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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 NARRATIVE BELOW AS "R"								
Section#	C/NC	R	Ν	Narrative			To Be Co	orrected By	
			No note	ed violatio	ons				
					Inspected by (name and title p <redacted></redacted>	rinted):			
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Establi	shment	Nar	ne Addre	255	Inspection Date
Item #	C/NC	R		REMARKS	TO BE CORRECTED BY
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	ctly F ent Address Rose Focu Idress cted> harge cted> e Person's	s (nu nbe s L	mber and street, city, state, zip code) erger Ave, Evansville, IN, 47712 LC	Telephone Nut (812-76) (<reda Purpose: ✓Routine Follow-up Complaint Pre-Operat Temporary HACCP Other (list)</reda 	0=1474 cted>	Follow-uj NO Summary C	p Releas 03/ of Violatior NC	01/2020
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			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOI	LATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative				To Be Co	orrected By
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2100 N Owner	dar's ent Addres N Gree dar's (ddress cted> harge cted> e Person's	s (nu en Cas	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715 sual Cafe	Telephone Number (812-491-9976 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u Yes Summary C	r) 9/2020 p Releas	<u>29/2020</u>	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	JARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				orrected By	
190	NC	К		s of noodles				
234	NC		Improper cooling methods of noodles. Improper storage of knife between equipment.				Corrected Corrected	
218	NC				ropoir	03/04/2020		
210	NC		Reach in cooler at prep area and walk in c	03/0	14/2020			
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Establishme 6600 F Owner	nflata ent Address Frito L wwn U Idress cted> harge cted> e Person's	s (пи ау р I	e Fun Factory ^{mber and street, city, state, z Dr. Ste B, Evar nflatable Renta}	Telephone Number (812-471-5867 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u No Summary	r))/2020 p Releas) <u>R</u> 0	
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				I AND NARRAIIVE COLUMNS M		D IN THE N	ARRATIVE	BELOW AS "R"
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Establishme	Inte ant Address Sun Idress Cted> harge Cted>	en en	ational Market ^{mber and street, city, state, zip code)} River Rd, Evansville, IN, 47715	Telephone Number (812-479-7168 (<redacted> Purpose: Routine ✓ Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-u NO Summary C	p Releas 0/2020 02/ of Violatior	<u> </u>
Certified Fo	ted>			Other (list)	1 <u>02</u>	<u></u> 3) ₄ <u>0</u> 5 <u>0</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M		d in the s		DELOW AS "D"
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4706 ^{Owner}	Suit ent Addres Morga Park Idress Cted> harge Cted> e Person's	s (nu an A Cir	mber and street, city, state, zip code) Ave, Evansville, IN, 47715 nemas Inc	Telephone Number (812-479-9732 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u Yes Summary C	r) /2020 p Releas 03/ r of Violatior	02/2020 			
	• 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			To Be Co	orrected By			
291	NC	R	Establishment lacking saniti	izer test strips			21/2020			
347	NC		Hand washing sink lacking disposable towels.				rrected			
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1200 l ^{Owner}	t Bar ent Addres _incol	n n	mber and street, city, state, zip code) Ave, Evansville, IN, 47711 F	({ (elephone Number 812-401-4111 <redacted> urpose:</redacted>	ID # 11658 e Date		
CHRIS Owner's Ac		٧IP	F		ZRoutine Follow-up	Yes	of Violation	01/2020
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Responsible	e Person's	E-ma			НАССР	Menu Ty	pe (see aaan	ional page)
Certified Fo		er			Other (list)	1 <u>02</u>	<u></u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$
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Section#	C/NC	R	Narrative				To Be Co	rrected By
285	NC		Large ware washing machine not reaching	rge ware washing machine not reaching proper sanitizing temperature.				21/2020
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Received by	(signature)):		Inspected by (signature):				
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Item #	C/NC	R		REMARKS	TO BE CORRECTED BY
