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• VIOLATIC	D IN THE N	ARRATIVE	BELOW AS "R"						
Section#		To Be Corrected By							
192							08/20/2019		
344	С		Hand sink obstrue			08/20/2019			
416	NC		Removal needed of de	ead pests.		08/20/2019			
295	NC			Drink dispenser nozzles in need of cleaning.					
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	z N S ent Address Bnvl- Warg Idress Cted> harge Cted> e Person's	el	mber and street, city, state, z 1 Rd, Evansvill		(8) (lephone Number 12-867-7783 <redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 09/ of Violation NC_	01/2019
				F AND NARRATIVE COLUMNS N ONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
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Establishme 601 E B Owner PIZZA Owner's Ad <redat Person in C <redat Responsible</redat </redat 	A HU ent Address oonville ddress cted> harge cted> Person's	E-ma	#316695 nber and street, city, state, zip co ew Harmony Rd, Eva F AMERICA LLC	ansville, IN, 47725	Telephone Number (812-867-8540 (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary	p Releas 09/ 09/ of Violatior	01/2019
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• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIST	AND NARRATIVE COLUMNS N	IARKED "C"			
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Section#	C/NC	R		Narrative				orrected By
344 C R Hand washing sink not accessible.								rrected
346	NC			soap not provided a			Corrected	
347	347 NC Hand drying provisions not provided at hand sinks.						Co	rrected
295	С		Ice dispe	enser at self service	e station soiled.		08/2	23/2019
411	NC		Ina	adequate lighting in	n walk in.		08/3	30/2019
118	С		Establishm	nent lacking certified	d food employee.		11/3	30/2019
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Establishme 555 Te Owner	ate A ent Address ennis Acqu Idress cted> harge cted> e Person's	s (nu La Iisi [†] E-ma	letic Club mber and street, city, state, z ne, Evansville tion Co LLC		Telephone Number (812-479-3111 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	с_ 0) /2019 P Releas 09/ of Violation NC e (See addit	02/2019
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Sonic Drive-In #111 Establishment Address (number and street, city, state, zip code)	(812-476-7730	(mm/dd/yi 08/21) /2019	11604	
3433 N Green River Rd, Evansville, IN, 47715	<pre>(<redacted>)</redacted></pre>				
Sonic Drive-In of Evansville Inc	Purpose:	Follow-u Yes		^{e Date} 31/2019	
Owner's Address <redacted></redacted>	Follow-up	=	of Violation		
Person in Charge	Complaint	_ 1		2 _R 1	
<redacted></redacted>	Pre-Operational	C	NC	<u> </u>	
Responsible Person's E-mail	Temporary HACCP	Menu Tyj	oe (See addit	ional page)	
	Other (list)	\cap			
Certified Food Handler <redacted></redacted>		$1 \underline{\bigcup} 2$		<u>4050</u>	
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"				
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section# C/NC R Narrative				rrected By	
430 NC Light shield in walk in freezer					
431 NC Walls at three compartment sink			08/2	21/2019	
345 C R Hand sink being used for purpose o	ther than hand was	hing.	Coi	rected	
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Section#	C/NC	R		Narrative			To Be Co	rrected By
344	С		Hand sink used f	or other purposes of	ther than hand was	shing.	09/1	3/2019
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			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUM FROM PREVIOUS INSPECTIONS ARE DENOTED IN TH			D IN THF N	ARRATIVE	RELOW AS "P"
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Establishme 1500 I Owner	on Fo ent Address N Bur n Foc Idress Cted> harge Cted> e Person's	ss (nu Kha Dd	d Service Store LLC nber and street, city, state, zip code) ardt Rd, Evansville, IN, 477 Service Store LLC	'15	Telephone Number (812-473-0096 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 3/2019 p Releas) _R 0
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218	NC	R	Repair fans & condensation	To Be Corrected By ion in walk-in. 08/23/2019				
