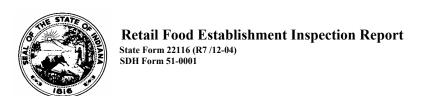
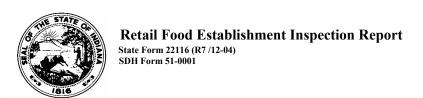


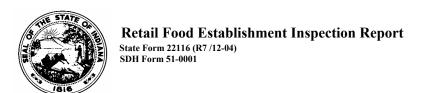
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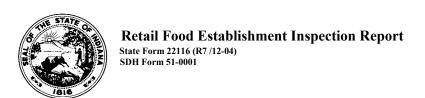
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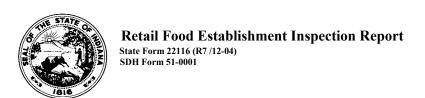
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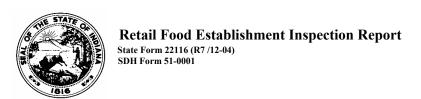
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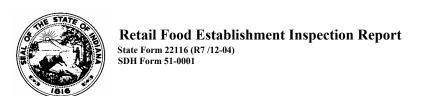
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	VICDO	we	ll Rd., Evansville, IN, 47712					
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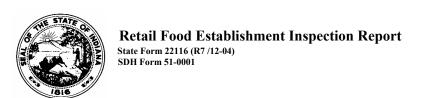
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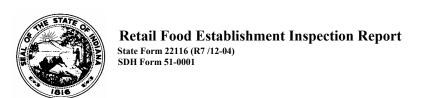
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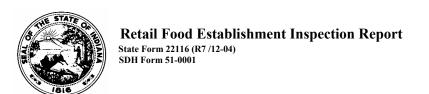
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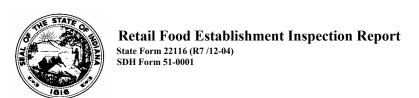
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	w Ma	ryl	and St., Evansville, IN, 47720				
Owner		_		Purpose:	Follow-up		se Date
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Section# C/NC R Narrative 297 NC Ice machine guard on front counter area soiled								rrected By	
218	NC						08/29/2024 08/29/2024		
	C			Hood filters in need of repair.					
344	C			Hand sink at front counter inaccessible.					
118	_		Person in charge unknowledgeable about proper food han			oceaures.		29/2024	
415	С		Insect activity observed in e	<u> 3818</u>	iblishment.		08/2	29/2024	
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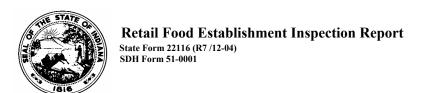
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Establishment Name		Telephone Number	Date of Insp	ection	ID#
Ivy Cafe/Ivy Catering (SWIRCA & Mor	· / [(812-464-7807	(mm/dd/yr) 08/29/2	2024	11053
16 W Virginia St, Evansville,		<redacted></redacted>	00/23//	2027	
SWIRCA & More		Purpose: Routine	Follow-up No	Releas 09/	e Date 08/2024
Owner's Address		Follow-up	Summary o	f Violation	s:
<redacted></redacted>		Complaint	\cap	() (
Person in Charge		Pre-Operational	$\mathbf{c}_{\mathbf{U}}$	NC_	$R_{\rm R}$
<redacted></redacted>		Temporary	M T	/C 11:	. 1
Responsible Person's E-mail		НАССР	Menu Type	(See aaaii	ional page)
Certified Food Handler		Other (list)	1()2($)_3$	$)_{4}\bigcirc_{5}\bigcirc$
<redacted></redacted>	<u> </u>		12_	<u></u>	4 <u>0</u> 3 <u>0</u>
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST	T AND NARRATIVE COLUMNS MAR	RKED "C"			
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTION	ONS ARE DENOTED IN THE "SUMM.	IARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section# C/NC R	Narrative		,	Го Ве Со	rrected By
	No violations to note	:e!			
