

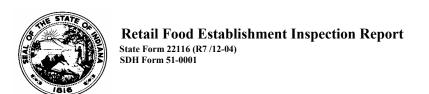
| Establishm | | | | Telephone Number | Date of Ins | | ID# |
|--|--------------|-----------|---|--------------------------------|--------------|------------------------|-----------------------------|
| The F | Pizza | R | evolution | 812-430-5945 | (mm/dd/yr) | | 12027 |
| | | | mber and street, city, state, zip code) | <redacted></redacted> | 07/17 | /2024 | |
| 3443 | Kansa | as | Rd, Evansville, IN, 47725 | <re><redacted></redacted></re> | | | |
| Owner | D I | | | Purpose: | Follow-up | | se Date |
| | | (en | paugh | ✓ Routine | No | 07/ | 27/2024 |
| Owner's A | | | | Follow-up | Summary | of Violation | ns: |
| <reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td>\cap</td><td>(</td><td>) ()</td></reda<> | | 1 | | Complaint | \cap | (|) () |
| Person in C | | | | Pre-Operational | C | NC_(| J _R U |
| Responsible | | | | Temporary | Menu Tyr | e (Saa addi | tional page) |
| Responsible | c i ci son s | L-ma | | НАССР | wienu Typ | c (See addi | nonai page) |
| Certified F | ood Handl | er | | Other (list) | 10° | \bigcirc_3 \bullet | $)_{4}\bigcirc_{5}\bigcirc$ |
| <redac< td=""><td>cted></td><td></td><td></td><td></td><td></td><td><u></u></td><td><u></u></td></redac<> | cted> | | | | | <u></u> | <u></u> |
| • CRITICAI | L ITEMS AF | RE IDE | ENTIFIED 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 | ARRATIVF | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | <u> </u> | | orrected By |
| Sections | Crite | | No violations to r | note | | 10 20 00 | mreeteu By |
| | | | 140 Violations to 1 | 1010. | | | |
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| Received by | (name and | l title 1 | 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 | | | | Inspected by (signature): | | | |
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| cc: | | | сс: | | cc: | | |
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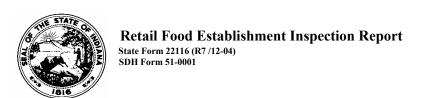
| | | | • | | | | | |
|--|------------|-----------|---|--------------------------------|--------------------------|--------------|---------------------------|--|
| Establishmo | | # | 2148 | Telephone Number | Date of Ins (mm/dd/yr | | то# 11993 | |
| | | | mber and street, city, state, zip code) | 812-491-9976 | 07/17 | /2024 | 11993 | |
| | | | River Rd, Evansville, IN, 47715 | ' <redacted></redacted> | | | | |
| Owner Chedo | dar's (| Cas | sual Cafe | Purpose: Routine | Follow-uj | | se Date 27/2024 | |
| Owner's Ac | | | | Follow-up | Summary | of Violation | | |
| <reda< td=""><td>cted></td><td></td><td></td><td>Complaint</td><td>Suilillary</td><td>_</td><td>_</td></reda<> | cted> | | | Complaint | Suilillary | _ | _ | |
| Person in C | | | | Pre-Operational | $_{\rm c}$ U | NC S | $3_{\rm R}0$ | |
| <reda< td=""><td></td><td></td><td>9</td><td>Temporary</td><td>Manus Tana</td><td>- (C 11:</td><td>tional page)</td></reda<> | | | 9 | Temporary | Manus Tana | - (C 11: | tional page) | |
| Responsible | e Person's | Ł-ma | II | П НАССР | Menu Typ | e (see aaai | tional page) | |
| Certified Fo | | er | | Other (list) | $1 \bigcirc 2$ | <u>3</u> | $0_4 \bigcirc 5 \bigcirc$ | |
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| | | | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | | | | | |
| | | | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | MMARY OF VIOLATIONS" AN | D IN THE N | | | |
| Section# | C/NC | R | Narrative | | | | orrected By | |
| 310 | NC | | Hood system in need o | | | | 17/2024 | |
| 431 | NC | | Kitchen in need of c | leaning. | | 07/17/2024 | | |
| 218 | NC | | Back door in need of repair areas op | en to outside elem | nents. | 07/ | 17/2024 | |
