add				Follow-up	Summary of	of Violation	ns:
Person in Cha				Complaint	$\cap$	(	) ()
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Responsible F		E-ma	il	Temporary	Menu Type	e (See addi	tional page)
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1		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATION	(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE NA	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by (r				Inspected by (name and title properties)	rinted):		
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Establishmo 324 N Owner	d Ca ent Addres W Six	ss (nu <b><th< b=""></th<></b>	g Shelter  mber and street, city, state, zip code) St., EVANSVILLE, IN, 477	08	Telephone Number (812-426-9960 ( <redacted> Purpose:</redacted>	Follow-u	r) 8/2019 p Releas	ID# 11419 e Date		
		<del>ااا</del>	NG SERVICES		<b>√</b> Routine	No	08/	23/2019		
Owner's Ad					Follow-up	Summary	of Violation	is:		
Person in C					Complaint	. 0	NC_ (	) _ ()		
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Responsible	e Person's	E-ma	il		Temporary	Menu Ty	Menu Type (See additional page)			
					HACCP Other (list)	1 2 3 4 5				
Certified Fo		er				1 <u></u> 2	<u>3</u>	<u> 405</u>		
• CRITICAL	ITEMS AF	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLU	UMNS M	ARKED "C"					
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN T	HE "SUN	MMARY OF VIOLATIONS" AN	D IN THE N	NARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrati	ive			To Be Co	rrected By		
			No noted vi	olatic	ons.					
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Received by	(signature)	):			Inspected by (signature):					
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State Form 22116 (R7 /12-04) SDH Form 51-0001 Vanderburgh County Department of Health Telephone 812-435-2400 opt 3 Fax 812-435-5871

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Los B		S		812-464-3163	(mm/dd/yr	9)	11103	
			mber and street, city, state, zip code)		08/15	/2019	11100	
4630 V	V Lloy	d E	xpressway, Evansville, IN, 47712	' <redacted></redacted>				
Owner				Purpose:	Follow-uj		se Date	
Los Bi	ravos	Ind		Routine	No	08/	25/2019	
Owner's Ac				✓ Follow-up	Summary	of Violation	ns:	
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			NAMES OF THE OWN OWN OF THE OWN	LA DAZED ((CIII				
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M					
• VIOLATIO			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N			
Section#	C/NC	R	Narrative			To Be Co	orrected By	
			All violations from 8-6-2019 v	were corrected.				
Received by				Inspected by (name and title p	rinted):			
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State Form 22116 (R7 /12-04) SDH Form 51-0001

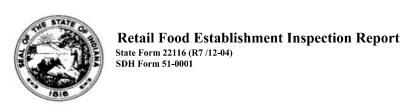
Vanderburgh County Department of Health Telephone 812-435-2400 opt 3 Fax 812-435-5871

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Establishm		۸ ۱۱ .		Telephone Number	Date of Ins (mm/dd/yr		ID#	
Gaso			3	812-471-5764	•	/2019	10981	
			mber and street, city, state, zip code)	<pre><redacted></redacted></pre>	00/10	72010		
Owner	mers	เสเ	e Dr, Evansville, IN, 47715		т.н.	I p.1	se Date	
Muhai	mmed	ł R	aza	Purpose:  ✓ Routine	Follow-up		26/2019	
Owner's A			9.26	Follow-up		of Violation		
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Certified For		er			1 2	<u> </u>	<u> </u>	
		E 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	
431	NC		Walk in cooler fans in nee	ed of cleaning.		08/	16/2019	
177	С		PHF in walk in cooler not stored 6	_	or.	Corrected		
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Received by	(signature)	):		Inspected by (signature):				
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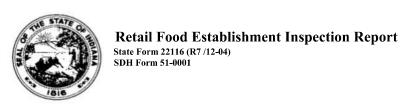


State Form 22116 (R7 /12-04) SDH Form 51-0001 Vanderburgh County Department of Health Telephone 812-435-2400 opt 3 Fax 812-435-5871

