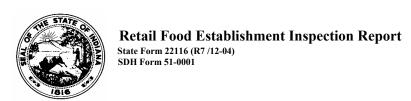
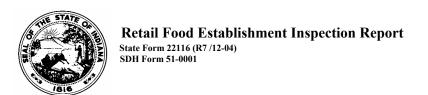


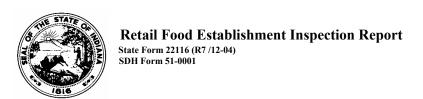
Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Chav	as M	ex	ican Grill	812-401-1977	05/20/2	2024	12239
			mber and street, city, state, zip code)	<pre><redacted></redacted></pre>	03/20/	2024	
	1 1 St <i>F</i>	<del>\</del> VE	e, Evansville, IN, 47710				
Owner Mauro	Mart	ine	22	Purpose:	Follow-up NO		se Date // 30/2024
Owner's Ac		.1110	,,,	<del>                                      </del>			
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>Summary o</td><td></td><td></td></reda<>				Follow-up	Summary o		
Person in C				Complaint	$\mathbf{L}_{\mathbf{G}}\mathbf{U}$	NC_	1 50
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Pre-Operational</td><td><u> </u></td><td>NC</td><td>_ R</td></reda<>	cted>			Pre-Operational	<u> </u>	NC	_ R
Responsible	e Person's	E-ma	il	Temporary	Menu Type	(See addi	tional page)
				HACCP		\ G	
Certified Fo		er		Other (list)	1 <u></u> 2		<u>/4</u> 05 <u></u>
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"	I		
• 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		r	Го Ве Со	orrected By
342	NC		Hand wash sink not reachin	g 100 degrees.		05/2	20/2024
Received by		_	printed):	Inspected by (name and title p	rinted):		
<red< td=""><td></td><td></td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></red<>				<redacted></redacted>			
Received by	(signature)	):		Inspected by (signature):			
cc:			cc:		cc:		
					ĺ		



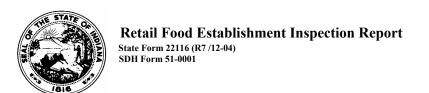
Establishm				Telephone Number	Date of Inspo (mm/dd/yr)	ection	ID#
Cleav	ers/			812-473-0001	05/21/2	2024	11958
			mber and street, city, state, zip code)	<pre>(<redacted>)</redacted></pre>	05/21/	2024	
	= Indi	an	a St, Evansville, IN, 47715	<re><reuacieu></reuacieu></re>			
Owner				Purpose:	Follow-up		se Date
		3 B	renda Flores	Routine	No	05/	31/2024
Owner's Ac				Follow-up	Summary o	f Violatior	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	$_{\rm C}$	NC_(	$\mathcal{L}_{R}$
<reda< td=""><td></td><td></td><td>2</td><td>Temporary</td><td>), =</td><td>(C 11:</td><td></td></reda<>			2	Temporary	), =	(C 11:	
Responsible	e Person's	E-ma	11	НАССР	Menu Type	(See addi	tional page)
Certified Fo	ood Handle	nr.		Other (list)	$1_1\bigcirc_2$	)	$)_4\bigcirc_5\bigcirc$
<redag< td=""><td></td><td>CI.</td><td></td><td></td><td></td><td><u>3</u></td><td><u>/4030</u></td></redag<>		CI.				<u>3</u>	<u>/4030</u>
		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MADVED "C"			
					ID IN THE NA	DD 4 THE	DEL OW 10 (D
	. ,		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative Native	. 1		I o Be Co	orrected By
			No violations no	oted.			
						_	
Received by	(name and	title 1	printed):	Inspected by (name and title p	rinted):		
<red< td=""><td>*</td><td>_ *</td><td>,</td><td><redacted></redacted></td><td><i>,</i> ,</td><td></td><td></td></red<>	*	_ *	,	<redacted></redacted>	<i>,</i> ,		
Received by				Inspected by (signature):			
	(= 8	•		F 2 ( ~ - 0 ) .			
cc:			cc:		cc:		
I					1		