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| Received by | (name and | l title i | printed): | Inspected by (name and title p | rinted): | | | |
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| Received by | | | | Inspected by (signature): | | | | |
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| cc: | | | cc: | | cc: | | | |
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|--|------------|-------|--|--|--------------------------|--------------|-------------------------------|
| Establishme Wolfe | | utc | Auction Inc | Telephone Number (812-425-4576) | Date of Ins (mm/dd/yr | ·j | то# 11455 |
| | | | mber and street, city, state, zip code) KY AVE, EVANSVILLE, IN, 47714 | () Owner | 07/18 | 3/2024 | |
| Owner Jeff W | | | | Purpose: | Follow-u | | se Date //28/2024 |
| Owner's Ac | | | | | 2 | | |
| <reda< td=""><td></td><td></td><td></td><td>Follow-up Complaint</td><td>_ `</td><td>of Violation</td><td></td></reda<> | | | | Follow-up Complaint | _ ` | of Violation | |
| Person in C | | | | Pre-Operational | $_{\rm C}$ ${\rm U}$ | | $0_{\rm R}$ |
| <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) |
| Certified Fo | | er | | Other (list) | $1\bigcirc 2$ | \bigcirc_3 | $)_4$ \bigcirc_5 \bigcirc |
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| • CRITICAL | LITEMS 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 noted violation | ons. | | | |
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| Received by | * | | | Inspected by (name and title p < redacted> | rinted): | | |
| Received by | | | | Inspected by (signature): | | | |
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| cc: | | | cc: | | cc: | | |



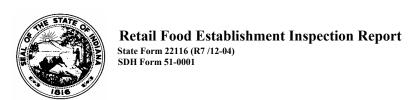
| Establishm O'Bri | | Spo | orts Bar & Grill | Telephone Number (812-401-4630 | Date of Ins (mm/dd/yr | ·) | то# 11322 |
|--|------------|--------|---|--|--------------------------|--------------|--------------------------------|
| | | | mber and street, city, state, zip code) | | 07/17 | /2024 | 11022 |
| | | | River Rd, Evansville, IN, 47715 | ' <redacted></redacted> | | | |
| Owner | Lot M | Ь Г | Jown Entertainment II.C | Purpose: | Follow-u | | se Date /27/2024 |
| | | e L | Down Entertainment, LLC | Routine | | | |
| Owner's A | | | | Follow-up | Summary | of Violation | |
| Person in C | | | | Complaint | \cap | NC_ | I |
| <reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>$_{\rm C}$</td><td>NC_</td><td>R_O</td></reda<> | | | | Pre-Operational | $_{\rm C}$ | NC_ | R_O |
| Responsible | | | il | Temporary | Menu Ty | oe (See addi | tional page) |
| | | | | НАССР | | | 2 0 |
| Certified F | ood Handl | er | | Other (list) | $1 \bigcirc 2$ | \bigcirc_3 | <u>)</u> 4 <u>0</u> 5 <u>0</u> |
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| • 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 |
| 297 | NC | | Ice machine guard | soiled. | | 07/ | 17/2024 |
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| Received by | , | | orinted): | Inspected by (name and title p < redacted> | rinted): | | |
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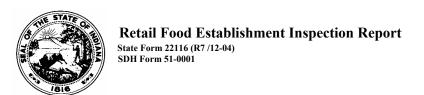
| Establishm | | _ | | Telephone Number | Date of In (mm/dd/y | | ID# |
|---|--|-------------|---|---|------------------------|-------------------------|---------------------------|
| | | | upermarket | 812-477-5341 | ` ' | 3/2024 | 11319 |
| | | | mber and street, city, state, zip code) | <pre></pre> | 07/10 | 0/2024 | |
| | Jover | <u>'t A</u> | ve, Evansville, IN, 47714 | <u> </u> | | | |
| Owner | ana t | بماد | th Foods II C | Purpose: | Follow-u | | 28/2024 |
