

Establishm 1021 Owner	v's - 1 ent Addres N. Bu CW 1 ddress cted> charge cted> e Person's	s (nui rkh Prc	Burkhardt ^{mber and street, city, state, z ardt, Evansvil operties LLC}		Telephone Number (812-602-5515 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C	p Releas 12/ of Violatior NC	05/2019
				T AND NARRATIVE COLUMNS M ONS ARE DENOTED IN THE "SU!		D IN THE N	ADDATIVE	DELOWAS "D"
		_	TROM TREVIOUS INSPECTI		WIMART OF VIOLATIONS AN	DINTIL		
Section#	C/NC	R		Narrative				orrected By
297	NC		Soda	a dispenser in lobby	area soiled		11/2	25/2019
Received by		-	printed):		Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature)):			Inspected by (signature):			
cc:				cc:		cc:		



Establishme	s Sh ent Addres	s (nu	u Shabu ^{mber and street, city, state, z} d, Evansville, I		^{Telephone Number} (812-471-8889 (<redacted></redacted>	Date of Ins (mm/dd/yr 11/25		ID # 13024
Owner			Shabu	·	Purpose:	Follow-uj NO		^{e Date} 05/2019
Owner's Ad					Follow-up	Summary	of Violation	IS:
<reda< td=""><td></td><td></td><td></td><td></td><td>Complaint</td><td></td><td>1</td><td>1</td></reda<>					Complaint		1	1
Person in C					Pre-Operational		NC	1
<reda< td=""><td></td><td></td><td>•1</td><td></td><td>Temporary</td><td>N T</td><td></td><td></td></reda<>			•1		Temporary	N T		
Responsible	Person's	E-ma	11		НАССР	Menu Typ	be (See addii	ional page)
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}_{5}$	
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS					IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTI	ONS ARE DENOTED IN THE "SUM	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
179	NC	R	Inadequate shield	ing for self dispensing	g sauces at custom	er line.	12/0)2/2019
			· ·	<u> </u>				
Received by			printed):		Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)):			Inspected by (signature):			
cc:				cc:		cc:		



	Bravo ent Addres Water ravos ddress cted> Charge cted> e Person's	ss (nu rfoi In E-ma		Telephone Number ⁽⁸¹²⁻⁴⁷⁴⁻⁹⁰⁷⁸⁾ ⁽ <redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) —</redacted>	Follow-u NO Summary C_1	p Releas 12/ of Violation NC	
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	MARKED "C"			
	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
294	С	R	Dish machine in the bar area not dispe	ensing chemical sa	nitizer.	11/2	26/2019
297	NC		Soda dispensing drink no	ozzles soiled.		11/2	26/2019
Received by				Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	/ (signature):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm 2126 Owner	clin S ent Addres W Fra Proper ddress cted> cted> cted> cted> cted> a Person's	ss (nu ank rtie	eet Tavern ^{mber and street, city, state, zip code)} din St, Evansville, IN, 47712 s LLC	(8) (V Pu V V	lephone Number 12-401-1313 <redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 7/2019 P Releas 12/ r of Violation NC	· ·
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative	—				orrected By
Section# C/NC R Narrative No noted viola							IDUC	Jiren Dy
				<u> </u>	•			
Received by				-	ected by (name and title pr edacted>	rinted):		