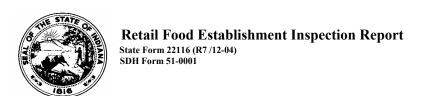
							-
Oran		af	of Evansville	Telephone Number	Date of Ins (mm/dd/yr		то# 11955
				812-401-5215	05/21	/2024	11955
701 N	Burk	haı	mber and street, city, state, zip code) rdt Rd, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
Owner	ווי ום	•	/01 5	Purpose:	Follow-up		se Date
		ıps	s/OLEvansville LLC	<b>✓</b> Routine	No	05/	31/2024
Owner's A				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td>) (</td></reda<>				Complaint	$\cap$	(	) (
Person in C				Pre-Operational	$_{\rm C}$ U	NC (	$0_{\rm R}$
<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	HACCP	Menu Typ	oe (See addi	tional page)
C CC IE	177 11			Other (list)	100		$\bigcirc$
Certified Fo		er				<u> </u>	<u>/4050</u>
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	AARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		IN IN THE N	ADDATIVE	DELOWAS "D"
Section#	C/NC	R	Narrative	WINIART OF VIOLATIONS AN	DIN THE N		orrected By
Section#	C/NC	N	No violations no	tod		то ве С	Trected By
			NO VIOIALIONS NO	ieu.			
Received by	(name and	title p	printed):	Inspected by (name and title p	rinted):		
<pre><reda< pre=""></reda<></pre>	acte	<b>&lt;</b> c		<redacted></redacted>			
Received by				Inspected by (signature):			
cc:			cc:		cc:		
					1		



				T =			
Jimm		าทร		Telephone Number	Date of Ins (mm/dd/yr		ID#
	<del></del>		mber and street, city, state, zip code)	812-401-5400	05/21	/2024	11607
			rdt Rd, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-u		se Date
KEN E	BUTL	<u>ER</u>		<b>✓</b> Routine	No	05/	31/2024
Owner's Ac				Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td></td><td>) (</td></reda<>				Complaint	$\cap$		) (
Person in C				Pre-Operational	$_{\rm C}$	NC_	$\frac{2}{R}$
Responsible			:1	Temporary	Monu Tva	o (Saa addi	tional page)
Kesponsibio	e rerson's	c-ilia	ш	НАССР	Menu Typ	se (see aaai –	nonai page)
Certified F	ood Handle	er		Other (list)	$1\bigcirc 2$	$\bigcirc_3$ ( $\bullet$	$)_4\bigcirc_5\bigcirc$
<redac< td=""><td></td><td></td><td></td><td></td><td>1</td><td><u> </u></td><td><u> </u></td></redac<>					1	<u> </u>	<u> </u>
• CRITICAL	L ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "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
342	NC		Grease trap log not m	aintained.		05/2	21/2024
433	NC		Mop stored incorrectly ne			Со	rrected
			,				
D-: 11	. (	4141		Turnested 1 ( 170			
Received by			orinted):	Inspected by (name and title properties)	rinted):		
Received by				Inspected by (signature):			
Received by	(Signature)	,.		inspected by (signature).			
cc:			cc:		cc:		



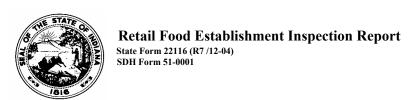
Establishm		<u> </u>	N. D. (	Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
			China Bistro	812-475-2888	05/23/	2024	11584
			mber and street, city, state, zip code) d, Evansville, IN, 47715	<pre>(<redacted></redacted></pre>	00/20/	2024	
Owner	v ogo.		a, <u>Evanovino, nv, nn no</u>	Purpose:	Follow-up	Releas	se Date
Ling T				Routine	No		02/2024
Owner's A				Follow-up	Summary o	f Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td>) ()</td></reda<>				Complaint	$\cap$	(	) ()
Person in C				Pre-Operational	$_{\rm C}$	NC_	$\frac{1}{R}$
Responsible			<u> </u>	Temporary	Menu Tyne	(See addi	tional page)
Kesponsibio	c i cison s	L-IIIA		НАССР	Wichu Type		nonai page)
Certified F		er		Other (list)	$1\bigcirc 2$	$)_3$	$)_4 \bigcirc_5 \bigcirc$
<redac< td=""><td>cted&gt;</td><td></td><td></td><td></td><td></td><td></td><td></td></redac<>	cted>						
• CRITICAL	ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
• VIOLATIO		ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No violations no	oted.			
Received by	(name and	title p	printed):	Inspected by (name and title p	rinted):		
<reda< td=""><td>acte</td><td> k</td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></reda<>	acte	 k		<redacted></redacted>			
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