| Owner's Ac | | <u> 101</u> | rth Foods LLC | Routine | No | | |
| <reda< td=""><td></td><td></td><td></td><td>Follow-up</td><td>Summary</td><td>of Violation</td><td>ns:</td></reda<> | | | | Follow-up | Summary | of Violation | ns: |
| Person in C | | | | Complaint | | | $\frac{2}{R}$ |
| <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 | | | il | Temporary | Menu Ty | pe (See addi | tional page) |
| - | | | | НАССР | | | |
| Certified Fo | | er | | Other (list) | $1\bigcirc 2$ | \bigcirc_3 \bigcirc | $0_4 \bigcirc 5 \bigcirc$ |
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| • CRITICAL | ITEMS AF | RE IDF | 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 | ND IN THE N | NARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | To Be Co | orrected By |
| 431 | NC | | Shelves under meat in the meat | t department soiled | d. | 07/1 | 8/2024 |
| 433 | NC | | Mops not properly store | | | 07/1 | 18/2024 |
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| Received by | (name and | l titla r | printed): | Inspected by (name and title p | rinted): | | |
| <red< td=""><td>`</td><td></td><td></td><td><redacted></redacted></td><td>minea).</td><td></td><td></td></red<> | ` | | | <redacted></redacted> | minea). | | |
| Received by | (signature) |): | | Inspected by (signature): | | | |
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| cc: | | | cc: | | cc: | | |
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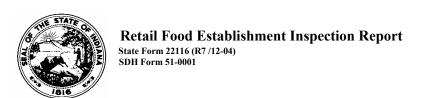
| Establishm PaPa | | ns | Pizza # 1177 | Telephone Number (812-423-7272 Date of Inspection (mm/dd/yr) ID# | | | | |
|--|------------|--------|---|---|------------|--------------|--------------------|--|
| | | | mber and street, city, state, zip code) | | 07/16 | /2024 | 11249 | |
| 4814 V | | | expressway, Evansville, IN, 47712 | <pre>(<redacted></redacted></pre> | | | | |
| Owner Scott | M Alı | oer | S | Purpose: | Follow-uj | | se Date // 26/2024 | |
| Owner's A | | | | Follow-up | | of Violation | | |
| <reda< td=""><td>cted></td><td>,</td><td></td><td>Complaint</td><td></td><td>_</td><td>_</td></reda<> | cted> | , | | Complaint | | _ | _ | |
| Person in C | | | | Pre-Operational | | NC (| 0 R 0 | |
| <reda< td=""><td>cted></td><td></td><td></td><td></td><td></td><td>NC</td><td> K</td></reda<> | cted> | | | | | NC | K | |
| Responsible | e Person's | E-ma | a | Temporary | Menu Typ | e (See addi | tional page) | |
| | | | | НАССР | | \bigcirc G | | |
| Certified F | | er | | Other (list) | 1 2 | | <u>)4</u> 050 | |
| • CRITICAI | L ITEMS AF | RE IDI | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | ARKED "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 to r | note. | | | | |
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| Received by | | | | Inspected by (name and title posterior < redacted > | rinted): | | | |
| Received by | | | | Inspected by (signature): | · | | | |
| | | | | | | | | |
| cc: | | | cc: | | cc: | | | |



| E-4-bE-b | 4 N | | | T-1 N | Data of Inc | montion | ID # |
|--|------------|---|---|----------------------------------|--------------------------|--------------|------------------|
| Establishme Culve | | | | Telephone Number (812-437-3333 | Date of Ins (mm/dd/yr | | тр# 11178 |
| | | s (nu | mber and street, city, state, zip code) | | 07/17 | /2024 | 11176 |
| 1734 H | Hirsch | lar | nd Rd, EVANSVILLE, IN, 47715 | <pre><redacted></redacted></pre> | | | |
| Owner | | | | Purpose: | Follow-uj | | se Date |
| TOM 8 | & KRI | ST | 'IN GRIFFIN | ✓ Routine | No | 07/ | 27/2024 |
