

Establishme	Food ent Address S Gree Food Idress Cted> harge Cted> ood Handle	s (nur en St		Telephone Number (812-476-0716 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 12/ of Violatior NC_	_
• CRITICAL	ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	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
			No noted violation	ons.			
				Inspected by (name and title p <redacted></redacted>	rinted):		
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ltem #	C/NC	R		REMARKS	TO BE CORRECTED BY
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Establishm	work ashir ashir ashir anit adress cted> harge cted>	is (nui ngto a F		Telephone Number (812-424-2735 ( <redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary</redacted>	Follow-u NO Summary C	r) 5/2019 p Releas 12/	15/2019 
Certified Fo		er		HACCP Other (list)	102	<u>•</u> 3C	<u>)4</u> <u>0</u> 5 <u>0</u>
			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
			No noted violation	ons.			
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	ders		zza Too		Telephone Number (812-867-7172	Date of Ins (mm/dd/yr		<sup>ID #</sup> 11631
			mber and street, city, state, z 1 River Rd, Eval	<sup>iip code)</sup> ∩sville, IN, 47715	( <redacted></redacted>	12/00	/2013	
<sup>Owner</sup> Josep	h Sell	s			Purpose:	Follow-u NO		<sup>e Date</sup> 16/2019
Owner's Ad	ldress				Follow-up	Summarv	of Violation	15:
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Person in C				Pre-Operational	$\begin{bmatrix} 0 \end{bmatrix}$		) .0	
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Responsible	Person's	E-mai	il	Temporary	Menu Ty	pe (See addi	tional page)	
					НАССР		$\frown$	$\sim \sim \sim$
Certified Fo		er			Other (list)	$1 \underline{\bigcirc} 2$	<u></u> 3	$\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$
• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIS	T AND NARRATIVE COLUMNS M	IARKED "C"	8		
VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTI	ONS ARE DENOTED IN THE "SUN	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
				No violations.				
				Inspected by (name and title p <redacted></redacted>	rinted):			
					Inspected by (signature):			
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Establis	Establishment Name			ess	Inspection Date
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	vay # ent Addres E Moi OLF I ddress Cted> Cted> cted> cted> e Person's	rga NC	mber and street, city, state, zip code) in Ave., Evansville, IN, 47715	00 ( v № v ) ( v	lephone Number 12-471-5804 <b>Complaint</b> Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C_	p Releas 12/2019 of Violation NC	
• CRITICAL	. ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARK	KED "C"			
			) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	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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Establishment Name		Telephone Number	Date of Ins (mm/dd/yr		ID #
Jaya's Authent		(812-422-6667	· ·	, ;/2019	11058
Establishment Address (number a		<pre>'<redacted></redacted></pre>	12/00	/2013	
	t, EVANSVILLE, IN, 47708			5.1	
<sup>Owner</sup> Jaya Dodd		Purpose:	Follow-uj NO		te Date 16/2019
Owner's Address		✓ Follow-up		of Violation	
<redacted></redacted>		Complaint	Summary		
Person in Charge		Pre-Operational		NC_	
<redacted></redacted>		Temporary	· C		
Responsible Person's E-mail		НАССР	Menu Typ	e (See addi	tional page)
Certified Food Handler		Other (list)		$\bigcirc$	$), \bigcirc, \bigcirc$
<redacted></redacted>			$1 \underline{\bigcirc} 2$	<u>U</u> 3C	<u>/4050</u>
	IED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
• VIOLATION(S) REPEATED FROM	M 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
	Corrected all violations from 1 <sup>2</sup>	1/25/19 inspection			
193 C Coi	ntainer of sushi rice lack time as pub	Co	rrected		
218 NC Tub	o container for sushi rice is cracked. Repla	Со	rrected		
Received by (name and title printed		Inspected by (name and title pr	rinted):		
<redacted></redacted>		<redacted></redacted>			
Received by (signature):		Inspected by (signature):	_	_	
cc:	cc:		cc:		

Establis	Establishment Name			ess	Inspection Date
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711 F	enda ent Addres irst Av Acqui ddress cted> cted> cted> cted> cted> ood Handle	ss (nur Ve, Siti	mber and street, city, state, zip code) Evansville, IN, 47710 on Company, Inc.	<u> </u>	ephone Number 12-423-6355 redacted> rose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r) p Release 12/ of Violation NC	$ID # 11000$ $ID = Date 14/2019$ Is: $R_1$ $Ional page$ $D_4 O_5 O$
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative					orrected By
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285	NC	R	Dish machine water not reaching	COI	rect temperatur	e.	12/0	)5/2019
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5440 Owner HMR Owner's Ad <reda Person in C <reda Responsible</reda </reda 	enda ent Addres Pearl Acqui ddress cted> charge cted> cted> cted> cted>	ss (nu Dr Siti	mber and street, city, state, zip code) , Evansville, IN, 47712 ion Company, Inc.		Iephone Number 12-422-2055 CPCCacted> Incompare (Complete (Comp	Follow-u NO Summary C	r) B/2019 P Release 12/ r of Violation NC (	
Certified Fo		er		<u> </u>		1 <u>U</u> 2		<u>405</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
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				5113	•			
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Establishm 5400 Owner	eld Ir ent Addres Westo ell Dev ddress cted> Charge cted> e Person's	ss (nu DN Vel	Evansville West mber and street, city, state, zip code) Rd., Evansville, IN, 47712 opment Corp		lephone Number 312-429-0900 <redacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_	r) B/2019 P Release 12/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M ) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!			D IN THE N	ARRATIVE	BELOW AS "R"
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	Y S # ent Addree Weste (US, I ddress Cted> Charge Cted> e Person's	ss (nur DN NC.	mber and street, city, state, zip code) Rd., Evansville, IN, 47712	Telephone Number (812-424-4472 ( <redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u No Summary C Menu Ty	r) 4/2019 p Releas 12/ 7 of Violation	2 R 2
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	ND IN THE N		
Section#	C/NC	R	Narrative				orrected By
431	NC	R	Soiled floors under equipment a				06/2019
430	NC	R	Worn grout and broken tiles at dis	shware and front lin	ne.	12/1	13/2019
Received by			rinted):	Inspected by (name and title p	rinted):		
Received by	y (signature	):		Inspected by (signature):			
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	y's # ent Addres Gree US, I ddress cted> Charge cted>	n f	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	Telephone Number (812-473-1063 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-u NO Summary C	p Releas 12/2019 of Violation NC	
Certified Fo	cted>	-		Other (list)	102	<u></u> 3	$)_4 \bigcirc 5 \bigcirc$
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M ) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		D IN ТНЕ N	ARRATIVE	RELOW AS "D"
Section#	C/NC	R	Narrative	MARKI OF HOLAHONS AN			orrected By
Section#	CINC		Follow-up from inspection on 11/19/1	9 Violations corr	ected	TODECO	n i cecu Dy
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be C	orrected By
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