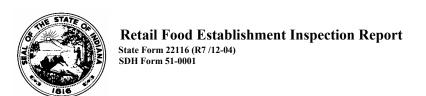
			•		_			
Establishme		റാ	s Tiendas Restaurant	Telephone Number	Date of Ins (mm/dd/yr		тр# 11580	
				812-475-3483	05/23	/2024	11560	
			mber and street, city, state, zip code) bach Ave, Evansville, IN, 47714	<pre>(<redacted></redacted></pre>				
Owner Jose/E		/lire	anda	Purpose:	Follow-up		se Date 02/2024	
		VIII C	aliua	Routine				
Owner's Ad				Follow-up	Summary	of Violation		
Person in C				Complaint	1		$2_{R}3$	
<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	Person's	E-ma	il	Temporary HACCP	Menu Typ	oe (See addi	itional page)	
G 18 15				Other (list)			$\bigcirc$	
Certified Fo		er			1 2	<u> </u>	<u> 1405</u>	
• CRITICAL	ITEMS AF	RE 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	
146	NC	R	Ready to eat grab & go items lack	ring required labeli	ng.	05/2	23/2024	
411	NC	R	Lighting intensity in coolers & kitche	en below requireme	ents.			
191	С	R	Ready to eat potentially hazardous	food not date mar	ked.	05/2	23/2024	
Received by	(name and	l titla •	printed).	Inspected by (name and title p	rinted):			
<red< td=""><td>•</td><td></td><td></td><td><redacted></redacted></td><td>inicu).</td><td></td><td></td></red<>	•			<redacted></redacted>	inicu).			
Received by				Inspected by (signature):				
cc:			сс:		cc:			



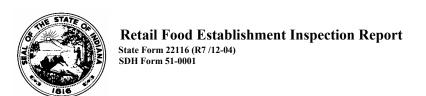
				T			
Taco		#3	001063	Telephone Number (812-473-0040)	Date of Ins (mm/dd/yr	o)	ъ# 11555
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)		05/23	/2024	
1001	√ Gre	en	River Rd, Evansville, IN, 47715	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-u		se Date
Bell In	idiana	a LI	_C	<b>✓</b> Routine	No	06/	02/2024
Owner's Ac				Follow-up	Summary	of Violation	ns:
<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			$0_{\rm R}$
<reda< td=""><td>cted&gt;</td><td></td><td></td><td></td><td>L</td><td>. NC</td><td> K</td></reda<>	cted>				L	. NC	K
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР		~ ~	
Certified Fo	ood Handl	er		Other (list)	$_{1}\bigcirc_{2}$	$\bigcirc_3 \bigcirc$	$)_{4} \bigcirc _{5} \bigcirc $
<redac< td=""><td>cted&gt;</td><td></td><td></td><td></td><td></td><td><u> </u></td><td></td></redac<>	cted>					<u> </u>	
• CRITICAL	LITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIC	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
			No violations not	ted.			
							-
D: 11	(	4:41		Turnest The Control			
Received by	*			Inspected by (name and title pr	rinted):		
<reda< td=""><td></td><td></td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></reda<>				<redacted></redacted>			
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm				Telephone Number	Date of Insp	ection	ID#
Roun	ders	Pi	zza	812-424-4960	(mm/dd/yr) 05/23/	2024	11290
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	03/23/	ZUZ <del>4</del>	
	/ IVIIII	Ru	, Evansville, IN, 47710			1	<u> </u>
Owner David	Molin	et		Purpose:  Routine	Follow-up NO		se Date 02/2024
Owner's Ac				Follow-up	Summary o	f Violatio	ns:
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Complaint</td><td>آ م</td><td></td><td></td></reda<>	cted>			Complaint	آ م		
Person in C				Pre-Operational	$_{\rm C}$ U	NC_	J <sub>R</sub> U
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Temporary</td><td>)</td><td>110</td><td> ~</td></reda<>	cted>			Temporary	)	110	~
Responsible	e Person's	E-mai	il	HACCP	Menu Type	: (See addi	tional page)
G 10 17				Other (list)	-	7.6	$\bigcap$
Certified Fo		er			1 22	<u> </u>	<u>/405</u>
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No violations to r	note.			
							-
Received by	`		printed):	Inspected by (name and title properties)	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