| Owner's Ac | | | | Follow-up | Summary | of Violatio | 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 | $_{\rm C}$ \cup | NC_ | J _R 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-ma | il | НАССР | Menu Typ | se (See addi | tional page) |
| Certified Fo | ood Hondl | 210 | | Other (list) | 100 | \bigcirc |),()_5() |
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| | | | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI | | D IN THE N | ARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | | orrected By |
| 200101111 | 0,110 | | No violations no | nted | | 10200 | Arrected By |
| | | | 110 11010110110110 | nou | | | |
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| Received by | (name and | title p | printed): | Inspected by (name and title p | rinted): | | |
| <red< td=""><td>acte</td><td><r< td=""><td></td><td><redacted></redacted></td><td></td><td></td><td></td></r<></td></red<> | acte | <r< td=""><td></td><td><redacted></redacted></td><td></td><td></td><td></td></r<> | | <redacted></redacted> | | | |
| Received by | | | | Inspected by (signature): | | | |
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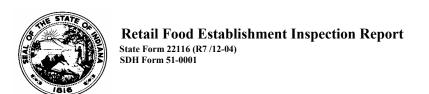
| Establishm | | | | Telephone Number | Date of Inspec | ction | ID# |
|---|------------|------------|--|----------------------------------|-----------------------|-----------|-------------------------|
| | | | n´s Cafe | (812-437-3040 | (mm/dd/yr) 07/18/2 | 0024 | 11110 |
| | | | mber and street, city, state, zip code) AVE, Evansville, IN, 47711 | <pre><redacted></redacted></pre> | 01/10/2 | .024 | |
| Owner | | | | Purpose: | Follow-up | | se Date |
| Elizab | eth F | ulto | on | ✓ Routine | No | 07/ | 28/2024 |
| Owner's A | | | | Follow-up | Summary of | Violation | ıs: |
| <reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>\cap</td><td>(</td><td>) (</td></reda<> | | | | Complaint | \cap | (|) (|
| Person in C | | | | Pre-Operational | $_{\rm C}$ U | NC_(| J _R 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 addii | tional page) |
| Certified F | ood Handle | a r | | Other (list) | 102 |),(• | $)_4\bigcirc_5\bigcirc$ |
| <redag< td=""><td></td><td>.1</td><td></td><td></td><td>1</td><td><u></u></td><td><u> </u></td></redag<> | | . 1 | | | 1 | <u></u> | <u> </u> |
| • CRITICAL | ITEMS AR | E IDE | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS | MARKED "C" | | | |
| • VIOLATIO | ON(S) REPE | ATED | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | UMMARY OF VIOLATIONS" AN | D IN THE NAR | RRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | Т | o Be Co | orrected By |
| | | | No violations no | oted. | | | |
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| Received by | (name and | title r | printed): | Inspected by (name and title pr | rinted). | | |
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| Received by | | | | Inspected by (signature): | | | |
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| cc: | | | cc: | | cc: | | |
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| Establishm | | | | Telephone Number | Date of Inspo (mm/dd/yr) | ection | ID# |
|--|-------------|------------|---|--------------------------------|-----------------------------|------------|---|
| Lic's | Ice C | re | am | 812-422-2618 | ` ' | 2024 | 11087 |
| | | | mber and street, city, state, zip code) | <redacted></redacted> | 07/15/ | 2024 | |
| 11 NV | V Fifth | <u>า S</u> | t, Evansville, IN, 47708 | <re><redacted></redacted></re> | | | |
| Owner | | | | Purpose: | Follow-up | | se Date |
| Don S | | | | Routine | No | 07/ | 25/2024 |
| Owner's A | | | | Follow-up | Summary o | f Violatio | 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 | C | NC_ | \mathcal{L}_{R} |