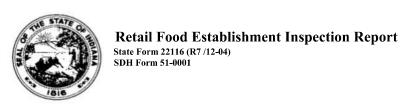
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	arro			812-421-1986	08/15		10941
			mber and street, city, state, zip code)	' <redacted></redacted>	00/10/	72010	
	Sonr	าเล	g Ave, Evansville, IN, 47712				
Owner	_			Purpose:	Follow-up		se Date
Andre		rea	<del>1</del>	Routine	No	08/	25/2019
Owner's A				<b>√</b> Follow-up	Summary	of Violatio	ns:
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• CRITICAL	L ITEMS AF	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
Sections	Chic		All violations from 8-9-2019	wore corrected		TO BC C.	Miceted By
			All violations from 6-9-2019	were corrected.			
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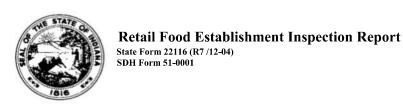
Establishme	laya ent Addres	s (nu	od Mart  mber and street, city, state, zip code) ton Ave., Evansville, IN, 47715	(812-477-6853) ( <redacted></redacted>	Date of Ins (mm/dd/yr 08/15		10932		
Owner Maher	ndra A	\dr	nikari	Purpose:  Routine	Follow-u		e Date <b>25/2019</b>		
Owner's Ac				Follow-up		of Violation			
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Person in C				Complaint	( )	NG	$\lfloor R \rfloor$		
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				НАССР					
Certified Fo		er		Other (list)	1 2	<u>3</u>	) <sub>4</sub> <u>0</u> 5 <u>0</u>		
• 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 "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative			To Be Co	rrected By		
431	NC	R	Floors and walls in need of cle	aning near stove.		08/1	6/2019		
				U					
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Establishm 600 N Owner	no's ent Addre Weir	ss (nu 1ba	zza #2570  nber and street, city, state, zip code)  ch Ave., Evansville, IN, 4771	(8 1 Pt	elephone Number 312-473-1011 ) Owner  urpose:	Follow-u	2/2019 P Releas	10926 10926 se Date
		IZZ	ZA, INC		Routine	No		22/2019
Owner's A		,		L	Follow-up	Summary	of Violation	is:
Person in C				┸	_Complaint	$\cap$	(	$0_{R}$
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Responsible			I	┺	Temporary	Menu Tyj	oe (See addi	tional page)
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Certified F	ood Handl	er		1	Other (list)	1 <u>0</u> 2	<u>3</u>	<u>)4</u> 050
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted viola	tions	<b>3</b> .			
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			zza #2578		812-473-3383	08/12/		10925		
			nber and street, city, state, zip code) ach Ave., Evansville, IN	<i>4</i> 7711	( ) Owner	00/12/	2013			
Owner	J VVCI	1100	den Ave., Evansvine, nv	, 7/////	Purpose:	Follow-up	Releas	se Date		
	LE P	IZZ	ZA, INC		√ Routine	No		22/2019		
Owner's A					Follow-up	Summary of	of Violation	ns:		
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Person in C					Pre-Operational	$_{\rm C}$ U		$\frac{0}{R}$		
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Responsible	e Person's	E-ma	il		HACCP	Menu Type	e (See addi	tional page)		
Certified For		er			Other (list)	1 <u></u> 2		<u> 1405</u>		
• CRITICAL	LITEMS AF	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIV	E COLUMNS M	лакер "С"					
• VIOLATIO	* *	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTE	ED 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		
			No note	ed violation	ons.					
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Dairy				812-422-9341	08/12	/2019	10894	
			nber and street, city, state, zip code) a St., Evansville, IN, 47711	' <redacted></redacted>	00,12	,20.0		
Owner MIKE	SC111	$\cap$	22	Purpose:	Follow-uj		se Date 22/2019	
Owner's A			33	√Routine				
<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	$\begin{bmatrix} 2 \\ 1 \end{bmatrix}$	NC_	l "()	
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Responsible	e Person's	E-mai	l	Temporary	Menu Typ	e (See addi	tional page)	
				HACCP				
Certified For		er		Other (list)	1 2	<u>3</u>	<u> 1405</u>	
• CRITICAL	. ITEMS AF	E IDE	NTIFIED 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	
422	NC		Employee items not stored in	designated area.		Co	rrected	
Received by		_		Inspected by (name and title properties)	rinted):			
Received by	(signature)	):		Inspected by (signature):				
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