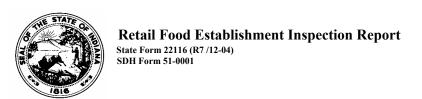
Establishm McDC		s-l	Eastland	Telephone Number (812-720-3781	Date of Ins (mm/dd/yr	r)	то# 11208
Establishm	ent Addres	ss (nu	mber and street, city, state, zip code)	( ) Owner	05/23	3/2024	
	Gree	n F	River Rd, Evansville, IN, 47714	<pre><redacted></redacted></pre>			
Owner	C.54.5.		and I C/ Curan Mains	Purpose:	Follow-u		se Date
		pri	ses LLC/ Susan Mann	<b>✓</b> Routine	No	06/	02/2024
Owner's A				Follow-up	Summary	of Violation	
Person in C		'		Complaint	$\cap$	NC_	1 0
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>c_<b>C</b></td><td>_ NC</td><td>R_</td></reda<>				Pre-Operational	c_ <b>C</b>	_ NC	R_
Responsible			il	Temporary	Menu Tyj	pe (See addi	tional page)
				НАССР			
Certified F		er		Other (list)	1 <u>0</u> 2	<u>3</u>	<u>)4</u> <u>0</u> 5 <u>0</u>
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	JARRATIVE	RELOW AS "R"
Section#	C/NC	R	Narrative	MINIARI OF VIOLATIONS AN	DIN THE		orrected By
138	NC	K	Observed employees not wearing proper hair	restraints and heard re	etrainte		23/2024
130	IVC		Observed employees not wearing proper nair	restraints and beard re	straints.	03/2	20/2024
						<del>                                     </del>	
						<u> </u>	
Received by	,			Inspected by (name and title p < redacted>	rinted):		
Received by	(signature	):		Inspected by (signature):			
co:			20:		co:		
cc:			cc:		cc:		



			•	•			
Establishm		Di-	zza #2574	Telephone Number	Date of Ins (mm/dd/yr		ID#
				<u> </u>	05/20	/2024	10922
			mber and street, city, state, zip code) e, Evansville, IN, 47710	' <redacted></redacted>			
Owner	IFP	177	ZA, INC	Purpose:  Routine	Follow-uj		se Date //30/2024
Owner's Ac		144	-A, INO	<del></del>		L	
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>Summary</td><td>of Violation</td><td></td></reda<>				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)
G (C IE	1 77 11			Other (list)			$\bigcirc$
Certified Fo		er			$1 \bigcirc 2$	<u> </u>	<u> 1405</u>
• CRITICAL	ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMN	S MARKED "C"			
• VIOLATIC	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "	SUMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be C	orrected By
			No violations to	note.			-
Received by		_	printed):	Inspected by (name and title p	rinted):		
Received by	(signature	):		Inspected by (signature):			
cc:			ce:	1	cc:		



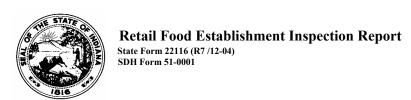
							т —
The C		ola	Jar East	Telephone Number (812-401-8111	Date of Ins (mm/dd/yr	o)	то# 14570
			mber and street, city, state, zip code)		05/24	/2024	
5600 I	E Virg	gini	a, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Nealie	<b>Anth</b>	on	у	<b>✓</b> Routine	No	06/	03/2024
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 (	$0_{\rm R}$
<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	HACCP	Menu Typ	e (See addi	tional page)
G 18 17				Other (list)			$\bigcirc$
Certified Fo		er			$1 \bigcirc 2$	<u> </u>	<u> 1405</u> 0
				<u> </u>	<u> </u>		
• CRITICAL	L ITEMS AF	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	AARKED "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	ted.			
Received by	(name and	title 1	orinted):	Inspected by (name and title p	rinted):		
<red< td=""><td>*</td><td></td><td>······································</td><td><redacted></redacted></td><td></td><td></td><td></td></red<>	*		······································	<redacted></redacted>			
Received by				Inspected by (signature):			
Received by	(signature	).		inspecied by (signature):			
cc:			cc:		cc:		