| Responsible | | | :1 | Temporary | Manu Trina | (Coo addi | tional page) |
| Kesponsible | e r erson s | L-ma | 11 | НАССР | Wienu Type | (see addi | iionai page) |
| Certified F | ood Handl | er | | Other (list) | $ _{1}\bigcirc_{2}($ | •)3(| $)_4\bigcirc_5\bigcirc$ |
| <redac< td=""><td></td><td></td><td></td><td></td><td></td><td><u></u></td><td><u>-, -, -, -, -, -, -, -, -, -, -, -, -, -</u></td></redac<> | | | | | | <u></u> | <u>-, -, -, -, -, -, -, -, -, -, -, -, -, -</u> |
| • CRITICAL | ITEMS AF | E IDE | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N | MARKED "C" | | | |
| | | | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | | ID IN THE NA | DDATIVE | RELOWAS "D" |
| Section# | C/NC | R | Narrative | MIMART OF VIOLATIONS AN | | | orrected By |
| Section# | C/INC | K | No noted violati | onc | | I U DE C | Trected by |
| | | | INO Hoted violati | 0115. | | | |
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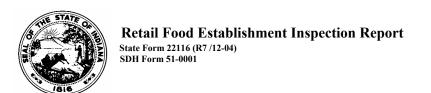
| | urge ent Addres ycam Holdir Idress cted> | ore | nber and street, city, state, zip code) St, Evansville, Indiana, 47708 | (8) (V | lephone Number 312-302-3005 < redacted> rpose: Routine Follow-up Complaint Pre-Operational | Follow-u | 5/2024 P Releas | 25/2024 ns: |
|--|--|---|--|-------------|--|-------------|--------------------|----------------|
| Responsible | | | il | | Temporary HACCP Other (list) | Menu Typ | oe (See addi | tional page) |
| Certified Fo | | er | | | | 1 <u></u> 2 | <u> </u> | <u>′405</u> |
| • CRITICAL | ITEMS AR | E IDE | NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN | IARK | ŒD "C" | | | |
| • VIOLATIO | | ATED | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU | MMA | RY OF VIOLATIONS" AN | D IN THE N | ARRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | | To Be Co | orrected By |
| | | | No noted violation | ons | i <u>.</u> | | | |
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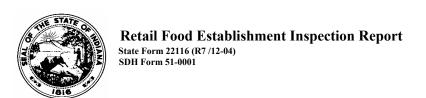
| | | | <u> </u> | | | | |
|--|------------|--------|---|--|--------------------------|--------------|--------------------|
| Establishm | | วร | hion Butcher Shoppe, Inc | Telephone Number (812-426-2465) | Date of Ins (mm/dd/yr | | то# 13949 |
| | | | mber and street, city, state, zip code) | | 07/18 | /2024 | 13949 |
| 2130 | | | vn Road, Evansville, IN, 47711 | <pre>(<redacted></redacted></pre> | | | |
| Owner Christ | ophe | r Ba | aumgart | Purpose: | Follow-up | | se Date // 28/2024 |
| Owner's Ac | | | g | Follow-up | | of Violation | |
| <reda< td=""><td></td><td>•</td><td></td><td>Complaint</td><td>Summary</td><td>_</td><td></td></reda<> | | • | | Complaint | Summary | _ | |
| Person in C | | | | Pre-Operational | | NC_ | J _R U |
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| Responsible | e Person's | E-ma | il | НАССР | Menu Typ | e (See addi | tional page) |
| Certified F | ood Handl | O.M. | | Other (list) | 100 | \bigcirc |),(•),(-) |
| Certified F | oou manui | ei | | | | <u></u> | <u> </u> |
| • CRITICAI | L ITEMS AI | RE IDE | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | 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. | | | |
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| Received by | | | | Inspected by (name and title p < redacted> | rinted): | | |
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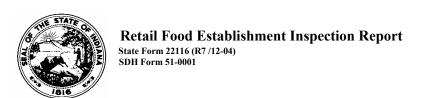
| Establishm | | //2r | nsville | Telephone Number | Date of Ins (mm/dd/yr | | ID# |
|--|------------|--------|--|----------------------------------|--------------------------|--------------|---------------|
