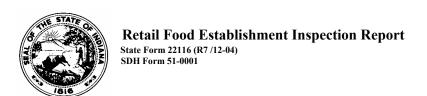
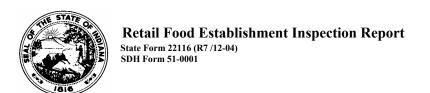


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Establishm	_			Telephone Number	ID#			
La Ca			mber and street, city, state, zip code)	812-550-1585	01/11	/2024	12265	
			t Rd. Ste 600, Evansville, IN, 47715	<pre>(<redacted></redacted></pre>				
Owner ABRA	HAM	BF	ROWN	Purpose:	Follow-u Yes		se Date //21/2024	
Owner's Ac			3 - 1 - 1	Follow-up		of Violation		
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Person in C				Pre-Operational	\mathbf{C}^{-1}	NC	I_{R}	
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C (C I	1 77 11			Other (list)		\bigcirc	\bigcap	
Certified Fo		er			1 2	<u> </u>	<u>/405</u>	
• CRITICAL	LITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARKED "C"				
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS 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	orrected By	
173	С		Food grade storage bags neede	ed for food storage		01/	11/2024	
245	NC		Wet wiping cloths improp	perly stored.		Corrected		
			<u> </u>					
			<u> </u>					
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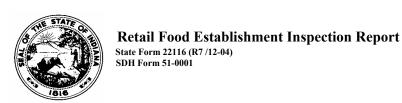
Establishm	_			Telephone Number	Date of Inspe	ection	ID#
Targe	et-Sta	arb	ucks T-1481	812-402-8500	(mm/dd/yr) 01/09/2	2024	11976
			mber and street, city, state, zip code) xpressway, Evansville, IN, 47715	<pre>(<redacted></redacted></pre>	01/09/2	2024	
Owner				Purpose:	Follow-up		se Date
Targe	t Corp	or	ation	✓ Routine	No	01/	19/2024
Owner's A				Follow-up	Summary of	f Violation	ns:
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Person in C	_			Pre-Operational	$_{\rm C}$ U	NC_	J _R U
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Responsible	e Person's	E-ma	il	НАССР	Menu Type	(See addi	tional page)
Certified F	ood Handle	or		Other (list)	10,0	•)2(),(),()
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"	l		
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE NA	RRATIVE	RELOW AS "R"
Section#	C/NC	R	Narrative	MINIARI OF VIOLATIONS AN			orrected By
Sectiona	C/TC	IX	No noted violation	one		I O DC CC	orrected By
			No noted violation	JI18.			
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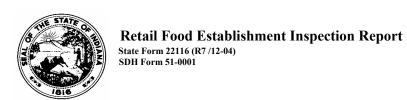
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Chick	c-fil-A	Α.	t Cross Pointe	⁽ 812-471-9203	01/09/	2024	11935
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	01/09/	2024	
	= Indi	an	a St, Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner	00:-		-16-11	Purpose:	Follow-up		se Date
Jack F		rwa	ait II	✓ Routine	No	01/	19/2024
Owner's A				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	C	NC_	R = R
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Kesponsible	e r erson s	L-ma	ш	HACCP	Wienu Type	(see aaar	nonai page)
Certified F	ood Handle	er		Other (list)	$1_1\bigcirc_2($	$)_3$ (\bullet	$)_4\bigcirc_5\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMN	IS MARKED "C"			
					ID IN THE NA	DD ATIVE	DELOW AC "D"
	C/NC		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE	"SUMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative	· C		10 ве С	orrected By
			No noted viola	ations.			_
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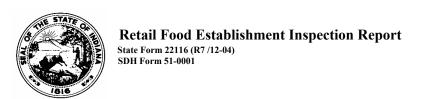
Establishm		rm	Market	Telephone Number	Date of Ins (mm/dd/yr		ID#
			Market mber and street, city, state, zip code)	<u> </u> (812-963-3175	01/09	/2024	11551
			Ave, Evansville, IN, 47720	<pre><redacted></redacted></pre>			
Owner			· · · · · · · · · · · · · · · · · · ·	Purpose:	Follow-up		se Date
PAUL		SE		Routine	No	01/	19/2024
Owner's A				Follow-up	Summary	of Violation	ns:
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responsion	0 1 01 5011 5		•	НАССР			, , , , , , , , , , , , , , , , , , ,
Certified F		er		Other (list)	102	<u>3</u>	<u>)</u> 4 <u>0</u> 5 <u>0</u>
• CRITICAI	L ITEMS AF	RE 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 N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
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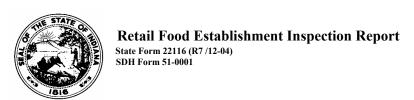
Establishm				Telephone Number Date of Inspection (mm/dd/yr)				
Chas				812-449-8358	01/09	/2024	11506	
			mber and street, city, state, zip code)	<pre><redacted></redacted></pre>	0 1700	, 202 .		