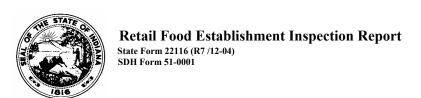
Establishm				Telephone Number	Date of Ins		ID#	
			lexican Restaurant	812-437-5089	`	/2024	14843	
			nber and street, city, state, zip code)	<redacted></redacted>	03/21	/2024		
1	Gree	n k	River Rd, Evansville, IN, 47715		<u> </u>			
Owner Uriel (	ordo	ha		Purpose:	Follow-u		se Date //31/2024	
Owner's A		Da		Routine	_			
<reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>Summary</td><td>of Violation</td><td></td></reda<>				Follow-up	Summary	of Violation		
Person in C				Complaint Pre-Operational	$\begin{bmatrix} 0 \end{bmatrix}$	NC_	<b>1</b> ₀ U	
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Temporary</td><td>L</td><td>. NC</td><td>_ K</td></reda<>	cted>			Temporary	L	. NC	_ K	
Responsible	e Person's	E-mai	I	HACCP	Menu Tyj	oe (See addi	tional page)	
				Other (list)		$\bigcirc_3$	$\cap \cap$	
Certified F		er			$1 \cup 2$	<u> </u>	<u>/45_</u>	
• CRITICAI	L ITEMS AR	RE IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "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	
218	NC		Door to cooler in need	l of repair.		05/2	21/2024	
218	NC		Freezer floor in need	of repair.		05/21/2024		
433	NC		Mop stored incorrectly in ba	ack of kitchen.		Co	rrected	
177	NC		Food stored incorrectly on t	floor in freezer.		Со	rrected	
						<u> </u>		
						1		
						ı		
						1		
						·		
Received by			· · · · · · · · · · · · · · · · · · ·	Inspected by (name and title pr	rinted):			
<red< td=""><td><u>acte</u></td><td><u>  t</u></td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></red<>	<u>acte</u>	<u>  t</u>		<redacted></redacted>				
Received by	(signature)	):		Inspected by (signature):		·		
cc:			ce:		cc:			
					I			



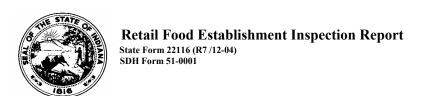
Establishm				Telephone Number	Date of Insp	ection	ID#
THAI	ORC	H	IDS	765-729-6001	(mm/dd/yr)	2024	14851
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)		05/24/	2024	
601 Booi	nville Ne	w H	larmony Rd Suite 200, Evansville, IN, 47725	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Eric C				<b>✓</b> Routine	No	06/	03/2024
Owner's A				Follow-up	Summary o	f 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	$_{\rm C}$	NC_	J <sub>R</sub> U
<reda< td=""><td></td><td></td><td>2</td><td>Temporary</td><td>М Т</td><td></td><td></td></reda<>			2	Temporary	М Т		
Responsible	e Person's	E-mai	Ш	НАССР	Menu Type	: (See aaai	tional page)
Certified F	ood Handle	a <b>r</b>		Other (list)	$1_1\bigcirc_2$	$\bigcirc_3$	$)_4\bigcirc_5\bigcirc$
certifica r	ood Handi	<b>,</b> 1				<u></u>	<u>/4030</u>
• CRITICAL	. ITEMS AD	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"	1		
					IN IN THE N	DD A TIME	DELOW AC 4D*
	C/NC		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MINIARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative	4l		то ве С	orrected By
			No violations no	tea.			
-							
							-
Dagaine d 1	. (mans 1	4;41 -	winted).	Inamostod by (r 4 'd	rintad):		
Received by				Inspected by (name and title p < redacted>	imtea):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