| Alexander of the second of the | | | mber and street, city, state, zip code) | 812-602-3737 | 07/17 | /2024 | 14165 |
| | | | nd Rd, Evansville, IN, 47715 | <pre><redacted></redacted></pre> | | | |
| Owner | | | | Purpose: | Follow-u | | se Date |
| Byour | | Lee | 9 | Routine | No | | 27/2024 |
| Owner's Ad | | | | Follow-up | Summary | of Violation | ns: |
| Person in C | | | | Complaint | 0.1 | , (| $0_{\rm R}$ |
| <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 | e Person's | E-ma | il | Temporary HACCP | Menu Typ | e (See addi | itional page) |
| G de le | 177 11 | | | Other (list) | | | \bigcirc |
| Certified F | | er | | | $1 \bigcirc 2$ | <u> </u> | <u> 1405</u> |
| | | RE IDI | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN | MARKED "C" | <u> </u> | | |
| • VIOLATIO | ON(S) REPE | CATED | 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 |
| | | | All violations from 7-9-24 insp | pection corrected. | | | |
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| Establishm PAPF | | EΑ | RS CATERING | Telephone Number (812-568-8890) | spection (/2024 | 14244 | |
|--|------------|--------|--|--|--------------------|--------------|---|
| Establishment Address (number and street, city, state, zip code) 100 Maple Street, Haubstaudt, IN, 47639 | | | | (<redacted></redacted> | 07/17 | /2024 | |
| Owner Brent | Weat | he | ·wax | Purpose: | Follow-up | | se Date //27/2024 |
| Owner's A | | | | Follow-up | Summary | of Violation | ns: |
| <reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td>\cap</td><td>(</td><td>) ()</td></reda<> | | 1 | | Complaint | \cap | (|) () |
| Person in C | | | | Pre-Operational | C | NC_ | $\frac{1}{2}$ $\frac{1}{2}$ |
| Responsible | | | il | Temporary | Menu Tyr | oe (See addi | tional page) |
| | | | | НАССР | | | \ |
| Certified Fo | | er | | Other (list) | 1 2 | <u>3</u> | <u>)</u> 4 <u>U</u> 5 <u>U</u> |
| • CRITICAI | L ITEMS AI | RE IDI | 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 |
| | | | No violations to r | note. | | | |
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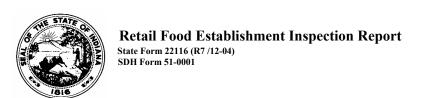
| | | | <u> </u> | | | | |
|---|--------------|----------|---|--|---------------------------|--------------|-----------------------------------|
| Establishm | | . | na A La Mada | Telephone Number | Date of Ins (mm/dd/yr) | | ID# |
| | | | ns A La Mode | 812-217-8866 | 07/17 | /2024 | 14287 |
| | | | mber and street, city, state, zip code) eet, Boonville, IN, 47601 | <pre><redacted></redacted></pre> | | | |
| Owner | | | <u> </u> | Purpose: | Follow-up | | se Date |
| Brian | and A | ۱ng | jela Kissinger | ✓ Routine | No | 07/ | 27/2024 |
| Owner's A | ddress | | | Follow-up | Summary | of Violatio | ns: |
| <reda< td=""><td>cted></td><td>•</td><td></td><td>Complaint</td><td></td><td>_</td><td></td></reda<> | cted> | • | | Complaint | | _ | |
| Person in C | | | | Pre-Operational | | NC_(| $\bigcup_{\mathbf{R}} \mathbf{U}$ |
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| Responsible | e Person's | E-ma | il | НАССР | Menu Typ | e (See addi | itional page) |
| | | | | Other (list) | | | |
| Certified F | | er | | | 1 2 | $\bigcirc 3$ | <u> 1405</u> |
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| • CRITICAI | 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 violations to r | note. | | | |
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| Received by | | | | Inspected by (name and title p < redacted> | rinted): | | |
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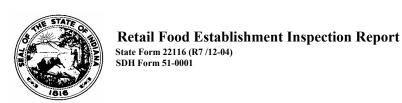
| Establishme | ent Addres | s (nu |)2994 mber and street, city, state, zip co | (812-476-2059 (<redacted></redacted> | Date of Insp (mm/dd/yr) 07/18/ | | 14539 | |