324	C		Prep sink in need o	08/23/2019				
411	NC		Increase lighting in		23/2019			
200	С		Improper use of 3 compartmen	Co	rrected			
431	NC	R		Kitchen floors & walls in need of cleaning.				
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• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NAR							ARRATIVE	BELOW AS "R"
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	UCKS ent Addres	s (nu	728 mber and street, city, state, zip code) River Rd, EVANSVILLE, IN, 47715	Telephone Number (812-473-4510 (<redacted></redacted>		^{r)})/2019	id# 11307	
owner Schnu	icks N	/lar	kets Inc	Purpose: Routine	Follow-u	p Releas	^{e Date} 30/2019	
Owner's Ac	ldress			Follow-up	Summarv	of Violatior		
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Person in C				Pre-Operational	с_ ∠	NC	<u>R_</u>	
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Responsible	e rerson s	c-ma	11	HACCP				
Certified Fo		er		Other (list)	1 <u>02</u>	<u></u> 3	<u>4050</u>	
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
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Section#	C/NC	R	Narrative			To Be Co	orrected By	
295	С		Ice machine in Seafood departmen	08/2	20/2019			
294	С		Sanitizer concentration for wiping clothes in s	anitizer concentration for wiping clothes in seafood department too weak.				
347	NC		Hand washing sinks at deli department kitchen and se	and washing sinks at deli department kitchen and service counter lacking paper towels				
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Establishme 905 No Owner Pie Pa Owner's Ad <redac Person in C <redac Responsible</redac </redac 	an R ent Address orth F an LL(ddress cted> harge cted> Person's	s (nui Par C.	taurant and E mber and street, city, state, z k Dr, Evansvill	zip code)	(Ø (✓ Pu ✓	Alephone Number 12-425-2261 Credacted> Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u NO Summary C	p Releas 08/ of Violatior) _R _0
Certified Fo		er			-	Other (list)	$1 \underline{\bigcup} 2$		<u>74050</u>
						D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R		Narrative				To Be Co	orrected By
				No noted violation	ons				
	Received by (name and title printed):			<r< td=""><td>redacted by (name and title pr</td><td>inted):</td><td></td><td></td></r<>	redacted by (name and title pr	inted):			
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Establishme	Garc ent Address N Gree Inc Idress Cted> harge Cted> e Person's	en E-ma	n #1022 ^{mber and street, city, state, zip code)} River Rd, Evansville, IN, 47715	Telephone Number (812-473-2903 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C) /2019 P Releas 08/ of Violation NC	30/2019 b: cional page)
		E IDF	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	IARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
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Establishme 2960 (Owner Mann Owner's Ac <redae Person in C <redae Responsible Certified Fe <redae< th=""><th>ent Address Cover Enter Idress Cted> harge Cted> Person's Dood Handle Cted></th><th>er E-mai</th><th></th><th></th><th>Telephone Number (812-477-7041 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>Follow-u No Summary C</th><th>) /2019 P Releas 09/ of Violation NC</th><th>02/2019 bs: R tional page)</th></redae<></redae </redae 	ent Address Cover Enter Idress Cted> harge Cted> Person's Dood Handle Cted>	er E-mai			Telephone Number (812-477-7041 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u No Summary C) /2019 P Releas 09/ of Violation NC	02/2019 bs: R tional page)
				ONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
				No noted violation	ons			v
					5115.			
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Establishme 999 E Owner IVan C Owner's Ac <redae Person in C <redae Responsible</redae </redae 	onald ent Address Mt. P Carvaj Idress Cted> harge Cted> e Person's	s (nui lea al	#20552 mber and street, city, state, zip code) asant Rd, Evansville, IN, 47725	Telephone Number (812-867-9003 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Gemporary HACCP Other (list)</redacted>	Follow-u NO Summary C	b) b/2019 P Releas 09/ of Violation NC	02/2019
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M		D IN THE N	ARRATIVE	BELOW AS "R"
		R	Narrative				
Section#	C/NC	ĸ		waad o f alaaning			rrected By
431	NC		Fan casing & dish machine in	& dish machine in need of cleaning.			
Received by	(name and	title r	printed):	Inspected by (name and title p	rinted).		