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943 N Owner Natas Owner's Ad <redat Person in C <redat Responsible Certified Fe <redat< th=""><th>tron ent Address orth F ha Go ddress cted> cted> cted> e Person's</th><th>Par Omo E-ma</th><th></th><th>Telephone Number (812-402-6500 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redacted></th><th>Follow-u NO Summary C_2</th><th>p Releas p Releas 12/ v of Violation NC_</th><th>$\frac{10 \#}{12133}$ se Date $\frac{06}{2019}$ ns: D R 1 <i>tional page</i> $\frac{1}{2}4050$</th></redat<></redat </redat 	tron ent Address orth F ha Go ddress cted> cted> cted> e Person's	Par Omo E-ma		Telephone Number (812-402-6500 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redacted>	Follow-u NO Summary C_2	p Releas p Releas 12/ v of Violation NC_	$\frac{10 \#}{12133}$ se Date $\frac{06}{2019}$ ns: D R 1 <i>tional page</i> $\frac{1}{2}4050$
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	ID IN THE N		
Section#	C/NC	R	Narrative	<u> </u>			orrected By
191	С	R	Items in walk-in not dat				rrected
171	С		Bare hand contact with rea	idy to eat food.		Co	rrected
						ļ	
	1						
Received by	v (name and	l title 1	printed):	Inspected by (name and title p	orinted):	<u>i</u>	
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Establishm 6636 Owner	ana's ent Addres Logar ana's ddress cted> Charge cted> cted> cted> cted>	ss (num Dr Mis E-mail	ar-B-Q aber and street, city, state, zip code) ; Evansville, IN, 47715 ssouri, LLC	Telephone Number ⁽ 812 ⁻ 401-992 ⁽ <redacted Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted 	Follow-u No Summar C	r) 5/2019 10 Releas 12/ y of Violation	<u>2</u> <u>R</u> <u>0</u>
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			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		AND IN THE	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
346	NC	K	Hand washing provisions not pr	rovided at bar ar	ea.		rrected
347	NC		Hand drying provisions not pro	ovided at bar are	a.	Co	rrected
Received by			inted):	Inspected by (name and tit)	• /		
Received by	(signature):		Inspected by (signature):			
cc:			cc:		cc:		



7801 ^{Owner}	s & N ent Addres BUSSI	ss (nu NG	mber and street, city, state, zip code) Dr, Evansville, IN, 47725	8) (elephone Number 312 ^E 423 ^m 1113) Owner	Follow-u	r) 5/2019 p Releas	ID # 11708	
Ayse		olik		~	Routine	No	12/	05/2019	
Owner's A					Follow-up	Summary	of Violation	ns:	
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Person in C					Pre-Operational			$) _{R} 0$	
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Responsible	e Person's	E-ma	11	HACCP Menu Type (See additional p					
Certified For		er			Other (list)	1 <u>0</u> 2	<u></u> 3	<u>)4</u> 050	
1		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	JARK	(ED "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	
			No noted violation	ons	6.				
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Establishm 5600 Owner BUTC Owner's Ad <redat Person in C <redat Responsible Certified Fe <redat< th=""><th>y Ker ent Addres Divisio H HA ddress cted> Cted> cted> e Person's</th><th>ss (nu DN NC E-ma</th><th>il</th><th>Telephone Number (812-473-8700 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>Follow-u NO Summary C</th><th>r) 5/2019 p Release 12/ v of Violation NC</th><th>$\frac{ID \#}{11648}$ se Date 05/2019 ns: $\frac{D}{R} = 0$ tional page) $\frac{1}{2} = 0$</th></redat<></redat </redat 	y Ker ent Addres Divisio H HA ddress cted> Cted> cted> e Person's	ss (nu DN NC E-ma	il	Telephone Number (812-473-8700 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 5/2019 p Release 12/ v of Violation NC	$\frac{ID \#}{11648}$ se Date 05/2019 ns: $\frac{D}{R} = 0$ tional page) $\frac{1}{2} = 0$
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	MARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Re C	orrected By
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				JNS.			