Owner	VV FIC	al IK	lin St, Evansville, IN, 47712		E-II	- I D-1	se Date	
Chris	Brow	n		Purpose:	Follow-up		19/2024	
Owner's A				Follow-up	Summary	of Violation		
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Person in C				Pre-Operational		NC ($0_{\rm R}$	
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Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)	
Certified F		er		Other (list)	1 2		<u> 1405</u>	
Cieuad	ieu>							
• CRITICAI	L ITEMS AF	RE 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 N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
			No violations no	oted				
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Establishm Walm		#1 <i>1</i>	3/1	Telephone Number	Date of Ins (mm/dd/yr		то# 11430
			mber and street, city, state, zip code)	812-424-5475	01/11	/2024	11430
			nk Rd, Evansville, IN, 47712	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Wal-m	<u>nart S</u>	tor	es East, LP	✓ Routine	No	01/	21/2024
Owner's A				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$ $_{\rm C}$	NC_	$\frac{2}{R}$
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• CRITICAI	. ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	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 Co	orrected By
342	NC		Produce area hand sink not reaching	ng proper tempera	ture	01/	11/2024
139	NC		Baby formula out of date	expired 11/23		Co	rrected
Received by	(name and	l title j	printed):	Inspected by (name and title p	rinted):		
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Establishm				Telephone Number	Date of Insp		ID#
Targe	et T-1	48	31	812-402-8500	(mm/dd/yr)		11389
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	() Owner 4	01/09/	2024	
6625 E	ELloy	d E	xpressway, Evansville, IN, 47715	<pre>(<redacted></redacted></pre>			
Owner			4	Purpose:	Follow-up NO		se Date
Targe ⁻		oor	ation	Routine	NO	01/	19/2024
Owner's Ac				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_($\frac{1}{R}$
				Temporary	M T	/C 11:	
Responsible	e Person's	L-ma	Ш	НАССР	Menu Typ	: (See aaai	tional page)
Certified Fo	ood Handle	er		Other (list)	10)2	\bigcirc ₃ $($ X	$)_{4}\bigcirc_{5}\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
					D DI THE N		DELOW AS (D
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
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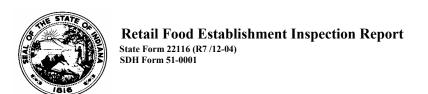
Establishm	ent Name			Telephone Number	Date of In	spection	ID#
Taco		าร		(O1かEsを対かいマO11 (mm/dd/yr)			11386
			nber and street, city, state, zip code)	=	01/09)/2024	11000
			ton Ave., Évansville, IN, 47714	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-u		se Date
		=as	t Hospitality TN LLC	✓ Routine	No	01/	19/2024
Owner's Ad				Follow-up	Summary	of Violation	18:
Person in C				Complaint	\cap		
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Responsible			I	Temporary	Menu Ty	pe (See addi	tional page)
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Certified For		er		Other (list)	1 2	<u>3</u>	<u>)4</u> 050
• CRITICAI	L ITEMS AR	RE IDE	NTIFIED 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 Co	orrected By
297	NC		Drink nozzles so	iled.		01/0	09/2024
245	NC		No wiping cloths available for	sanitizer buckets.		01/0	09/2024
431	NC		Kitchen and storage area in r	need of cleaning.		01/0	09/2024
430	NC		Tile baseboard in drive through a	-	air.	02/	12/2024
Received by	/ (name and	l title p	rinted):	Inspected by (name and title p	rinted):		
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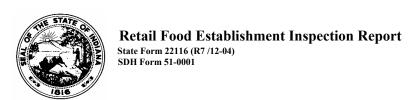
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Cross	s-Eye	ed	Cricket	812-422-6464	` '	2024	11176
			mber and street, city, state, zip code)		01/08/	2024	