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Establishme 3704 F Owner PAUL Owner's Ac <redac Person in C <redac Responsible Certified Fo <redac< th=""><th>onald ent Addres First A SNIC Idress Cted> harge Cted> Person's ood Handle</th><th>s (nun AVE DEF E-mai</th><th>1</th><th>N, 47710</th><th>8 V Put V</th><th>ephone Number 12-422-8005 redacted> roose: Routine Follow-up Complaint Pre-Operational Femporary HACCP Other (list)</th><th>Follow-u Yes Summary C_2</th><th>p Releas 08/ of Violatior</th><th>31/2019 </th></redac<></redac </redac 	onald ent Addres First A SNIC Idress Cted> harge Cted> Person's ood Handle	s (nun AVE DEF E-mai	1	N, 47710	8 V Put V	ephone Number 12-422-8005 redacted> roose: Routine Follow-up Complaint Pre-Operational Femporary HACCP Other (list)	Follow-u Yes Summary C_2	p Releas 08/ of Violatior	31/2019 	
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NA							ARRATIVE	BELOW AS "R"		
Section#	C/NC	R		Narrative				To Be Co	rrected By	
324 C R Two hand washing sinks i				To Be Corrected B n need of repair. 08/21/2019						
129	C			Employee not washing hands between change of duties.					Corrected	
232	NC			Drink conveyor belt in need of cleaning.					1/2019	
202	110		Dillik						. 1/2010	
Received by		-	printed):			ected by (name and title predacted>	rinted):			
	Received by (signature):					ected by (signature):				
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3301 I Owner CANT Owner's Ad <redat Person in C <redat Responsible Certified Fo <redat< th=""><th>AXX C ent Address MaXX EEN Idress Cted> harge Cted> Person's Person's</th><th>s (nun Rc Se E-mai</th><th>nber and street, city, state, zip code) I, EVANSVILLE, IN, 477 rvice Company</th><th colspan="6">VANSVILLE, IN, 47711 Purpose: Follow-u</th></redat<></redat </redat 	AXX C ent Address MaXX EEN Idress Cted> harge Cted> Person's Person's	s (nun Rc Se E-mai	nber and street, city, state, zip code) I, EVANSVILLE, IN, 477 rvice Company	VANSVILLE, IN, 47711 Purpose: Follow-u					
						D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Na	rrative			To Be Co	orrected By	
324						08/2	23/2019		
024	<u> </u>	1 \		need o			00/2	0/2010	
Received by		-	printed):		Inspected by (name and title p <redacted></redacted>	rinted):			
Received by	(signature)):			Inspected by (signature):				
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Establishme 559 N Owner	k E C ent Address Gree ENTE Idress Cted> harge Cted> e Person's	en F RT	eese's #60 mber and street, city, state, zip code) River Rd, Evansville, IN, 47715 CAINMENT INC	Telephone Number (812-473-4262 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) /2019 P Releas 08/ 06 Violation NC	31/2019
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
		_	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUP	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
Received by	acteo	d>		Inspected by (name and title pr <redacted></redacted>	rinted):		
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4400 F Owner Carrol Owner's Ac <redat Person in C <redat Responsible Certified Fo <redat< th=""><th>er Kir ent Addres First A s, LLO Idress Cted> harge Cted> Person's Person's</th><th>s (nun AVE C</th><th>mber and street, city, state, z</th><th>N, 47710</th><th>Telephone Number (812-426-0303 (<redational Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redational </th><th>Follow-u NO Summary C</th><th>r) /2019 p Releas 08/ of Violatior</th><th>31/2019 </th></redat<></redat </redat 	er Kir ent Addres First A s, LLO Idress Cted> harge Cted> Person's Person's	s (nun AVE C	mber and street, city, state, z	N, 47710	Telephone Number (812-426-0303 (<redational Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redational 	Follow-u NO Summary C	r) /2019 p Releas 08/ of Violatior	31/2019
				T AND NARRATIVE COLUMNS N IONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
430	NC	R	Re	eplace/repair broken	floor tiles			20/2019
700	110	1 \					03/2	-0/2010
Received by			printed):		Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature)):			Inspected by (signature):			
сс:				cc:		cc:		



727 N Owner Krispy Owner's Ac <redac Person in C <redac Responsible Certified Fo <redac< th=""><th>y Kre ent Addres Burk Kren Idress cted> harge cted> Person's ood Handle cted></th><th>s (nun hai ne E-mai</th><th>nber and street, city, state, zip odt Rd, Evansvi Doughnut Corp</th><th>lle, IN, 47715 poration</th><th>Telephone Number (812-475-8419 (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>Follow-u NO Summary C</th><th>) /2019 P Releas 08/ of Violatior NC_</th><th>30/2019 ^{18:}</th></redac<></redac </redac 	y Kre ent Addres Burk Kren Idress cted> harge cted> Person's ood Handle cted>	s (nun hai ne E-mai	nber and street, city, state, zip odt Rd, Evansvi Doughnut Corp	lle, IN, 47715 poration	Telephone Number (812-475-8419 (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C) /2019 P Releas 08/ of Violatior NC_	30/2019 ^{18:}
				AND NARRATIVE COLUMNS M		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
				No noted violation	ne			-
					лю.			