Received by (name and title printed):	Ins	spected by (name and title pr	inted):		
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Received by (signature):		spected by (signature):			



Establishmo					Tel	lephone Number	Date of In (mm/dd/y	spection	ID#
Hacie	enda	#4			(8	12-423-6355	-	5/2024	11000
			mber and street, city, state, zip code) Evansville, IN, 47710		(<	redacted>	00/20	0/2024	
Owner HMR	Acqui	siti	on Company, Inc.			rpose: Routine	Follow-u No		te Date 05/2024
Owner's Ad						Follow-up	Summary	of Violation	ns:
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Person in C						Pre-Operational	$_{\rm C}$	NC_	$R_{\rm R}$
Responsible						Temporary	Menu Tv	ne (See addi	tional page)
responsible			•			НАССР			
Certified Fo		er				Other (list)	102	<u></u>)4050
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"									
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED I	N THE "SUN	MMA	RY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Nar	rative				To Be Co	orrected By
			No violation	ons to n	ote) .			
	leceived by (name and title printed): <redacted></redacted>					ected by (name and title predacted>	rinted):		
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Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Ricks	Spo	rt I	Bar & Family Room	(812-477-4088	08/28/	2024	10998
			mber and street, city, state, zip code)	() Owner	00/20/	2024	
	S Gre	en	River Rd, Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner	S' - L ' -			Purpose:	Follow-up		se Date
Vicki [SO	<u>n</u>	✓ Routine	No	09/	07/2024
Owner's Ac				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	C	NC_($R_{\rm R}$
Responsible			:1	Temporary	Monu Tyme	(Saa addi	tional page)
Kesponsible	e reison s	L-ma	11	НАССР	Wienu Type	(see aaar	nonai page)
Certified Fo	ood Handle	er		Other (list)	$ _{1}\bigcirc_{2}($	\bigcirc_3 (\bullet	$)_4\bigcirc_5\bigcirc$
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		E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		ID IN THE NA	RRATIVE	RELOW AS "R"
Section#	C/NC	R	Narrative	MINIARI OF VIOLATIONS AN			orrected By
Section#	C/IC	K	No noted violation	nno.		10 Be Co	Trected by
			NO Hoted violation	JIIS.			
							
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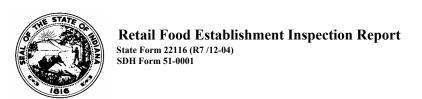
Establishm				Telephone Number	Date of Insp	ection	ID#
Fujiya	ama			812-962-4440	(mm/dd/yr)	2024	10977
Establishm	ent Addres		mber and street, city, state, zip code)		08/29/	2024	
915 N	orth F	Par	k Dr, Evansville, IN, 47710	<pre>(<redacted></redacted></pre>			
Owner	, ,			Purpose:	Follow-up		se Date
Ji Yi X				✓ Routine	No	08/	31/2024
Owner's Ac				Follow-up	Summary of	f Violation	is:
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Person in C				Pre-Operational	$_{\rm C}$	NC_(J _R U
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Kesponsible	e Person's	L-ma	11	HACCP	Menu Type	e (See aaai	nonai page)
Certified F	ood Handle	er		Other (list)	1()2(\bigcirc 3 \bigcirc),(•),(•)
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
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			110 Violationo to	110101			
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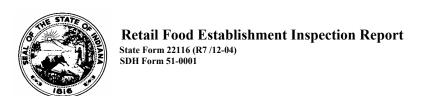
	arro ent Addres Sonr s Cor dress cted> harge cted> e Person's	rea			Telephone Number (812-421-1986) (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary	5/2024 Releas	05/2024 D R O
• CRITICAL • VIOLATIO	ARRATIVE	BELOW AS "R"						
Section#	C/NC	R	Narrative					orrected By
Section	C/IIC	IX	No violations		oto.		10 00 00	orrected By
			NO VIOIATIONS	to ne	ne.			