2101 \	W Llo	yd	Expy, Evansville, IN, 47712	<pre><redacted></redacted></pre>			
Owner	_			Purpose:	Follow-up		se Date
Joshu		lela	a e e e e e e e e e e e e e e e e e e e	✓ Routine	No	01/	18/2024
Owner's A				Follow-up	Summary o	f Violation	ns:
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Responsible	e Person's	L-ma	11	НАССР	Menu Type	: (See aaai	tional page)
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	AARKED "C"			
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	C/NC		PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MIMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative	4 a al		10 ве С	orrected By
			No violations no	itea			
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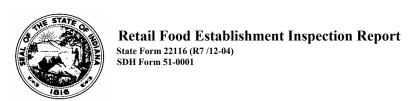
Establishm Circle		lar	+ # <i>1</i> 1	Telephone Number Date of Inspection (mm/dd/yr) 14				
			mber and street, city, state, zip code)	812-867-6780	01/10	/2024	11158	
			ny 41, Evansville, IN, 47711	<pre>(<redacted></redacted></pre>				
Owner C & S	Inc			Purpose:	Follow-up		se Date //20/2024	
Owner's A				Follow-up		of Violation		
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Person in C				Pre-Operational	$\int_{C} U$		0_{R}	
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Responsible	e Person's	E-ma	il	HACCP	Menu Typ	e (See addi	tional page)	
Certified F		er		Other (list)	1 <u></u> 2	<u>3</u>	<u>/4_5_</u>	
• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"				
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS 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	orrected By	
			No violations no	ted				
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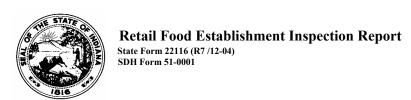
Establishm 4625 Owner LJS C Owner's A <th>John ent Addres W Llo DPCO ddress cted> Charge cted> e Person's</th> <th>os (nui yd Ol</th> <th>ilver's mber and street, city, state, zip code) Expy, Evansville, IN, 47712 NE, LLC</th> <th>Telephone Number (812-422-9824 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th> <th>Follow-u NO Summary C Menu Ty</th> <th>P Release 01/</th> <th>2 R O</th>	John ent Addres W Llo DPCO ddress cted> Charge cted> e Person's	os (nui yd Ol	ilver's mber and street, city, state, zip code) Expy, Evansville, IN, 47712 NE, LLC	Telephone Number (812-422-9824 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C Menu Ty	P Release 01/	2 R O
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		ID IN THE N	JARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative	or Holling M	11121		orrected By
324	NC	11	Grease trap log not m	aintained			11/2024
410	NC		Lightbulb on heat lamp r				11/2024
710	110		Lightball of fleat lamp i	iot siliciaca		017	11/2024
<pre>Received by</pre>	`		orinted):	Inspected by (name and title p < redacted>	rinted):		
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Establishm Lic's		`re	am	Telephone Number (812-424-3066)	Date of Ins (mm/dd/yr		то# 11082
			mber and street, city, state, zip code)		01/09	/2024	11002
			ton Ave., Evansville, IN, 47714	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-u		se Date
Don S	mith			✓ Routine	No	01/	19/2024
Owner's Ac				Follow-up	Summary	of Violatio	ns:
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Person in C				Pre-Operational	$\frac{1}{c}$	NC_	J _R U
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Responsible	e Person's	E-ma	il	HACCP	Menu Typ	oe (See addi	tional page)
				Other (list)	\sim		\bigcirc
Certified Fo		er			$1 \bigcirc 2$	<u> </u>	<u>/4050</u>
		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IADKED "C"			
					D IN THE N	ADDATIVE	DELOW AC 4D#
	. ,		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative	- t l.			orrected By