Received by (name and title printed): <redacted></redacted>				Inspected by (name and title pr <redacted></redacted>	rinted):			
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Establishme 8401 1 Owner CHUB Owner's Ac <redae Person in C <redae Responsible Certified Fe <redae< th=""><th>ya R ent Address N Ker GU TR ddress cted> charge cted> e Person's pood Handle cted></th><th>s (num ntuc AC E-mai</th><th>taurant mber and street, city, state, zip code) cky Ave, Evansville, IN, 47725 DING INC il</th><th>Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u Yes Summary C_1</th><th>p Releas 09/2019</th><th>02/2019 </th></redae<></redae </redae 	ya R ent Address N Ker GU TR ddress cted> charge cted> e Person's pood Handle cted>	s (num ntuc AC E-mai	taurant mber and street, city, state, zip code) cky Ave, Evansville, IN, 47725 DING INC il	Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u Yes Summary C_1	p Releas 09/2019	02/2019
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUP		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
324	C	R		still in need of ror	oir		30/2019
324	U	Г	Plumbing under dish machine area	a suil in need of rep	ball.	00/3	0/2019
			Follow up from 7-31-19	inspection			
			<u> </u>				
			<u> </u>				
Dereinedter	(4:41		Turnente d'her (annue en ditide au			
Received by	(name and	uue p		Inspected by (name and title pr <redacted></redacted>	inted):		
Received by	(signature)):		Inspected by (signature):			
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1927 F	y Ga	s (nu	en ^{mber and street, city, state, zip code)} Ave., Evansville, IN, 47714	(8) (ephone Number 12-479-8933) Owner) /2019	id # 11007
^{Owner} Zu Xin	na Zha	and	r		·pose: Routine	Follow-u NO		^{e Date} 02/2019
Owner's Ad	_				Follow-up		of Violation	
<reda< td=""><td>cted></td><td></td><td></td><td></td><td>Complaint</td><td></td><td></td><td>_</td></reda<>	cted>				Complaint			_
Person in C					Pre-Operational	$_{\rm C}$ U	NC	R
<reda< td=""><td></td><td></td><td>-</td><td>H</td><td>remporary</td><td></td><td></td><td></td></reda<>			-	H	remporary			
Responsible	e Person's l	E-mai		F	НАССР	Menu Ty	e (See addii	ional page)
Certified Fo		er			Other (list)	1 <u>02</u>	<u></u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$
• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKI	ED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMAI	RY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	rrected By
431	NC	R	R Floor under equipment in need of cleaning.				08/2	9/2019
Received by		-		<r< td=""><td>ected by (name and title predacted></td><td>rinted):</td><td></td><td></td></r<>	ected by (name and title predacted>	rinted):		
Received by	(signature)):		Inspe	ected by (signature):			
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3526 I Owner Muhar Owner's Ac <redae Person in C <redae Responsible Certified Fo <redae< th=""><th>line / ent Addres nters nmec ddress cted> harge cted> Person's</th><th>ss (nui tati J R E-ma</th><th>nber and street, city, state, zip code Dr, Evansville, IN aza</th><th>N, 47715</th><th colspan="6">(812-471-5764 (mm/dd/yr) 47715 (<redacted> Purpose: Follow-up Routine No ✓ Follow-up Summary of Complaint Pre-Operational C Temporary Menu Type Other (list) 12(</redacted></th></redae<></redae </redae 	line / ent Addres nters nmec ddress cted> harge cted> Person's	ss (nui tati J R E-ma	nber and street, city, state, zip code Dr, Evansville, IN aza	N, 47715	(812-471-5764 (mm/dd/yr) 47715 (<redacted> Purpose: Follow-up Routine No ✓ Follow-up Summary of Complaint Pre-Operational C Temporary Menu Type Other (list) 12(</redacted>					
						D IN THE N	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R		Narrative			To Be Co	orrected By		
			All violation	ns from 8/16/20	19 corrected					
Received by			printed):		Inspected by (name and title pr <redacted></redacted>	rinted):				
Received by	(signature)):			Inspected by (signature):					
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Establishme	rnal (s (nu	der of Eagles #4 nber and street, city, state, zip cod ville Hwy, Evansvi	de)			») 8/2019	id# 10973