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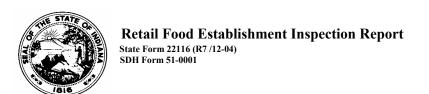
Establishmo Dairy Establishmo 1159 E Owner MIKE Owner's Ac <redac <redac="" c="" in="" person="" responsible<="" th=""><th>Que ent Addres E Virg SCHL ddress cted> charge cted></th><th>ss (nui gini _O</th><th>mber and street, city, state, zip code) a St., Evansville, IN, 47</th><th>7711</th><th>(8) (V) Pui</th><th>lephone Number 12-422-9341 < redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary</th><th>Follow-u NO Summary</th><th>r) 0/2024 p Releas</th><th><u>0</u> <u>R</u> <u>0</u></th></redac>	Que ent Addres E Virg SCHL ddress cted> charge cted>	ss (nui gini _O	mber and street, city, state, zip code) a St., Evansville, IN, 47	7711	(8) (V) Pui	lephone Number 12-422-9341 < redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary	Follow-u NO Summary	r) 0/2024 p Releas	<u>0</u> <u>R</u> <u>0</u>
Certified Fo		er			\vdash	HACCP Other (list)	102	<u></u>)4050
			ENTIFIED IN THE CHECKLIST AND NARRATI						
• VIOLATIO Section#	ON(S) REPE C/NC		FROM PREVIOUS INSPECTIONS ARE DENOT		MMA	RY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R		Narrative lations not	tod			10 Ве Со	orrected By
			INO VIO	iations no	leu	•			
								<u> </u>	
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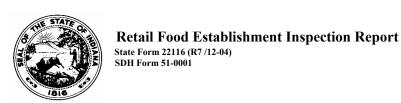
Establishme					elephone Number	Date of Ins		ID#
Jimm	<u> </u>			3)	312-402-5653	`	6/2024	13619
Establishme	ent Addres	s (nui	mber and street, city, state, zip code)		<redacted></redacted>	00/20	7202 -	
	am S	ι. ι	Jnit A, Evansville, IN, 47708			7. 11		L
owner Ken S	tinler			I	rpose: Routine	Follow-uj		05/2024
Owner's Ad					Follow-up	Summary	of Violation	15:
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Responsible	Person's	E-mai	il		НАССР	Menu Tyj	pe (See addii	tional page)
				┵	Other (list)		\bigcirc_3	
Certified Fo		er		-		1 <u>0</u> 2	<u> </u>	<u>/405</u>
• CRITICAL	ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARI	KED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	UMMA	ARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violat	ions	S			
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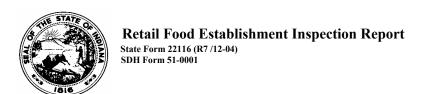
Establishm				Telephone Number	Date of Insp	ection	ID#
11th	Fram	e l	_ounge	812-423-6204	(mm/dd/yr)	2024	10824
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)		08/27/	2024	
1801 \	W Fra	<u>ink</u>	lin St, Evansville, IN, 47712	' <redacted></redacted>			
Owner				Purpose:	Follow-up		se Date
Frank		nes	s Inc	✓ Routine	No	09/	06/2024
Owner's A				Follow-up	Summary o	f Violatio	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_($\frac{\mathbf{J}}{\mathbf{R}}$
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Responsible	e Person's	L-ma	Ш	НАССР	Menu Type	: (See aaai	tional page)
Certified F	ood Handle	er		Other (list)	$1_1\bigcirc_2$),(•	$)_4\bigcirc_5\bigcirc$
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• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"							
					ID IN THE NA	DD ATIME	DELOW AC 4D9
	C/NC		PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	SUMMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			то ве С	orrected By
			No violations to	note.			
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D: 11	. ('	4:41		Transaction (179)	-i41)		
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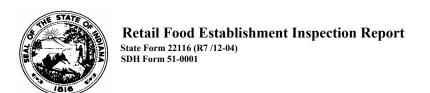
_	an Sa		's Club		Telephone Number (812-473-2518	Date of Insp (mm/dd/yr) 08/29/		ть# 13784
			mber and street, city, state, zip code) a St, Evansville, IN		<pre>(<redacted></redacted></pre>			
Owner Fujisa	n Fra	ncł	nising Corp		Purpose:	Follow-up NO		se Date 08/2024
Owner's Ac	ddress				Follow-up	Summary o	of Violation	ns:
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Person in C					Pre-Operational	$\begin{bmatrix} C \end{bmatrix}$	NC_(JRU
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Responsible	e Person's	E-ma	il		Temporary	Menu Type	(See addi	tional page)
					НАССР		$\sim G$	
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• CRITICAL	LITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NA	ARRATIVE COLUMNS M	MARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE	E DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	ND IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative			To Be Co	orrected By
			N	o noted violation	ons.			