443	С		Sanitizer for wiping cloth	s too weak.		Co	rrected
Received by	(name and	title 1	printed):	Inspected by (name and title p	rinted):		
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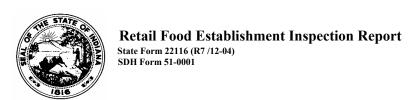
Establishm	_			Telephone Number Date of Inspection (mm/dd/yr)			
Leroy	r's Ta	ave	ern	812-464-8300 01/09/2024 11			
			mber and street, city, state, zip code)	() Owner	01/08	7/2024	
1	VIt. Ve	ern	on Ave., Evansville, IN, 47712				
Owner Terri (arl			Purpose:	Follow-u		se Date /19/2024
Owner's Ac				✓ Routine			
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>_ `</td><td>of Violation</td><td>_</td></reda<>				Follow-up	_ `	of Violation	_
Person in C				Complaint	l " ()		$\frac{2}{R}$
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td></td><td>_ NC</td><td>- R_</td></reda<>				Pre-Operational		_ NC	- R_
Responsible			il	Temporary	Menu Tyj	pe (See addi	tional page)
				НАССР		\bigcirc G	
Certified Fo		er		Other (list)	1 2	\bigcirc_3	<u>)4</u> 05 <u></u> 0
		RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
310	NC		Hood vent system	soiled			09/2024
431	NC		Kitchen in need of c				09/2024
401	140		Talletter in ficed of e	ncariirig		01/0	J3/2024
							
						<u> </u>	
Received by		_		Inspected by (name and title p < redacted>	rinted):		
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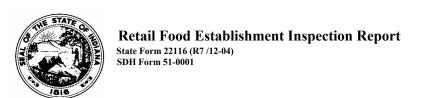
Establishm	ent Name			Telephone Number	Date of Insp	ection	ID#
Hacie		#8		(812-474-1635	(mm/dd/yr)	0004	11001
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	() Owner	01/08/	2 024	
	Gree	n ŀ	River Rd, Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner HMR	Acqui	siti	on Company, Inc.	Purpose:	Follow-up NO		se Date 18/2024
Owner's Ac				Follow-up	Summary o	f Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>آ م</td><td>_</td><td>_</td></reda<>				Complaint	آ م	_	_
Person in C				Pre-Operational	$_{\rm C}$ U	NC_($\mathcal{F}_{\mathbf{R}}$
<reda< 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 Type	(See addi	tional page)
Certified F	177 11			Other (list)	-0.0	7,6	\bigcap_{i}
<redac< td=""><td></td><td>er</td><td></td><td></td><td></td><td><u></u></td><td><u>/4050</u></td></redac<>		er				<u></u>	<u>/4050</u>
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
			No noted violation	ons.			
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Received by				Inspected by (signature):			
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Establishm Hacie		#4		Telephone Number (812-423-6355	ID# 11000		
Establishm	ent Addre	ss (nu	mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	01/08	/2024	
	irst A	ve,	Evansville, IN, 47710	<redacted></redacted>			
		siti	on Company, Inc.	Purpose: Routine	Follow-uj No		se Date 18/2024
Owner's A				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td></td><td>(</td><td>) ()</td></reda<>		1		Complaint		() ()
Person in C				Pre-Operational	$_{\rm C}$	NC($\frac{1}{R}$
Responsible			;i	Temporary	Menu Tyr	ne (Saa addi	tional page)
Responsible	e i ci son s	L-ma		НАССР	l	_	
Certified Fo		er		Other (list)	102	<u>3</u>) ₄ <u>O</u> 5 <u>O</u>
• CRITICAI	. ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "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 violations no	ted			
D- 11	. (1 43/1	original JV.	Town - 4-11 (100			
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Establishm			_	Telephone Number	Date of Ins (mm/dd/yr)		ID#	
Hacie	enda	#1	6	812-422-2055 01/08/2024 109				
Establishm	ent Addres	ss (nu	mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	01/06/	2024		
	Pearl	Dr	, Evansville, IN, 47712					
Owner HMR	Acqui	siti	on Company, Inc.	Purpose:	Follow-up No		se Date /18/2024	