^{Owner} Frater	nal O	rde	er of Eagles		Purpose:	Follow-u NO		e Date 02/2019
Owner's Ad	ldress				Follow-up		of Violation	
<reda< td=""><td></td><td></td><td></td><td></td><td>Complaint</td><td></td><td>2</td><td></td></reda<>					Complaint		2	
Person in C					Pre-Operational	с <u></u> U	NC	<u>8</u> <u>R</u> 0
Responsible			1		Temporary	Menu Tyj	pe <i>addii</i>	tional
						\cap		
Certified Fo		er			Other (list)	$1 \underline{\bigcup} 2$		<u>′4050</u>
• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIST AND	D NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "					MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section# C/NC R Narrative							To Be Co	orrected By
347	NC		Lacking disposab	Lacking disposable towels for bar handwashing station.				
346	NC		Lacking soa	Lacking soap for bar handwashing station.				
410	NC		Lights over pizza c	Lights over pizza cooking and ice machine not shielded.				
Received by			printed):		Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):		Inspected by (signature):				
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Establishme				1700	Telephone Number Date of Inspection ID # (mm/dd/yr)			
) Schnucks #		(812-473-4510	· ·	/2019	10832
			mber and street, city, state, z River Rd, Evar	nsville, IN, 47715	<pre>(<redacted></redacted></pre>	00,20	/2010	
^{Owner} ADVAN	CED F	RE	SH CONCEPTS F	FRANCHISE CORP	Purpose: Routine	Follow-u Yes		^{e Date} 30/2019
Owner's Ad					Follow-up	Summary	of Violation	s:
<reda< td=""><td>cted></td><td></td><td></td><td></td><td>Complaint</td><td></td><td></td><td></td></reda<>	cted>				Complaint			
Person in C					Pre-Operational		1	
<reda< td=""><td></td><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>					Temporary			
Responsible	e Person's	E-ma	il		НАССР	Menu Typ	pe (See addii	ional page)
C. A.C. I.F.					Other (list)	\Box	\bigcirc	\bigcirc
Certified Fo		er				$1 \underline{\bigcirc 2}$	<u>U</u> 3 <u>U</u>	<u>4050</u>
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIS	T AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTI	ONS 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
257	NC		Working lacking thermo	meter to ensure attainment	and maintenance of prop	per food	08/2	20/2019
				temperature.				
				·				
Received by			printed):		Inspected by (name and title p <redacted></redacted>	rinted):		
	<redacted> Received by (signature):</redacted>				Inspected by (signature):			
Received by	(signature)	<i>.</i>			inspected by (signature):			
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	Pizz ent Addres Lloy n Der	s (nui d E nnii	mber and street, city, state, zip code) Expressway, Evansville, IN, 47715 ng	(812 (<re Purpos VRou Foll</re 	utine low-up) /2019 Releas 08/ of Violation	31/2019 ^{IS:}
Person in C	harge				mplaint -Operational	$_{\rm C}$ 0	NC	<u>R_</u> 0
<reda< td=""><td>cted></td><td></td><td></td><td></td><td>nporary</td><td></td><td></td><td></td></reda<>	cted>				nporary			
Responsible	e Person's l	E-mai	ii an		ССР	Menu Typ	e (See addii	ional page)
Certified Fo		er			ner (list)	1 <u>0</u> 2	<u></u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMN					"С"			
• VIOLATIC	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY	OF VIOLATIONS" ANI	D IN THE N	ARRATIVE	BELOW AS "R"
Section# C/NC R Narrative							To Be Co	orrected By
281	NC	Dish machine not dispensing sanitizer.					Co	rrected
Received by	(name and	title r	nrinted).	Inspecte	d by (name and title pr	inted):		
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Establishm	egov ent Addres Burk Ajitku ddress cted> harge cted> e Person's	ss (nu hai ma		15	Telephone Number (812-411-4380 (<redacted> Purpose: Vereconstruction Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u	r) /2019 P Releas 08/ 08/ of Violation NC_	$\frac{ID \#}{13801}$ $\frac{10 \times 10^{10}}{31/2019}$ $\frac{10 \times 10^{10}}{100}$ $\frac{10 \times 10^{10}}{100}$ $\frac{10 \times 10^{10}}{100}$ $\frac{10 \times 10^{10}}{100}$
			NTIFIED IN THE CHECKLIST AND NARRATIVE CO FROM PREVIOUS INSPECTIONS ARE DENOTED IN			D IN THE N	JARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narra	ative			To Be Co	orrected By
	No noted viola				ons.			