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Establishment Name Papa Murphys Take N Bake Establishment Address (number and street, city, state, zip code) 4827 Davis Lant Dr Suite C, Evansville, IN, 47715 Owner Chad Gries Owner's Address <redacted> Person in Charge <redacted> Responsible Person's E-mail Certified Food Handler <redacted> • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N</redacted></redacted></redacted>						lephone Number 12-491-7272 (redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	p Releas 0/2020 02/ of Violatior	29/2020 R
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"									
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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 NARRATIVE BELOW AS "R"							
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5050 L Owner EVANS Owner's Ac <redae Person in C <redae Responsible</redae </redae 	v Pai ent Addres _INC(SVILL ddress cted> harge cted> e Person's	er Erma		Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	r))/2020 p Releas	<u> </u>	
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Establishme 4 N W Owner	ni´s F ent Addres einba	s (nu ch	get Me Not Inn ^{mber and street, city, state, zip code)} Ave., EVANSVILLE, IN, 47711	Purpose:	Follow-u	r) /2020 p Releas	
		ZS	Inc/Judie Turner	√ Routine	No		02/2020
Owner's Ad				Follow-up	Summary	of Violation	
Person in C				Complaint	_ 1	1	D D
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Responsible	Person's	E-ma	il	Temporary	Menu Tyj	pe (See addii	ional page)
				HACCP Other (list)	\cap	\frown	
Certified Fo		er			$1 \underline{\bigcup} 2$		$4 \underline{\bigcirc} 5 \underline{\bigcirc}$
		E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	AARKED "C"			
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Section#	C/NC	R	Narrative			To Be Co	orrected By
438	С		Chemical bottles not	labeled.	Col	rrected	
431	NC		Equipment, floors, and walls near fry	ers in need of clea	02/2	22/2020	
D 11				T (11 (1.1.4	· . 1\		
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	ray #3 ent Address N St Jo Patel ddress cted> cted> cted>	os (nu)	nber and street, city, state, zip code) Unit A, EVANSVILLE, IN, 47720	Telephone Number (812-437-3750 (<redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-u NO Summary C	r) 8/2020 p Releas	28/2020	
Certified Fo		er		Other (list) 	1 <u>02</u>	<u>()</u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}$	
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2744 N Owner	ay #2 ent Addres NGree	s (nui en	mber and street, city, state, zi	^{p code)} sville, IN, 47715	8) (<	rphone Number 12-471-2933 redacted>	Date of Ing (mm/dd/yr 02/19 Follow-u))/2020 p Releas	
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Person in Charge <redacted></redacted>						Pre-Operational	с <u></u> О	NC	
Responsible			il			Temporary	Menu Ty	oe (See addii	ional page)
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			Self closure	devices on restroo	m c	loors repaired.			
						•			
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Resul	Establishment Name Resurrection School Establishment Address (number and street, city, state, zip code) 5301 New Harmony Rd., EVANSVILLE, IN, 4772 Owner									
owner Resuri	rectio	n F	Parish		Pu √	e Date 01/2020				
Owner's Ad		<u></u>				Follow-up	No Summary	of Violation		
Person in Charge <redacted> Responsible Person's E-mail</redacted>						Complaint Pre-Operational Temporary) _R	
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Section#	C/NC	R		Narrative				To Be Co	orrected By	
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1526 Jowner Gurpre	e Nine Int Addres Judso eet-Ka	nu N	nber and street, city, state, zip St, Evansville, II	(8 (~ Pu	lephone Number 312-430-7838 <redacted> rpose: Routine</redacted>	Date of In (mm/dd/y) 02/20 Follow-u NO	r))/2020 p Releas	ID # 11272 ee Date 01/2020	
Owner's Ad						Follow-up		of Violation	
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Establishment Name Noble Romans - Wash. Sq. Establishment Address (number and street, city, state, zip code) 1216 Washington Sq, Evansville, IN, 47715 Owner RBC&C INC. Owner's Address <redacted> Person in Charge <redacted> Responsible Person's E-mail Certified Food Handler</redacted></redacted>						lephone Number 12-473-4606) Owner rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	p Releas 02/ of Violation NC	28/2020
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Section#	UNU	Л		No noted violatio	no				frected by