Owner's A				Follow-up	Summary	of Violation	ns:	
<reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td>$\mathbf{\hat{c}}$</td><td>_</td><td></td></reda<>		1		Complaint	$\mathbf{\hat{c}}$	_		
Person in C				Pre-Operational	$_{ m c}$ U	NC_	\mathcal{J}_{R} \mathbf{U}	
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Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)	
Certified Food Handler				Other (list)	10)	\bigcirc_3 \bigcirc	$)_{4}\bigcirc_{5}\bigcirc$	
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		RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		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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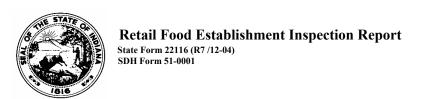
Establishm Arby		75,	1	Telephone Number		Date of Inspection (mm/dd/yr) 10847		
			mber and street, city, state, zip code)	812-421-1200	01/11	/2024	10847	
			ty Dr., Evansville, IN, 47712	<pre><redacted></redacted></pre>				
Owner) n a ra	.4:	a Compony	Purpose:	Follow-u		se Date	
		atın	g Company	Routine	No		21/2024	
Owner's Ad				Follow-up	Summary	of Violation	ns:	
Person in C				Complaint	\cap	?	$\frac{3}{R}$	
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Responsible			il	Temporary	Menu Ty	pe (See addi	tional page)	
				НАССР				
Certified Fo		er		Other (list)	1 2	<u></u>	<u>)4</u> <u>0</u> 5 <u>0</u>	
• CRITICAL	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	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 Co	orrected By	
344	NC		Hand sink in kitchen ind	accessible		Co	rrected	
433	NC		Mops stored impro	operly		Corrected		
218	NC		Dishwasher no dispensing sani	shwasher no dispensing sanitizer at proper level				
						_		
Received by	`		orinted):	Inspected by (name and title p < redacted>	rinted):			
Received by				Inspected by (signature):				
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Establishm		rΔV	v Pub	Telephone Number	Date of Ins (mm/dd/yr		ID#
			mber and street, city, state, zip code)	812-909-1956	01/08	/2024	13866
			n Ave., Evansville, IN, 47712	<pre><redacted></redacted></pre>			
Owner			, ,	Purpose:	Follow-uj		se Date
John N	Mills			Routine	No	01/	18/2024
Owner's Ac				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)
C (C IE	177 11			Other (list)			$\bigcap_{i} (A_i)$
Certified Fo		er			$1 \bigcirc 2$	<u> </u>	<u> 14050</u>
		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MADVED "C"			
					ID IN THE N	ADD ATIME	DELOW AC 4D9
Section#	C/NC	R	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU Narrative	MIMARY OF VIOLATIONS" AN	DINTHEN		
Section#	C/NC	K		to d		10 ве С	orrected By
			No violations no	nea			
Received by	(nama and	title :	printed):	Inspected by (name and title p	rintad):		
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Establishm		- N	A o ul co t	Telephone Number Date of Inspection (mm/dd/yr)				
			1arket	812-306-4820	01/12	/2024	14307	
Establishm	ent Addres	ss (nu	mber and street, city, state, zip code)	<pre><redacted></redacted></pre>	0 .,			
4	am Si	166	et Suite C, Evansville, IN, 47708		F 11	D 1		
Owner Ken B	utlar.			Purpose:	Follow-up	n Releas	se Date //22/2024	
Owner's A				Routine				
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>Summary</td><td>of Violatio</td><td>ns:</td></reda<>				Follow-up	Summary	of Violatio	ns:	
Person in C				Complaint	L ()	($0_{\rm R}$	
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Responsible			il	Temporary	Menu Typ	e (See addi	tional page)	
				НАССР		~ ~		
Certified F	ood Handl	er		Other (list)	$1\bigcirc 2$	\bigcirc 3 \bigcirc) ₄ \(\) ₅ \(\)	
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"				
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative		I	To Be Co	orrected By	