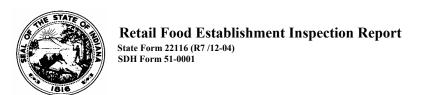
Establishme				Telephone Number	Date of Inspe (mm/dd/yr)	ction	ID#
Woods & Stems				812-602-3028		2024	14861
			mber and street, city, state, zip code)	( ) Owner	05/20/2	2024	
2033 V	V Fra	nkli	in St, Evansville, Indiana, 47712	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Rebec		00	ds	<b>✓</b> Routine	No	05/	30/2024
Owner's Ac				Follow-up	Summary of	Violation	1S:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td>) (</td></reda<>				Complaint	$\cap$	(	) (
Person in C				Pre-Operational	$_{\rm C}$ U	NC_(	J <sub>R</sub> U
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary			
Responsible	e Person's	E-mai	il	НАССР	Menu Type	(See addi	tional page)
Certified Fo	and Handle			Other (list)	1000		),()_()
Ceruneu ro	ou nanui	er				<u></u>	<u>/4030</u>
• CDITICAL	ITEMS AD	E IDE	ENTERED IN THE CHECKLIST AND NADDATIVE COLUMNS A	ADVED 4C9			
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative		1	To Be Co	orrected By
			No noted violation	ons.			
Received by	(name and	title p	printed):	Inspected by (name and title pr	rinted):		
<red< td=""><td>acte</td><td></td><td></td><td><redacted></redacted></td><td></td><td></td><td></td></red<>	acte			<redacted></redacted>			
Received by				Inspected by (signature):			
cc:			cc:		cc:		



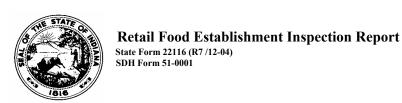
Establishm			_	Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Thai I	Bistro	8 (	ι Bar	(812-303-3153	05/23/	2024	15133
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	05/23/	2024	
	E. Ind	iar	na St., Evansville, IN, 47715	<redacted></redacted>			
Owner				Purpose:	Follow-up		se Date
Piya F		<u>an</u>		<b>✓</b> Routine	No	06/	02/2024
Owner's A				Follow-up	Summary o	of Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td></td><td>(</td><td><math>\cap</math></td></reda<>				Complaint		(	$\cap$
Person in C				Pre-Operational	$C_{\underline{\mathbf{U}}}$	NC_(	$\mathcal{L}_{R}$
Responsible			:1	Temporary	Manu Trini	(Can addi	tional page)
Kesponsibio	e rerson's	c-ilia	II	НАССР	Menu Type	s (see aaai	iionai page)
Certified F	ood Handle	er		Other (list)	$ _{1}\bigcirc_{2}($	)₃(●	$)_4\bigcirc_5\bigcirc$
<redag< td=""><td></td><td>-</td><td></td><td></td><td></td><td><u></u></td><td><u> </u></td></redag<>		-				<u></u>	<u> </u>
		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
					ID IN THE NA	DDATIVE	DELOWAS 6D2
	C/NC		PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	UMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative	- 4 d		то ве С	orrected By
			No violations no	otea.			
D: 11	. ( '	4:41		In-markethar ( 1993	-i44)		
Received by	*	_ *	printea):	Inspected by (name and title posterior)	rintea):		
Received by				Inspected by (signature):			
	- ′						
cc:			cc:		cc:		



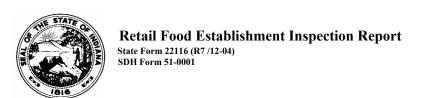
Establishm		ha	r & Grill	Telephone Number	(mm/dd/vn)				
			mber and street, city, state, zip code)	618-263-7786	05/20	/2024	15136		
			Ave, Evansville, IN, 47714	<pre><redacted></redacted></pre>					
Owner				Purpose:	Follow-up		se Date		
Micke	-	nm	ond	Routine	No	05/	26/2024		
Owner's A				Follow-up	Summary	of Violation	ns:		
<reda< td=""><td></td><td>'</td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td></td></reda<>		'		Complaint	$\cap$	(			
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>c</td><td>NC_</td><td><math>0_{R}</math></td></reda<>				Pre-Operational	c	NC_	$0_{R}$		
Responsible			i	Temporary	Menu Tvp	e (See addi	tional page)		
				НАССР					
Certified For		er		Other (list)	$1 \bigcirc 2$	<u>3</u>	<u>)4</u> 050		
• 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 to r	note.					
Received by		_		Inspected by (name and title p	rinted):				
Received by				Inspected by (signature):					
cc:			сс:		cc:				