|--|-------------|---------|---|--|--------------------------------------|--------------|-----------------|------------------|
| | Jovei | ιA | ve, Evansville, I | N, 4// 14 | | | T = . | L |
| Owner Super | ior St | ar, | LLC | Purpose: Routine | Follow-up | | ne Date 28/2024 | |
| Owner's Ad | | | | | Follow-up | Summary o | f Violatio | ns: |
| <reda< td=""><td></td><td></td><td></td><td></td><td>Complaint</td><td>\cap</td><td>(</td><td>) ()</td></reda<> | | | | | Complaint | \cap | (|) () |
| Person in C | | | | | Pre-Operational | $_{\rm C}$ U | NC_ | J _R U |
| <reda< td=""><td></td><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<> | | | | | Temporary | | | |
| Responsible | Person's | E-mai | il | | НАССР | Menu Type | (See addi | tional page) |
| | | | | | Other (list) | \sim | | $\bigcap\bigcap$ |
| Certified Fo <redact< p=""></redact<> | | er | | | | 1 2 | <u>3</u> | <u> 4050</u> |
| • CRITICAL | ITEMS AR | RE IDE | ENTIFIED IN THE CHECKLIST AN | D 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 NA | RRATIVE | BELOW AS "R" |
| Section# | C/NC | R | | Narrative | | , | Го Ве Со | orrected By |
| | | | | No noted violation | ons. | | | |
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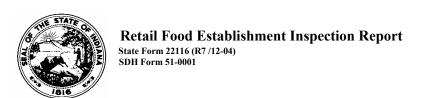
| Establishm Tiki O | | in | Bar & Grill | Telephone Number (812-424-5020) | тр# 14573 | | | |
|---|------------|--------|---|----------------------------------|--------------|------------------------|---------------|--|
| Establishment Address (number and street, city, state, zip code) | | | | 07/15 | /2024 | 14373 | | |
| | | | Evansville, IN, 47708 | <pre><redacted></redacted></pre> | | | | |
| Owner | | | | Purpose: | Follow-u | | se Date | |
| Todd | | | | Routine | No | 07/ | 25/2024 | |
| Owner's A | | | | Follow-up | Summary | of Violation | ns: | |
| <reda< td=""><td></td><td>•</td><td></td><td>Complaint</td><td></td><td></td><td>1 0</td></reda<> | | • | | Complaint | | | 1 0 | |
| Person in C | | | | Pre-Operational | $_{\rm C}$ U | NC | 1_{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 | itional page) | |
| | | | _ | Other (list) | \bigcirc | | \bigcap | |
| Certified F | | er | | | 1 2 | $\bigcirc 3 \bigcirc $ | <u> 1405</u> | |
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| • CRITICAI | L ITEMS AF | 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 Co | orrected By | |
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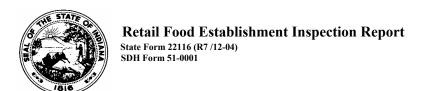
| | | | | _ | 1 | | | |
|--|-----------|---|--|---|--------------------------|-------------------------|-------------------------------------|--|
| The Caboose/Catering by Robyn | | | | Telephone Number (812-453-2679) | Date of Ins (mm/dd/yr | ъ# 14762 | | |
| Establishment Address (number and street, city, state, zip code) | | | | | 07/15 | /2024 | 14702 | |
| | | | Evansville, IN, 47708 | <pre><redacted></redacted></pre> | | | | |
| Owner | | | | Purpose: | Follow-up | | se Date | |
| Robyr | າ Lege | eay | 1 | Routine | No | 07/ | 25/2024 | |
| Owner's Ac | | | | Follow-up | Summary | of Violation | ns: | |
| <reda< td=""><td>cted></td><td></td><td></td><td>Complaint</td><td></td><td></td><td></td></reda<> | cted> | | | Complaint | | | | |
| Person in C | harge | | | | $\int_{\Omega} U$ | NG (| $0_{\rm R}$ | |
| <reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td><u> </u></td><td>NC_</td><td> R</td></reda<> | | | | Pre-Operational | <u> </u> | NC_ | R | |
| Responsible | | | il | Temporary | Menu Tvr | e (See addi | tional page) | |
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| Certified F | ood Handl | r | | Other (list) | 1()2 | \bigcirc 3(\bullet |) ₄ () ₅ () | |