Sections	Circ		No noted violation	nne		10 20	711 cerea By	
			140 Hoted violatio	JI 13.				
			<u> </u>					
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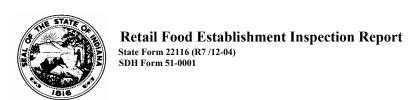
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Crum	ıbl Co	ook	kie	930-212-0677	` '	2024	14380
			mber and street, city, state, zip code)		01/09/	2024	
5435 l	Pearl	Dr	., Evansville, IN, 47712	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Brons		op	er	✓ Routine	No	01/	19/2024
Owner's Ac				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$ \cup	NC_	J _R U
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Responsible	e Person's	E-ma	il	НАССР	Menu Type	(See addi	tional page)
Certified F	ood Handle	210		Other (list)	1000) ,(),()_5()
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		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MADIZED «C»			
					ID IN THE N	DD ATIME	DELOW AC 4D*
	C/NC		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	SUMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative Native	. 1		10 Be Co	orrected By
			No violations r	oted			
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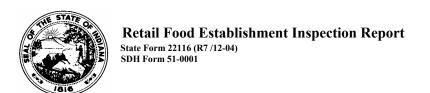
Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#
Waylo	on's l	Dir	ner	812-777-0088	01/08/		14618
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	01/06/	2024	
	Main	St	t, Evansville, IN, 47711				
Owner	. 1.10 %	٠:٠		Purpose:	Follow-up		se Date
Ashley		un		✓ Routine	No	101/	18/2024
Owner's Ad				Follow-up	Summary o	f Violation	is:
Person in C				Complaint		NC_() ()
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Responsible			il	Temporary	Menu Type	(See addi	tional page)
				НАССР			
Certified F		er		Other (list)	$_{1}\bigcirc_{2}($	\bigcirc_3 \bigcirc	$)_{4} \bigcirc_{5} \bigcirc$
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• CRITICAL	L ITEMS AF	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			To Be Co	orrected By
			No violations no	ted			
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Establishm Parlo		arh	ershop	Telephone Number Date of Inspection (mm/dd/yr) 1.464				
			mber and street, city, state, zip code)	812-492-0096	01/09	/2024	14626	
			klin, Evansville, IN, 47712	<pre><redacted></redacted></pre>				
Owner				Purpose:	Follow-up		se Date	
Alex F	Rocha	1		✓ Routine	No	01/	19/2024	
Owner's A				Follow-up	Summary	of Violation	ns:	
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Person in C				Pre-Operational	\mathbf{C}	NC ($0_{\rm R}$	
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Responsibl	e Person's	E-mai	1	НАССР	Menu Typ	e (See addi	tional page)	
Certified F	ood Handl	er		Other (list)	1 2	<u>3</u>	<u> 1405</u>	
• CRITICAI	L ITEMS AI	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"	<u> </u>			
• 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 Co	orrected By	
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Establishm Kitche		2		Telephone Number () Establishment Date of Inspection (mm/dd/yr) 01/08/2024				
			mber and street, city, state, zip code) Ch, Evansville, IN, 47711	() Owner				
Owner				Purpose:		Yes Release Date 01/15/2024		
Owner's Ac	ddress			Follow-up Complaint		of Violation	_	
Person in C	Charge			Pre-Operational	c 0	NC_	$\frac{0}{R}$	
Responsible	e Person's	E-ma	il	Temporary HACCP	Menu Ty	pe (See addi	tional page)	
Certified Fo	ood Handl	er		Other (list)	$1 \bigcirc 2$	<u>3</u>)4050	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMN FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE		" AND IN THE N	JARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative				orrected By	
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			Approved for op	eration.				
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Be Ha		Ρi	e Company	Telephone Number (812-449-7718)	Date of Ins (mm/dd/yr)	то# 15171
			mber and street, city, state, zip code)		01/12	/2024	'••'
6225 E			a Suite C., Evansville, IN, 47715	<pre>(<redacted></redacted></pre>			
Owner Jennif	er I a	mh	مار	Purpose:	Follow-up Yes		se Date 22/2024
		1110		Routine			
Owner's Ac				Follow-up	Summary	of Violation	
Person in C				Complaint	()	NC_() ()
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td>R</td></reda<>				Pre-Operational	C	NC_	R
Responsible	e Person's	E-ma	il	Temporary HACCP	Menu Typ	e (See addi	tional page)
Certified Fo	ood Hondle	DP .		Other (list)	102	(•) ₂ (),()_5()
Ceruneu re	oou manun				102	<u></u>	<u> </u>
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS 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	orrected By
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