							-	
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Received by	Received by (signature):				Inspected by (signature):			
cc:			cc:			cc:		



Establishme	town ent Addres E. 8tl G LL(Idress cted> harge cted> e Person's	s (nui h S C	oodmart mber and street, city, state, z St., Evansville,		Telephone Number (812-602-3552 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) —</redacted>	Follow-u Yes Summary C_1	p Releas 0/2019 Releas 08/ 08/	2 <u></u> <u>1</u>	
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIS	T AND NARRATIVE COLUMNS M	IARKED "C"				
			FROM PREVIOUS INSPECTI	ONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N			
Section#	C/NC	R	F .	Narrative				orrected By	
187	C		Food not maintained at 41F or less.					Corrected	
218	NC	Б	Refrige	Refrigerator not maintaining 41F or less.				30/2019	
431	NC	R		Floors in need of cleaning.				9/2019	
Received by	(name and	title t	nrinted):		Inspected by (name and title p				
<pre>reda</pre>		-	printed):		<pre>Inspected by (name and title pr </pre>	rinted):			
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Establishm	et Wa ent Addres <u>N Cul</u> as Ca ddress cted> harge cted> Person's	E-mai		((P	elephone Number 317-401-9338 <redacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 09/ of Violation NC 0 p (See addia	01/2019 	
 CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R" 									
Section#	C/NC	R	Narrative	41	-		IUDEU	orrected By	
			No noted viola	tion	S.				
					Inspected by (name and title printed): <redacted></redacted>				
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	isanc ent Address Gree ii Cha ddress cted> cted> cted> cted> cted> cted> cted>	s (nur n F Ima		Telephone Number 812-602-3535 <redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO)/2019 P 08/ _ NC_	$\frac{10 \#}{13853}$ $\frac{30/2019}{2 R 2}$ $\frac{2 R 2}{1000}$	
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				DELOW AC 4D"	
• violatic Section#	DN(S) REPE	ATED R	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUN	MMARY OF VIOLATIONS" AF	ND IN THE P			
173	С	R	Narrative Improper storage of raw eggs in cooler.				To Be Corrected By 08/20/2019	
294	C		No sanitizer solution a	Corrected				
146	NC	R	Self serve food not l	08/20/2019				
413	NC		Door sweep in need of rep	08/30/2019				
<redacted></redacted>				<redacted></redacted>				
					•			



Establishment Name Catfish Willy's Establishment Address (number and street, city, state, zip code) 5724 E. Virginia St, Evansville, IN, 47715 Owner Angie Melvin Owner's Address <redacted> Person in Charge <redacted> Responsible Person's E-mail Certified Food Handler <redacted></redacted></redacted></redacted>						lephone Number 12-401-2233 <redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C) 5/2019 p Releas	02/2019 IS: R_0 ional page)
 CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R" 									
Section#		R		Narrative					
	C/NC	Л				atura antia dia 112 - 112 - 11	a ala in a		orrected By
294	С		Chemical sanitizer concentration below required strength in dish machine.				08/2	26/2019	
				Inspected by (name and title printed): <redacted></redacted>					
Received by (signature):					Insp	ected by (signature):			
cc:				cc:	cc:				