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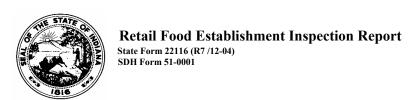
Subway Establishment Address (number and street, city, state, zip code) 301 Main St, Evansville, IN, 47708 Owner Paul Kumar Owner's Address <redacted> Person in Charge <redacted> Responsible Person's E-mail Certified Food Handler <redacted> • CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS • VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S Section# C/NC R Narrative</redacted></redacted></redacted>						lephone Number 12-455-1333 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary	5/2024 Releas	05/2024 D R O
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARI								ARRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative				To Be Co	rrected By
Section	0,110			No noted violatio	ne			102000	cocca Dj
				NO HOLEG VIOIALIO	110.	•			
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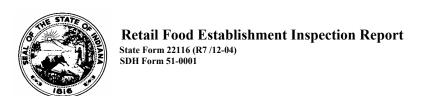
Establishm	ent Name			Telephone Number	Date of Insp	ection	ID#
The Kitchen Buffet/Bally Bet Sportsbook & Bar				812-433-4000	(mm/dd/yr) 08/29/2	2024	14532
Establishment Address (number and street, city, state, zip code) 700 NW Riverside Dr, Evansville, IN, 47708				<pre>(<redacted></redacted></pre>	00/29/	2024	
Owner		_		Purpose:	Follow-up		se Date
		Ga	ming Co LLC / dba Ballys Evansville	✓ Routine	No	09/	08/2024
Owner's Ac				Follow-up	Summary o	f Violatio	ns:
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Person in C	0			Pre-Operational	C	NC_	R = R
Responsible				Temporary	Menu Tyne	(See addi	tional page)
Responsible	c i ci son s	L-1114		НАССР	wienu Type	(See aaai	nonui puge)
Certified Fo	ood Handle	er		Other (list)	$ _{1}\bigcirc_{2}($	$)_3$ (\bullet	$_{4}\bigcirc_{5}\bigcirc$
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• 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 "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		,	Го Ве Со	orrected By
245	NC		Towels not provided for sar	nitizer solution.		08/2	29/2024
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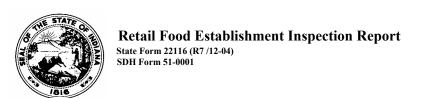
Establishm				Telephone Number	Date of Insp	ection	ID#
Riverfront Events Center- Cavanaugh's				(812-433-4000	(mm/dd/yr) 08/29/2	2024	14535
Establishment Address (number and street, city, state, zip code)				() Owner	06/29/	2024	
450 N	W Riv	ers	ide Dr, EVANSVILLE, IN, 47708				
Owner	-I!	0-	orio o Or III O / alle a Dalleda Economilla	Purpose:	Follow-up		se Date
		Ga	ming Co LLC / dba Bally's Evansville	Routine		09/	08/2024
Owner's Ac				Follow-up	Summary o	f Violation	as:
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<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td>P R C</td></reda<>				Pre-Operational	C	NC_	P R C
Responsible			;i	Temporary	Manu Tyna	(Saa addi	tional page)
Kesponsibil	c I cison s	L-ma		НАССР	- wienu Type	- (See adding	
Certified Fo	ood Handle	er		Other (list)	10°	$\supset_3 \subset$	$)_{4}\bigcirc_{5}\bigcirc$
					1-0	<u></u>	<u></u>
• CRITICAL	ITEMS AR	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative		,	Го Ве Со	orrected By
			no violations to r	note.			
							-
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			cc.				



l <u>a</u>					Telephone Number	Date of In		ID#	
Samuel's					615-796-4076		5/2024	14569	
Establishment Address (number and street, city, state, zip code) 113 SE 4th Street, Evansville, IN, 47708					<pre>(<redacted></redacted></pre>	00/20	<i>,,</i> 202-		
	⊏ 4III	Οl	reet, Evansville, IIV, 47706			E 11	l n i	D .	
		he	n Concepts LLC	I	Purpose: Routine	Follow-u No		Date 05/2024	
Owner's Ac					Follow-up	Summary	of Violation	ıs:	
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Person in C					Pre-Operational	$_{\rm C}$ U	NC_(\mathcal{F}_{R} U_{R}	
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Responsible	e Person's	E-ma	il	F	HACCP	Menu Ty	oe (See addi	tional page)	
Certified Fo	117 11			<u> </u>	Other (list)	100	\bigcirc	\bigcirc	
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• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUM	INS MA	RKED "C"				
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE	E "SUMN	MARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative	e			To Be Corrected By		
			No noted viol	latior	ns.				