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Establi	shment	Nar	ne Addre	255	Inspection Date
Item #	C/NC	R		REMARKS	TO BE CORRECTED BY
Received	By (Nar	ne &	Title)	Inspected By (Name & Title)	
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Establishme 1148 \ Owner Mann Owner's Ac	ent Addres Washi Enter	ing rpri	Nashington mber and street, city, state, zip code) ton Ave., Evansville, IN, 47714 ses LLC	Telephone Number (812-477-7041 (<redacted> Purpose: √Routine Follow-up</redacted>	Follow-u NO	.))/2020 p Releas	ID # 11202 e Date 01/2020 hs:
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Responsible	e Person's	E-ma	il de la constant de	Temporary HACCP	Menu Tyj	oe (See addii	ional page)
Certified Fo		er		Other (list)	1 <u>02</u>	<u></u> 3	$\underline{)}_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
• CRITICAL	ITEMS AR	RE IDH	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
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Section#	C/NC	R	Narrative				orrected By
335	С		Backsiphonage prevention device	ce in need of repair	r.	02/2	27/2020
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Establi	shment	Nar	ne Addre	255	Inspection Date
Item #	C/NC	R		REMARKS	TO BE CORRECTED BY
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Establishme	COL ent Addres	ss (nui	try Corner mber and street, city, state, zip code) eph Ave, Evansville, IN, 47720	Telephone Number (812-428-4593 (<redacted></redacted>	02/10		^{ID #} 11162
Owner			G RESOURCES	Purpose: ✓ Routine	Follow-u NO		se Date 28/2020
Owner's Ad				Follow-up	Summary	of Violatior	18:
<redace Person in C</redace 				Complaint) ()
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Responsible			il	Temporary	Menu Ty	pe (See addii	tional page)
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Certified Fo		ər		Other (list) 	$1 \underbrace{\bigcirc 2}{\bigcirc 2}$		<u>4_5_</u>
• CRITICAL	ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARKED "C"			
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Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
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Establishme Just (Establishme 1120 Owner Toni E Owner's Ac <redae Person in C <redae Responsible</redae </redae 	Cook ent Addres Wash Bellom Idress Cted> harge Cted> e Person's	s (nur ning NY E-mai	nber and street, city, state, zip code) gton Sq, Evansville, IN, 4771	5	Telephone Number (812-476-7884 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 02/ of Violation NC_	28/2020
		F IDF	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUM		RKED "C"			
	• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
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Establis	shment	Nar	ne Addre	255	Inspection Date
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Establishme 6 Wali ^{Owner} HADI	Shrin ent Addres nut St SHRI	is (nui t, E	Temple ^{mber and street, city, state, zi vansville, IN, 4 TEMPLE}		(8 (< Pur	ephone Number 12-423-4285 redacted> rpose: Routine	Date of Ins (mm/dd/yr 02/20 Follow-u NO	.))/2020 p Releas	ID # 11002 e Date 01/2020
Owner's Ad						Follow-up		of Violation	
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Responsible	Person's	E-ma	il			Femporary	Menu Ty	oe (See addit	tional page)
Certified Food Handler						HACCP Other (list)	$1 \bigcirc 1$	\bigcirc	$) \cdot \bigcirc \cdot \bigcirc \cdot$
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Section#	C/NC	R	Narrative				To Be Co	orrected By	
187	С	R	Potentially hazardous f	Potentially hazardous food cold holding above 41 degrees. Product was moved.				Corrected	
173	С	R	Improper storage of raw animal products.					Corrected	
218	NC	R	Glass door refrigerator not functioning as designed.				02/2	20/2020	
	1								
Received by	(name and	title p	printed):		Inspe	ected by (name and title pr	rinted):		
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3526 Owner Muhar Owner's Ac <redae Person in C <redae Responsible</redae </redae 	line / ent Address nterss nmec ddress cted> harge cted> e Person's	ss (nu tate d R E-ma	nber and street, city, state, zip code) e Dr, Evansville, IN, 477 aza	Routine Follow-up Complaint Pre-Operational	Follow-up No Summary C) /2020 P Releas 03/ of Violatior NC_	01/2020		
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Item #	C/NC	R		REMARKS	TO BE CORRECTED BY
Received	By (Nar	ne &	Title)	Inspected By (Name & Title)	
