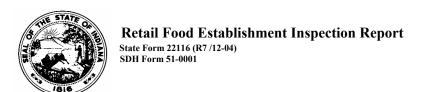
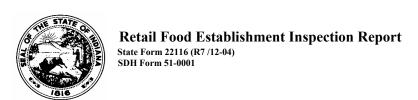


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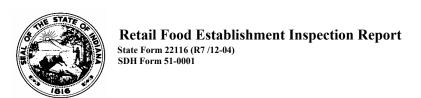
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	IZON		OMES SWIRCA	Telephone Number  ( ) Establishment	Date of Ins (mm/dd/yr		1D# 11503
			mber and street, city, state, zip code) quare, Evansville, IN, 47715	( ) Owner	11/22	72023	
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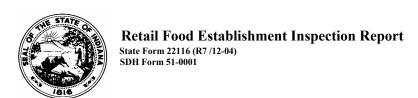
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			mber and street, city, state, zip code)	(_	<redacted></redacted>	11/20	72023	
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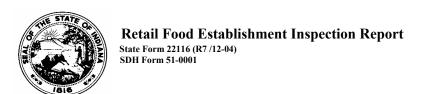
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			mber and street, city, state, zip code)	012-474-0000	11/21	/2023	11429
925 S			River Rd, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
Owner Walgre	een C	) ()		Purpose:  Routine	Follow-up		se Date 01/2023
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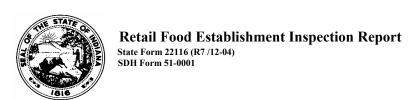
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Varie	ty Vil	lag	ge II	(812-423-4869	` ' '	2022	11422
			mber and street, city, state, zip code)		11/20/2	2023	
600 E	Colu	mb	ia St., Evansville, IN, 47711	<pre>(<redacted></redacted></pre>			
Owner	.D.A. F		000	Purpose:	Follow-up		se Date
RHON		· K	OSS	<b>✓</b> Routine	No	11/	30/2023
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			mber and street, city, state, zip code)	812-424-5536	11/22	/2023	11298	
4200 I	N Ker	ntu(	cky Ave, Evansville, IN, 47711	( ) Owner				
Owner			-	Purpose:	Follow-up		se Date	
Sarto	Retre	at	House	<b>✓</b> Routine	No	12/	02/2023	
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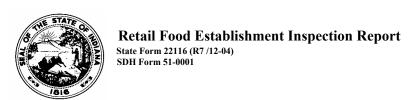
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Establishm Penn		ior	n East Coast Subs		lephone Number 312-434-7366	Date of In (mm/dd/yr	r)	ъ# 11252
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Owner	Can	וט	, Evansvine, iiv, 47772			Follow-u	n Palago	se Date
Tri-Sta		nee	esesteaks LLC		rpose: Routine	No		01/2023
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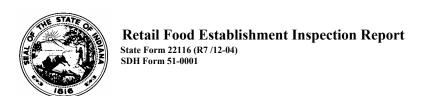
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Olive Control		der	n #1022	Telephone Number (812-473-2903)	Date of Ins (mm/dd/yr	·j	то# 11235
			mber and street, city, state, zip code)	( )Owner .	11/22	/2023	
1100 N	<b>V</b> Gre	en	River Rd, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
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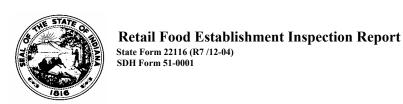
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Establishmo Motor		#3	204	Telephone Number (812-963-6631	Date of Ins (mm/dd/yr	j	то# 11220
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)		11/20	/2023	
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Owner				Purpose:	Follow-uj		se Date
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Owner's Ac				Follow-up	Summary	of Violation	ns:
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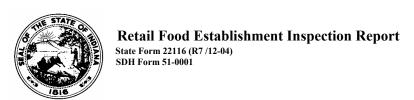
			<u> </u>	•			
Establishm Moto		#2	206	Telephone Number	Date of Ins (mm/dd/yr		ID#
				812-477-5036	11/20	/2023	11219
			mber and street, city, state, zip code) Dr, Evansville, IN, 47713	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-u		se Date
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Section#	C/NC	R	Narrative			To Be Co	orrected By
346	NC		no soap at hand	sink		Co	rrected
347	NC		paper towels not provided			Со	rrected
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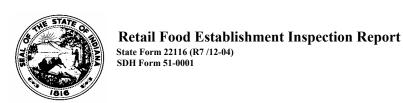
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Establishmo CVS		ma	acy #6258	Telephone Number (812-422-6330)	Date of Insp (mm/dd/yr)		тр# 11186
			mber and street, city, state, zip code)		11/21	/2023	
			n Ave., Evansville, IN, 47711	<pre><redacted></redacted></pre>			
Owner		<u>J</u> -	- , , ,	Purpose:	Follow-up	Releas	se Date
HOOK	(-SUF	PEF	RX LLC	<b>✓</b> Routine	No	12/	01/2023
Owner's Ac	ddress			Follow-up	Summary	of Violatio	ns.