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Establishm		8 (China Bistro	Telephone Number (812-475-2888	ID# 11584			
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	(<redacted></redacted>	11/26	/2019		
	vogei	R	d, Evansville, IN, 47715					
^{Owner} TIAN				Purpose:	Follow-u NO		^{ne Date} 06/2019	
Owner's Ac				Follow-up Summary of Violations:				
<reda< td=""><td></td><td></td><td></td><td colspan="5">Complaint 53</td></reda<>				Complaint 5 3				
Person in C	0			Pre-Operational	$\begin{bmatrix} \underline{5} & \underline{NC} & \underline{3} \end{bmatrix}$			
Responsible			il	- Temporary	Menu Tvi	oe (See addi	tional page)	
P				НАССР				
Certified Fo		er		Other (list)	1 <u>02</u>	<u>()</u> 3) ₄ <u>0</u> 5 <u>0</u>	
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"								
• VIOLATIC	• 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 To Be Corrected By								
173	С	R	Improper storage of raw me	eat food items.		Co	rrected	
128	С	R	Using common cloth towels to dry ha	ands which is prohi	bited.	ited. 11/26/2019		
191	С	R	Lacking date marking for ready to eat foods with	in reach-in and walk-in	coolers.	Corrected		
441	С	R	Sanitizer concentration for wipir	ng cloths too strong] .	Corrected		
345	С		Hand washing sink also being used as a prep	aration sink in back pre	ep area.	11/2	26/2019	
291	NC		Facility lacking test strips for testing	sanitizer concentra	ation.	Corrected		
218	NC	R	Dish machine not reaching pro	per temperatures.		11/2	27/2019	
430	NC	R	Walk-in expansion framing has raw wood.			12/1	7/2019	
	Received by (name and title printed): <redacted> Inspected by (name and title printed): <redacted></redacted></redacted>							
	Received by (signature): Inspected by (signature):							
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Establishm Stock Establishm 4001 I Owner Audre Owner's Au <reda Person in C <reda Responsible</reda </reda 	ent Addres E Eich y Chr ddress cted> Charge cted>	isti	mber and street, city, state, zip code) Ave., EVANSVILLE, IN, 47715 e	Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP	Follow-u NO Summary C	p Releas 12/ r of Violation NC	ID # 11355 07/2019 hs: L
Certified F		er		Other (list)	$1 \underline{\bigcup} 2$		<u>1405</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	JARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
430	NC	R	Various areas of the premises	in need of repair			31/2019
100							///2010
Received by		- 1		Inspected by (name and title p	rinted):		
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5000 V Owner	ucks ent Address Vashir icks N iddress cted> charge cted> e Person's	is (nu ngt /lar E-ma	mber and street, city, state, zip code) on Ave, EVANSVILLE, IN, 47715 kets Inc	Telephone Number (812-473-0151 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_2	p Releas 12/ of Violation NC	ID # 11304 $ID = Date 05/2019$ $IS = R 3$ $Ional page = 0$ $Ional page = 0$	
1		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	AARKED "C"	1			
• VIOLATIC	ON(S) REPE	ATEE	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 C R Chicken chunks not maintaining a temperature				ĭ				
187	С	R	Several potentially hazardous food items not maint	tained at 41° Fahrenheit or less on Corrected				
			salad bar line).				
218	NC	R	Salad bar refrigeration in	need of repair		11/2	26/2019	
Received by		- 1	printed):	Inspected by (name and title p <redacted></redacted>	rinted):			
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Establishm 8215 Owner	ker B ent Address Eagle er Ba Idress Cted> Cted> Cted> cted cted> cted cted cted cted cted cted cted cted	rre	el Old Country Store #216 mber and street, city, state, zip code) ake Dr., Evansville, IN, 47715 I Old Country Store, Inc	Telephone Number (812-479-8788 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u Summary C	5) 5/2019 P Releas 12/ of Violation NC	
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N 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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5412 ^{Owner}	stick ent Address E Indi & Ka ddress cted> Charge cted> e Person's	ss (nu an rer	mber and street, city, state, zip code) a St, Evansville, IN, 47715 n Kung	(8) (lephone Number 12-473-5551 credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u Summary C1	r) 5/2019 p Releas 12/ r of Violation NC			
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	/ ARK	ED "C"					
• VIOLATIC	ON(S) REPE	ATEE	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		
204	С	R	Cooked chicken stored in ice with sta	th standing water. Removed.				Corrected		
					0					
Received by		-	printed):	-	ected by (name and title pr edacted>	rinted):				
Received by						Inspected by (signature):				
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Establishm	s Au ent Address E Fou Dodd ddress cted> cted> cted>	ss (nu urth	entic Foods mber and street, city, state, zip code) N St, EVANSVILLE, IN, 47708	Telephone Number (812-422-6667 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-u Yes Summary C_1	.) 5/2019 p Releas	<u>8</u> <u>R</u> <u>0</u>		
Certified Fo	cted>			Other (list)	1 <u>0</u> 2	<u>3</u>	<u>4</u> <u>0</u> 5 <u>0</u>		
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Section#	C/NC	R	Narrative				prrected By rrected		
415	С		Mice dropping observed in shelving front	Mice dropping observed in shelving front counter. Clean and monitor.					
416	NC		Two dead trapped mice in pantry. Dropp	ing present on pantr	y floor.	Corrected			
199	NC		Improper thawing of commercial Reduced Oxyger	n Packaged tuna. Frozen	product	Corrected			
			shall be removed from package before t	shall be removed from package before thawing as stated on label.					