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601 N Owner	Ritzy ent Address Greer Grunov ddress cted> charge cted> e Person's	s (nu n R w/C	mber and street, city, state, zip code) iver Rd, EVANSVILLE, IN, 47715 Chad Grunow	Telephone Number (812-474-6259 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C	r))/2020 p Releas	01/2020
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIC	ON(S) REPE	ATED) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUN	MMARY OF VIOLATIONS" AN	D IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
438	С		Chemical bottles not	Corrected			
173	С		Improper segregation of raw and cooked	Corrected			
345	С		Hand sink being used for o	02/2	20/2020		
				•••			
Received by				Inspected by (name and title provided by (name and title p	rinted):		
Received by	(signature)):		Inspected by (signature):			
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Establis	shment	Nar	ne Addre	255	Inspection Date
Item #	C/NC	R		REMARKS	TO BE CORRECTED BY
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Establishme 6720 V Owner Maher Owner's Ac <redae Person in C <redae Responsible Certified Fo</redae </redae 	laya ent Addres Washi ndra / Idress cted> cted> e Person's pood Handle cted>	ss (nui ing Adł E-ma	11	Purpose:	Follow-u NO Summary C	p Releas 02/ of Violation NC $(See \ addi)$	ID # 10932 The Date 28/2020 This: \mathbf{R} 0 \mathbf{R} 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
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Section# C/NC R Narrative						To Be Co	orrected By
			No noted viola	tions			ť
				Inspected by (name and title p <redacted></redacted>	rinted):		
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1950 \ Owner CHRIS Owner's Ac <redat Person in C <redat Responsible</redat </redat 	t Bar ent Addres Wash S KEN ddress cted> harge cted> e Person's	s (nu ing AP		Telephone Number (812-477-2711 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u Yes Summary C	r) 9/2020 p Releas	29/2020	
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	• 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 Co	orrected By	
285	NC		Ware washing machine not reaching prop	per conitizing temper	aturo		20/2020	
205	NO		ware washing machine not reaching pro-	per samuzing temper	aluie.	02/2	.0/2020	
Received by				Inspected by (name and title provided by (name and title p	rinted):			
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Item #	C/NC	R		REMARKS	TO BE CORRECTED BY
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	t Bar ent Addres Wash S KEN ddress cted> harge cted> e Person's	ing MP		Telephone Number (812-477-2711 (<redacted> Purpose: Routine ✓ Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C	r))/2020 p Releas	01/2020
• 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 "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			Violation from 2/19/2020	corrected.			
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Item #	C/NC	R		REMARKS	TO BE CORRECTED BY
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Establishm	no´s ent Addres	s (nu	zza #2570 nber and street, city, state, zip code) ch Ave., Evansville	> IN 47711	Telephone Number (812-473-4011 () Owner	Date of Ins (mm/dd/yr 02/21		ID# 10926
Owner			A, INC	2, IIN, 4 77711	Purpose: ✓Routine	Follow-u NO		e Date 02/2020
Owner's Ac					Follow-up	Summary	of Violation	ns:
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Responsible			l	Temporary	Menu Typ	e (See addi	tional page)	
				НАССР	\frown		\sim	
Certified Fo		er		Other (list)	1 <u>02</u>	<u> </u>	$\underline{0}_{4} \underline{0}_{5} \underline{0}$	
• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIST AND NA	ARRATIVE COLUMNS M	IARKED "C"			
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Section#	C/NC	R		Narrative			To Be Co	orrected By
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Establishm	no´s ent Addres	s (nu	zza #2578 ^{nber and street, city, state, zip code)} ach Ave., Evansville, IN, 477	711	Telephone Number (812-473-3383) () Owner	Date of Ins (mm/dd/yr 02/21		ID# 10925
Owner			ZA, INC	<u> </u>	Purpose:	Follow-uj		e Date 02/2020
Owner's Ac					Follow-up	Summary	of Violation	ns:
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Responsible			1	Temporary	Menu Typ	e (See addi	tional page)	
					HACCP	\cap		$ \cap \cap $
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• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLU	JMNS M	IARKED "C"			