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Certified Fo	ood Handle	er		Other (list)	1 2	$\bigcirc 3 \bigcirc$	<u> 1405</u> 0
• CRITICAL	L ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "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 violations to re	eport			
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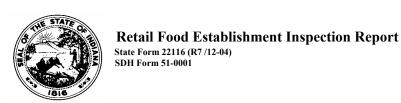
Establishm	ont Nama			Telephone Number	Date of Ins	naction	ID#
Busle				(812-426-2787)	(mm/dd/yr	·j	11122
		s (nu	mber and street, city, state, zip code)		11/20	/2023	11122
			eph Ave, Evansville, IN, 47720	' <redacted></redacted>			
Owner			, ,	Purpose:	Follow-uj	p Releas	se Date
Buslei	r Ente	rpi	rises Inc	<b>✓</b> Routine	No	11/	30/2023
Owner's Ac				Follow-up	Summary	of Violation	ns:
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Responsible	e Person's	E-ma	il	HACCP	Menu Typ	se (See addi	tional page)
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
			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
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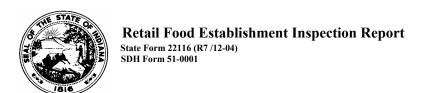
Establishmed 4101 I Owner Mac's Owner's Active Control Person in Control Responsible Certified Foundation	e K #4 ent Addres N Hig Conv ddress cted> harge cted> e Person's	hw/er		Telephone Number  (812-424-1185  ( <redacted> Purpose:  Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u No Summary	/2023 p Release D	1/2023 R
			INTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE BE	LOW AS "R"
Section#	C/NC	R	Narrative			To Be Corre	ected By
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			TIO VIOIATIONS NO	neu			
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Lege!				Telephone Number	(mm/dd/yr		то# 11080
		e (nu	mber and street, city, state, zip code)	812-477-5323	11/22	/2023	11000
1050	S Wei	nb	ach Ave, Evansville, IN, 47714	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
WILLI	$AM\ V$	UK	OVICH	<b>✓</b> Routine	No	12/	02/2023
Owner's Ac				Follow-up	Summary	of Violation	ns:
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Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
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		E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IADKED "C"	<u> </u>		
	•		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
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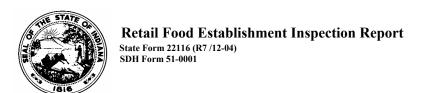
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			mber and street, city, state, zip code)	<redacted></redacted>	1 1/2 1/.	2023	
	Lincol	n A	Ave., Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner	ootou	ror	at Holdon III C	Purpose:	Follow-up		se Date 01/2023
Owner's A		ıaı	nt Holder, LLC	Routine			
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Person in C				Complaint	$\cap$	NC_	1 0
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Responsible			il	Temporary	Menu Type	(See addi	tional page)
•				НАССР			
Certified F		er		Other (list)	$_{1}\bigcirc_{2}($	<u>)</u> 3(•	$)_4 \bigcirc_5 \bigcirc$
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• CRITICAL	LITEMS AR	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 NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		,	Го Ве Со	orrected By
324	NC		Repair faucet under dis	h machine.		11/2	28/2023
Received by	(name and	title p	printed):	Inspected by (name and title pr	rinted):		
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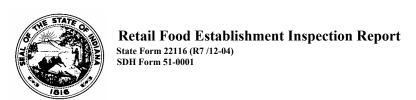
Establishm Apple		s I	Neighborhood Grill	Telephone Number (812-471-0942)	Date of Ins (mm/dd/yr	·)	10# 10844
			mber and street, city, state, zip code)		11/22	/2023	10011
			n Ave, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-uj		se Date
Apple	Cent	ral,	, LLC	<b>✓</b> Routine	Yes	12/	02/2023
Owner's A	ddress			Follow-up	Summary	of Violation	ns:
				Complaint	-		
Person in C				Pre-Operational		NC S	$\frac{3}{R}$
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Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР			
Certified F		er		Other (list)	$1\bigcirc 2$	$\bigcup_3 \mathbf{e}$	) <sub>4</sub> \(\) <sub>5</sub> \(\)
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• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATEL	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		Kitchen in need of clea	ining		11/2	29/2023
433	NC		mops store outside with mop h	ead on the ground		Co	rrected
347	NC		disposable towel not provided at han	dwashing sink in k	itchen	Co	rrected