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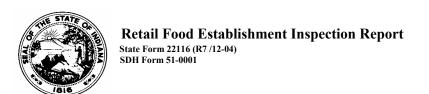
					ephone Number	Date of Inspection ID # (mm/dd/yr)				
KFC H740027					12-476-6192	2-476-6192 08/29/2024 14				
900 S Green River Rd, Evansville, IN, 47715					redacted>	00/23	72024			
Owner	:_				rpose:	Follow-uj		se Date		
Owner's Ad		-00	ods Inc	T	Routine	No		08/2024		
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Person in C				=	Complaint	<u> </u>	NC_	_ ()		
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Responsible	Person's	E-mai	il	=	Temporary	Menu Typ	e (See addi	tional page)		
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• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	1ARK	ED "C"					
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Section#	C/NC	R	Narrative				To Be Corrected By			
298	NC		Inside of microwave over	ens	soiled.		08/2	29/2024		
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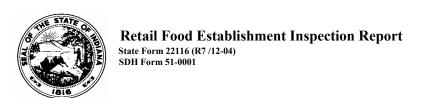
Establishme				Telephone Number	Date of Ins		ID#
La Mexicana				(812-266-5446	(mm/dd/yr	5/2024	14853
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	00/20	/2024	
	ain S	τ, E	Evansville, IN, 47708				<u> </u>
Owner Adrian	a Vaz	que	ez. Emigdio san juan Dominguez	Purpose:	Follow-u		se Date // 05/2024
Owner's Ad	ldress			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		_	
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Responsible	Person's	E-mai	il	HACCP	Menu Tyj	se (See addi	tional page)
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Certified Fo		er			1 2	<u>3</u>	<u>/4</u> <u>/</u> 5
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		ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	ND 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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941 N Owner	st lapent Address orth F	os (nui Par	nber and street, city, state, zip code) k Dr., Evansville, IN	N, 47710	**Relephone Number** (812-492-0072) (<redacted> Purpose:</redacted>	Date of Insp (mm/dd/yr) 08/30/	2024 Releas	15178 15178 e Date
Caitlin Cassidy & Jeremy Utley Owner's Address <redacted> Person in Charge <redacted> Responsible Person's E-mail Certified Food Handler</redacted></redacted>					Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	No Summary of C Menu Type 1 2	f Violation	_
			NTIFIED IN THE CHECKLIST AND NA FROM PREVIOUS INSPECTIONS ARE			D IN THE NA	RRATIVE	BELOW AS "R"
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					elephone Number	Date of In		ID#
Bally's Evansville Casino					312-433-4000	,)/2024	15179
Establishment Address (number and street, city, state, zip code)					<redacted></redacted>	00/23	72024	
	W Riv	ver	side Dr, Evansville, IN, 47708					
Owner Aztar Ir	ndiana	Ga	ming Co LLC / dba Ballys Evansville		rpose: Routine	Follow-u		ne Date 08/2024
Owner's Ac	ddress				Follow-up	Summary	of Violation	ns:
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Person in C				⊨	Pre-Operational	$ _{\mathbf{C}}$ \mathbf{U}) RO
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Responsible	e Person's	E-ma	il		НАССР	Menu Ty	pe (See addii	tional page)
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Section#	C/NC	R	Narrative				To Be Co	orrected By
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Establishment				Telephone Number	ID#		
			ii Lakay LLC	() Establishment	(mm/dd/yr) 08/29/2	2024	15365
Establishment Address (number and street, city, state, zip code)				() Owner	00/23/	2027	
	Gree	en i	River Rd., Evansville, IN, 47715		Follow-up		
Owner				Purpose:		ne Date 08/2024	
Owner's Addr	ess			Follow-up Complaint	Summary o	_	_
Person in Cha	rge			Pre-Operational	c_0	NC_($\frac{\mathbf{U}}{\mathbf{R}}$
Responsible Pe	erson's I	E-mai	1	Temporary HACCP	Menu Type	(See addi	tional page)
Certified Food	l Handle	er		Other (list)	$1 \bigcirc 2$	<u></u>	$0_4 \bigcirc 5 \bigcirc$
CDVITY 2: V =	PD 60 :=:	D. I.S.					
			NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N			nn	nn. aw. : - :-
·	-		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section# C	C/NC	R	Narrative			Γο Be Co	orrected By
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