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| | | E IDE | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN | 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 | |
| Sections | 0/1/0 | | No noted violation | one | | 10200 | 7110000 Dj | |
| | | | NO Hoted violation | лю. ———————————————————————————————————— | | | | |
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| Establishm | | _ | | Telephone Number | Date of Insp (mm/dd/yr) | ection | ID# |
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| Donu | t Bar | ١k | | 812-401-2211 | ` ' | 2024 | 14837 |
| | | | mber and street, city, state, zip code) | () Owner | 07/18/ | 2024 | |
| 4800 W | est Ll | oyd | Expressway., Evansville, IN, 47712 | <pre>(<redacted></redacted></pre> | | | |
| Owner | | _ | | Purpose: | Follow-up | | se Date |
| Chris | Kemp |)f | | ✓ Routine | No | 07/ | 28/2024 |
| Owner's A | | | | Follow-up | Summary o | of Violation | ns: |
| <reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td>\cap</td><td>(</td><td>) (</td></reda<> | | 1 | | Complaint | \cap | (|) (|
| Person in C | | | | Pre-Operational | $_{\rm C}$ U | NC_(| J _R U |
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| Certified F | ood Handl | er | | | $1 \bigcirc 2$ | <u>3</u> | <u>/4050</u> |
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| • CRITICAL | L ITEMS AF | RE IDE | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | IARKED "C" | | | |
| • VIOLATIO | ON(S) REPE | ATED | FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI | MMARY OF VIOLATIONS" AN | D IN THE NA | RRATIVE | BELOW AS "R" |
| Section# | C/NC | R | Narrative | | | To Be Co | orrected By |
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| Crisp | | רם | an | Telephone Number | Date of Ins (mm/dd/yr | то# 15293 | | |
| | | | mber and street, city, state, zip code) | 812-499-7401 | 01/10/2024 | | | |
| | | | St. Ste 104, Evansville, IN, 47715 | <pre>(<redacted></redacted></pre> | | | | |
| Owner | | | | Purpose: | Follow-uj | | se Date | |
| Whitne | ey Ma | artii | า | Routine | No | 07/ | 26/2024 | |
| 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 | $_{\rm C}$ | NC_ | $0_{\rm R}$ | |
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| Certified Fo | ood Handle | er | | Other (list) | 1()2 | \bigcirc_3 (\bullet | $)_4\bigcirc_5\bigcirc$ | |
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| • CRITICAL | ITEMS AF | E IDE | ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M | IARKED "C" | <u> </u> | | | |
| • 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" | |
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| Received by | | | | Inspected by (signature): | | | | |
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| cc: | | | cc: | | cc: | | | |



| Establishm SUNF | | CA | AFE FAMILY RESTAURANT | Telephone Number 812-814-1212 | (mm/dd/yr) | of Inspection ID # 15323 | | |
|--------------------|------------|------|--|--|------------------|--------------------------|--------------------------------|--|
| F-4-11:-1: | | | | ()Owner _ | 07/16/ | 2024 | | |
| Owner NANC | Y FL | OR | RES ZAVALA | Purpose: | Follow-up Yes | | se Date 26/2024 | |
| owner's Ac | cted> | 1 | | Follow-up Complaint | | of Violation | _ | |
| Person in C | | • | | Pre-Operational Temporary | $C \cup C$ | NC_ | 0_{R} | |
| Responsible | e Person's | E-ma | 11 | HACCP | Menu Typ | e (See addi | tional page) | |
| Certified F | ood Handl | er | | Other (list) | 1 2 | <u>3</u> | <u>)</u> 4 <u>U</u> 5 <u>U</u> | |
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