Received by	,			Inspected by (name and title p	rinted):		
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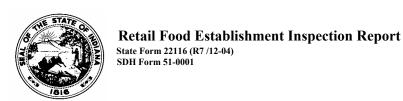
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Establishm				Telephone Number	Date of Ins (mm/dd/yr		ID#
Wings				812-909-2945	11/21	/2023	13765
			mber and street, city, state, zip code) d, Evansville, IN, 47711	<pre><redacted></redacted></pre>			
Owner	Dian	1011	a, Evansvine, nv, 47711	Purpose:	Follow-uj	n Releas	se Date
	Holdiı	ngs	Evansville- Manish Malhotra	Routine	No		01/2023
Owner's Ac		<u> </u>		Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational		NC (	$0_{\rm R}$
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Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)
G 18 17				Other (list)			$\bigcirc$
Certified Fo		er			$1 \bigcirc 2$	<u> </u>	<u>/405</u>
		F IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"	<u> </u>		
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		ID IN THE N	ADDATIVE	RELOWAS "D"
Section#	C/NC	R	Narrative	WINIART OF VIOLATIONS AN	DINTHEN		orrected By
Section	C/ITC	IX	no violations no	tod.		10 bc c	niceted by
			TIO VIOIATIONS NO	neu			
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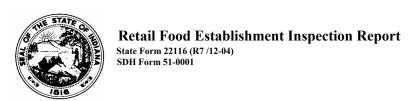
			<u> </u>					
Establishm		ا د	aKay Mini-Market LLC	Telephone Number Date of Inspection (mm/dd/yr)  1.440				
			mber and street, city, state, zip code)	812-444-9737	11/22	/2023	14043	
			ach Ste G, Evansville, IN, 47714	<pre><redacted></redacted></pre>				
Owner	_			Purpose:	Follow-up		se Date	
Beatri	<u>ce Je</u>	an	Louis	Routine	No	12/	02/2023	
Owner's Ac				Follow-up	Summary	of Violation	ns:	
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Person in C	_			Pre-Operational		NC_	J <sub>R</sub> U	
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Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)	
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• CRITICAL	L ITEMS AI	RE IDI	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 C	orrected By	
			No noted violation	ons.				
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Establishm				Telephone Number	Date of Inspo (mm/dd/yr)	ection	ID#
Hyatt	Plac	e		812-777-3203	11/22/2	2022	14376
			mber and street, city, state, zip code)	<pre></pre>	1 1/22/	2023	
	E 2nd	<u>1. S</u>	St., Evansville, IN, 47713	<re><redacted></redacted></re>			
Owner				Purpose:	Follow-up		se Date
Kinshi		spit	tality	Routine	No	12/	02/2023
Owner's Ac				Follow-up	Summary o	f Violatio	ns:
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Person in C				Pre-Operational	C	NC_(	$\mathcal{L}_{R}$
Responsible			:1	Temporary	Manu Tyma	(Coo addi	tional page)
Kesponsible	e rerson's	c-ilia	11	НАССР	Menu Type	(see aaai	nonai page)
Certified Fo	ood Handle	er		Other (list)	$1_1\bigcirc_2($	$)_3$	$)_4\bigcirc_5\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
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	C/NC		PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	UMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative		-	10 Be Co	orrected By
			No violations	S			
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D' 11	. (	4:41	l		-it 1)		
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Certified Fo	ood Handle	er		Other (list)	102	<b>O</b> 3	)4050
• CRITICAL	LITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
	( )		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative	-!!!			orrected By
297	NC		Drink nozzles so				rrected
324	NC		grease trap log not m				rrected
118	С		Establishment does not have ce	ertified food handle	r	12/2	22/2023
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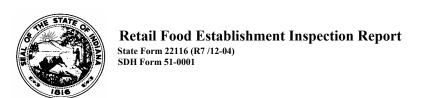
Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Fast	Track	(		812-303-3057		າດວາ	14493
			mber and street, city, state, zip code)		11/21/2	2023	
2314 l	<u> N. He</u>	ide	elbach, Evansville, IN, 47711	<pre><redacted></redacted></pre>			
Owner	0: 1	ı		Purpose:	Follow-up		se Date
Dalbir		n		<b>✓</b> Routine	No	12/	01/2023
Owner's Ac				Follow-up	Summary of	Violation	ıs:
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Person in C				Pre-Operational	$_{\rm C}$	NC_	$\frac{1}{R}$
<reda< td=""><td></td><td></td><td>9</td><td>Temporary</td><td></td><td></td><td></td></reda<>			9	Temporary			
Responsible	e Person's	L-ma	11	НАССР	Menu Type	(See aaai	nonai page)
Certified F	ood Handle	or		Other (list)	1(),(	$)_{2}$	$)_4\bigcirc_5\bigcirc$