218	NC		Tuna and egg storage refrigerator 45 F. Turned d	lown unit. Monitor 41 f an	d lower.	Со	rrected		
Received by		-		Inspected by (name and title printed): <redacted></redacted>					
Received by (signature):				Inspected by (signature):					
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Establishm	t Har ent Addres letro / I, LLC ddress Cted> charge cted> e Person's	ss (nu AVE	st Bread mber and street, city, state, zip code) e, Evansville, IN, 47715		lephone Number 12-476-4999 Complaint Pre-Operational Femporary HACCP Other (list)	Follow-u NO Summary C_) 5/2019 p Releas 12/ of Violation NC	ID # 10996 $e Date 06/2019$ Is: $P R 0$ $fional page)$ $4 0 5 0$
• CRITICAL	. ITEMS AF	RE ID	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"			
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violation	ons				
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216 N Owner	A Byte ent Address W Fo MAR ddress Cted> Cted> cted> cted> cted> cted> ood Handle	E-ma	mber and street, city, state, zip code) h St, Evansville, IN, 47708 N FLOORS INC		lephone Number 312-423-5113 <redacted> irpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 5/2019 P Releas 12/ of Violation NC	ID # 10867 e Date 05/2019 is: R_0 tional page) 4055		
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M							
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUP	MMA	ARY OF VIOLATIONS" AN	D IN THE N				
Section#	C/NC	R	Narrative	<u> </u>				orrected By		
295	NC		Stove top soile	op soiled.				11/27/2019		
Received by	·		· /	-	ected by (name and title pr edacted>	rinted):				
Received by				Inspected by (signature):						
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Establishment Name AFC SUSHI @ SCHNUC	Telephone Number	Date of Inspe (mm/dd/yr)	ID#				
Establishment Address (number and street, city, state, :		(812-473-0151	11/25/2	2019	10831		
5000 Washington Ave., EVANS	SVILLE, IN, 47715						
Owner ADVANCED FRESH CONCEPTS	FRANCHISE CORP	Purpose:	Follow-up NO		e Date 05/2019		
Owner's Address	Follow-up	Summary of	Violation	15:			
<redacted></redacted>	Complaint	\mathbf{O}	ſ				
Person in Charge	Pre-Operational	<u>с</u> <u></u>	$\underline{O} = \underbrace{O}_{NC} \underbrace{O}_{R} \underbrace{O}_{R}$				
Responsible Person's E-mail	Temporary	Menu Type (See additional page)					
Responsible rerson's E-man		НАССР	Menu Type				
Certified Food Handler <redacted></redacted>	Other (list)	$1 O_2 O_2 O_2 O_2 O_2 O_2 O_2 O_2 O_2 O_2$	<u></u> 3	$\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$			
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIS	ST AND NARRATIVE COLUMNS N	MARKED "C"					
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECT	IONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"		
Section# C/NC R	Narrative		<u></u>	fo Be Co	orrected By		
	No noted violati	ons.					
Received by (name and title printed):		Inspected by (name and title p <redacted></redacted>	rinted):				
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Establishm 6840 L Owner JOrge Owner's Ad <reda Person in C <reda Responsible</reda </reda 	s Dir ent Addres ogan <u>Mele</u> ddress cted> charge cted> e Person's	ss (nu Dri ndi		Telephone Number () Establishment (< redacted> Purpose: Purpose: Pollow-up Complaint Pre-Operational Temporary HACCP Other (list)	с_ 0) /2019 Releas 12/ of Violation NC_		
Certified Fo		CI			$1 \underline{\bigcirc 2}$		<u>/4030</u>	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M PFROM 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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Received by	(nome or -	titla	aristad).	Inspected by (name and title	rintad):			
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Establishm	ra Br ent Addres Pearl a, LL ddress cted> Cted> cted> cted> a Person's	E-ma	d #6108 mber and street, city, state, zip code) ., Evansville, IN, 47712		Alephone Number 12-250-7088 (redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C) 5/2019 p Releas 12/ of Violation 	ID # 14028 $ID = 0$ $ID = 0$ $IS = 0$
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARK	KED "C"			
			P 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
			No noted violation	ons				•
Received by				-	bected by (name and title pr redacted>	rinted):		
Received by	(signature):		Inspected by (signature):				
cc:			cc:		cc:			