• VIOLATIC	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN TH	HE "SU	MMARY OF VIOLATIONS" ANI	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrati	ve			To Be Co	orrected By
355	NC		Facility in need of a s	servi	ce/mop sink.		04/2	23/2020
Received by		-	printed):		Inspected by (name and title pr <redacted></redacted>	inted):		
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	G Gyr	s (nu	mber and street, city, state, zip code) erger Ave, Evansville, IN, 47712	3)	elephone Number 312-424-2627 <redacted></redacted>	Date of In (mm/dd/yr 02/18		id# 10871
^{Owner} Wayne				Pu	urpose: Routine	Follow-u NO		e Date 28/2020
Owner's Ac	ldress				 Follow-up	Summary	of Violation	ns:
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Person in C					Pre-Operational	<u>с</u> U	<u>NC</u>	
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Responsible	e rerson's	r-ma	u		НАССР	Menu Ty	pe (see aaan	
Certified Fo		er			Other (list)	1 <u>0</u> 2	<u>3</u>	$\underline{)}_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
• CRITICAL	ITEMS AR	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARI	KED "C"			
• VIOLATIC	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	J MM A	ARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
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Item #	C/NC	R		REMARKS	TO BE CORRECTED BY
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Establishment Name Applebee's Neighborhood Grill Establishment Address (number and street, city, state, zip code) 5727 Pearl Dr, Evansville, IN, 47712 Owner Apple Central, LLC Owner's Address <redacted> Person in Charge <redacted> Responsible Person's E-mail Certified Food Handler <redacted></redacted></redacted></redacted>						elephone Number 312-426-2006 <redacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 0/2020 p Releas 02/ of Violation	29/2020 IS: R_0
Certified Food Handler <redacted></redacted>						Other (list)	1 <u>_2</u> 2		<u>4050</u>
				T AND NARRATIVE COLUMNS ONS ARE DENOTED IN THE "S			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative				To Be Co	orrected By
399	NC		Floor tiles and	d grout in need of r	ера	ir or replacemer	nt.	03/2	25/2020
Received by		-	printed):		-	pected by (name and title pr redacted>	inted):		
Received by	(signature)):			Insp	pected by (signature):			
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Item #	C/NC	R		REMARKS	TO BE CORRECTED BY
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Establishme	iya A ent Address avis L ii Yu ddress cted> harge cted> e Person's	s (nu ant E-ma	an Diner mber and street, city, state, zip code) t Drive Ste F, Evansville, IN, 47715	Telephone Number (812-471-8100 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u Yes Summary C	r))/2020 p Releas	29/2020 IS: R_0
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUM		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
		Л		l of algoning/raple	mont		
218	NC		Reach in cooler doors and seals in need	of cleaning/replace	ment.	03/0	4/2020
	ļ						
				Inspected by (name and title pr <redacted></redacted>	rinted):		
				Inspected by (signature):			
cc:			сс:		cc:		

Establishment Name A			ne Addre	255	Inspection Date
Item #	C/NC	R		TO BE CORRECTED BY	
Received	By (Nan	ne 8.	Title)	Inspected By (Name & Title)	
Received	y (Indi		1107		Pageof



Establishment Name Subway Establishment Address (number and street, city, state, zip code) 301 Main St, Evansville, IN, 47708					8) (lephone Number 312 ^E 455-1333) Owner		r) 8/2020	id# 14208
Owner Paul Kumar						rpose: Routine	Follow-u NO		e Date 28/2020
Owner's Ad						Follow-up		of Violation	
Person in Charge <redacted></redacted>						Complaint Pre-Operational	<u>с</u> 0) _R 0
Responsible	Person's	E-mai	il			Temporary HACCP	Menu Ty	pe (See addii	ional page)
Certified Food Handler <redacted></redacted>						Other (list)	1 <u>0</u> 2	<u></u> 3	$)_4 \bigcirc 5 \bigcirc$
• CRITICAL	ITEMS AR	E IDE	NTIFIED IN THE CHECKLIS	T AND NARRATIVE COLUMNS M	IARK	ED "C"			
	N(S) REPE	ATED	FROM PREVIOUS INSPECTI	ONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative		10		To Be Co	orrected By
				Follow up from 12-					
			ŀ	All violations were co	orre	cted.			
				Inspected by (name and title printed): <redacted></redacted>					
Received by (signature):					Insp	ected by (signature):			
cc:				cc:			cc:		

Establishment Name A			ne Addre	255	Inspection Date
Item #	C/NC	R		TO BE CORRECTED BY	
Received	By (Nan	ne 8.	Title)	Inspected By (Name & Title)	
TECEIVE	y (Indi		1107		Pageof