Establishm		1er	ral Store #25620		Pate of Inspection (mm/dd/yr)  15-855-4000 Date of Inspection (mm/dd/yr)  15-175				
			mber and street, city, state, zip code)	٠.		05/24	1/2024	13173	
4818 Chase Dr, Evansville, IN, 47725				(<	<redacted></redacted>				
Owner				Pu	irpose:	Follow-u		se Date	
Dolge		), L	LC		Routine	No	06/	03/2024	
Owner's A					Follow-up	Summary	of Violation	ns:	
<reda< td=""><td></td><td>•</td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td>) ()</td></reda<>		•			Complaint	$\cap$	(	) ()	
Person in C				~	Pre-Operational	$_{\rm C}$ $_{\rm C}$	NC_	$0_{R}$	
<reda< td=""><td></td><td></td><td></td><td>厂</td><td>Temporary</td><td></td><td></td><td></td></reda<>				厂	Temporary				
Responsible	e Person's	E-ma	il		НАССР	Menu Ty	se (See addi	itional page)	
Certified F	1 17 11			╀	Other (list)	100		$\bigcirc$	
Certified F	ood Handi	er				1 2	<u> </u>	<u> 14050</u>	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M						
			D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	DINTHEN			
Section#	C/NC	R	Narrative				To Be Co	orrected By	
			Approved for oper	atı	on.		<u> </u>		
Received by				_	redacted>	rinted):			
Received by					pected by (signature):				
cc:			ce:			cc:			



Establishm	ont Nama			Telephone Number	Date of Ins	naction	ID#	
Camp		/e2		(812-204-3911	(mm/dd/yr) 1521			
			mber and street, city, state, zip code)		03/23/2024			
			ew Harmony Road, Evansville, IN, 47725	' <redacted></redacted>				
Owner				Purpose:	Follow-uj		se Date	
Shawı	าa Bit	tne	er	Routine	No	06/	02/2024	
Owner's Ac				Follow-up	Summary	of Violation	ns:	
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\mathbf{a}</math></td><td>(</td><td>) (</td></reda<>				Complaint	$\mathbf{a}$	(	) (	
Person in C				✓ Pre-Operational	$_{\rm C}$ U	NC (	$\int_{\mathbf{R}} 0$	
<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 Typ	e (See addi	tional page)	
Certified F	ood Handl	ar .		Other (list)	102	$\bigcirc$	),(),()	
Certified F	ood Handi	CI.			1 2	<u> </u>	<u> </u>	
• CRITICAI	ITEMS AF	E IDF	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"	<u> </u>			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	ARRATIVE	RELOWAS "R"	
Section#	C/NC	R	Narrative	WINDER OF VIOLATIONS IN	D II ( III D I (		orrected By	
Sectionii	Circ	10	Approved for oper	ation		10 Bt C	Miceteu By	
			Approved for oper	ation.				
Received by				Inspected by (name and title p	rinted):			
				<redacted></redacted>				
Received by	(signature	):		Inspected by (signature):				
cc:			cc:		cc:			



					1		т —	
Kelse Kelse		or	es/Camp Reveal	Telephone Number 812-204-3911	Date of Inspection (mm/dd/yr) ID #			
			mber and street, city, state, zip code)		03/23/2024			
			ew Harmony Road, Evansville, IN, 47725	<pre><redacted></redacted></pre>				
Owner Shawi	na Rit	tne	ar	Purpose:	Follow-uj		se Date // 02/2024	
Owner's A		uic	<b>,</b> 1	Routine		1		
<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 ()	,,,(	$0_{\rm R}$	
<reda< td=""><td></td><td></td><td></td><td>✔ Pre-Operational</td><td>  C</td><td>NC_</td><td><u> R</u></td></reda<>				✔ Pre-Operational	C	NC_	<u> R</u>	
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	tional page)	
				НАССР				
Certified F	ood Handl	er		Other (list)	1 2	<u> </u>	<u>)4</u> 050	
• CRITICAL	. ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	I IARKED "C"	l			
• 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	
			Approved for oper	ation.				
				<u> </u>				
D : 11	<u> </u>			Y 11 ( 10)				
Received by	*			Inspected by (name and title p <redacted></redacted>	rınted):			
				Inspected by (signature):				
	. 5			1 3 ( 2),				
cc:			сс:		cc:			
Ī								