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		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AADKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative		<u> </u>		orrected By
324	NC		grease trap log not m	aintained		11/2	21/2023
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Fireh		Sı	ubs	Telephone Number (812-909-4445)	Date of Ins (mm/dd/yr	o)	ъ# 14588
			mber and street, city, state, zip code)		11/22	/2023	1 1000
			River Rd., Evansville, IN, 47715	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-uj		se Date
John A	Allen			<b>✓</b> Routine	No	12/	02/2023
Owner's Ac				Follow-up	Summary	of Violation	ns:
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Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)
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Certified Fo		er			$1 \underline{\bigcirc 2}$	$\bigcirc 3 \bigcirc$	<u> 1405</u>
<1 <del>E</del> uat	ileu>						
• CRITICAL	ITEMS AF	E IDE	ENTIFIED 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
			no violations no	ted			
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Received by	(name and	title p	printed):	Inspected by (name and title p	rinted):		
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Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Expre	ess 1	Pa	antry	812-492-0012	11/20/2	າດວວ	14702
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	<pre>(<redacted>)</redacted></pre>	1 1/20/2	2023	
	N Firs	<u>st A</u>	ve, Evansville, IN, 47710	<re><redacted></redacted></re>			
Owner	<b>D</b> ( )	ı		Purpose:	Follow-up		se Date
Sumit				<b>✓</b> Routine	No	11/	30/2023
Owner's A				Follow-up	Summary of	Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_	$R_{\underline{U}}$
Responsible			:1	Temporary	Menu Type	(Caa addi	tional mass)
Kesponsibio	e rerson's	c-ilia	II	НАССР	Menu Type	(see aaai	nonai page)
Certified F	ood Handle	er		Other (list)	100	•),(	$)_4\bigcirc_5\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"	l		
					D IN THE NA	DD 4 7711 775	DEL OW 10 (DE
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative		]		orrected By
310	NC		Hood vent system s	soiled.		11/2	28/2023
Received by			printed):	Inspected by (name and title p	rinted):		·
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Received by	(signature)	):		Inspected by (signature):			
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Establishm		or.	~1. /	Telephone Number	Date of Ins (mm/dd/yr)		ID#
Reviv				317-590-4545	11/20	/2023	14887
Establishme	ent Addres Tutor	s (nu Ln	mber and street, city, state, zip code) ., Evansville, IN, 47715	<pre>(<redacted></redacted></pre>	1 1,20		
Owner			.,	Purpose:	Follow-up	Releas	se Date
Kathri	ne Lu	ga	r	Routine	No	11/	30/2023
Owner's Ac		J		Follow-up	Summary	of Violation	
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Complaint</td><td>_ `</td><td>_</td><td>_</td></reda<>	cted>			Complaint	_ `	_	_
Person in C				Pre-Operational			$\frac{0}{R}$
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Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР			
Certified Fo	ood Handl	er		Other (list)	$1 \bigcirc 2$	<u> </u>	<u> 1405</u> 0
• CRITICAL	L ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "C"			
• VIOLATIC	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
			no violation no	ted			<u>,                                      </u>
			THE VIOLATION THE	100			
							_
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Received by				Inspected by (signature):			
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Establishment Name				Telephone Number	Date of Ins	noation	ID#
Corner Nutrition LLC				(812-550-3019	(mm/dd/yr	j	14910
Establishment Address (number and street, city, state, zip code)					11/20/2023		1 1010
955 S. Hebron Suite H, Evansville, IN, 47715				<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Brian Wheeler				<b>✓</b> Routine	No	11/	30/2023
Owner's Address				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td>(</td><td>) (</td></reda<>				Complaint		(	) (
Person in C				Pre-Operational	$_{\rm c}$ U	NC (	$0_{\rm R}$
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Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)
				Other (list)			
Certified F	ood Handl	er			$1 \underline{\bigcirc 2}$	<u> </u>	<u>/405</u>
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
			No noted violati	on.			
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