

	n`s D ent Addres Gree Ortoric ddress Cted> Charge Cted> e Person's	ss (nu en f Ce	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715	Telephone Number (812-471-9905 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u No Summary C	r) 9/2024 1 p Releas	<u>0</u> <u>R</u> <u>0</u>
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		ND IN THE N	NARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
Sectional	0,110		No violations at time of	inspection		10 20 00	cooca Bj
Received by				Inspected by (name and title p <redacted></redacted>	orinted):		
Received by	(signature)):		Inspected by (signature):			
cc:			cc:		cc:		



Establishin 5701 Owner Dunn Owner's Ac <reda< th=""><th>oton ent Addres N Hig Hosp ddress cted></th><th>^{ss (nu} hw ital</th><th>n Airport Evansville mber and street, city, state, zip code) vay 41, Evansville, IN, 47711 lity Group</th><th>Telephone Number (812-464-1010 (<redacted> Purpose: Purpose: Follow-up Complaint</redacted></th><th>^{Follow-uj} NO</th><th>) /2024 p Releas 12/ of Violation</th><th></th></reda<>	oton ent Addres N Hig Hosp ddress cted>	^{ss (nu} hw ital	n Airport Evansville mber and street, city, state, zip code) vay 41, Evansville, IN, 47711 lity Group	Telephone Number (812-464-1010 (<redacted> Purpose: Purpose: Follow-up Complaint</redacted>	^{Follow-uj} NO) /2024 p Releas 12/ of Violation		
Person in C				Pre-Operational	с <u></u> U			
Responsible				- Temporary	Menu Tvr	e <i>(See addi</i>	tional page)	
F			_	НАССР				
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u>3</u>	$)_4 \underline{\bigcirc}_5 \underline{\bigcirc}$	
• CRITICAL	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"				
• VIOLATIO	ON(S) REPE	ATEI) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
			No violations to i	note.				
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Establishm	Portal	s (nu	Grill, Inc. ^{mber and street, city, state, zip code)} River Rd, Evansville, IN, 47715		12/10	^{r)})/2024	ID # 11961 se Date	
Mario	Jacol	bo		Purpose:	No	I	20/2024	
Owner's A				Follow-up		of Violation		
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Person in C				Pre-Operational	1	NC		
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Responsible	e Person's	E-ma	il	НАССР	Menu Ty	pe <i>(See addi</i>	tional page)	
				Other (list)				
Certified F		er			$1 \underline{\bigcirc} 2$	<u>U3C</u>	<u>/4050</u>	
·		E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
• VIOLATIO	DN(S) REPE	ATED) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	ND IN THE N	VARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
177	NC		Food stored incorrectly on	floor in cooler.		12/1	10/2024	
173	С		Meat stored over ready to ea	at food in cooler.		12/1	10/2024	
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D 11				×		<u> </u>		
Received by				Inspected by (name and title p <redacted></redacted>	orinted):			
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Establishm 137 N Owner	Stati ent Address Burk ate Cl ddress Cted> Charge Cted> e Person's	ss (nu ha hee	n East Coast Subs Imber and street, city, state, zip code) Irdt Rd, Evansville, IN, 47715 esesteaks LLC	Telephone Number (812-479-7366 (<redacted> Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Purpose: Other (list)</redacted>	Follow-u NO Summary C	r))/2024 p Releas	<u></u>
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N D 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
204	NC		Improper placement of fry cart near hand washing s	sink to prevent cross contar	mination.		rrected
204		-					
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Received by	acteo	d>	. /	Inspected by (name and title pr <redacted></redacted>	rinted):		
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Establishm		ът	CDEN Lillion Enterprises lle	Telephone Number	ID #			
			SDEN Lillian Enterprises IIC mber and street, city, state, zip code)		12/09	/2024	11331	
701 N '			h Ave. #110, Evansville, IN, 47711					
^{Owner} Janell	Rook	٦r		Purpose:	Follow-u NO		se Date 19/2024	
Owner's Ad				✔ Routine				
<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	0			Pre-Operational	$\begin{bmatrix} 0 \end{bmatrix}$		$2_{R}0$	
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Responsible	e Person's	E-ma	il	НАССР	Menu Tyj	e (See addi	tional page)	
Certified Fo	od Handl	er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3 \textcircled{\bullet}$	$)_{1} \bigcirc 5 \bigcirc$	
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Section#	C/NC	R	Narrative			To Be Co	orrected By	
351	NC		Trash can with lid not provided in w	oman's restroom s	stall.	12/09/2024		
256	NC		Coolers in establishment not provided with te	emperature measuring	device.	12/0	09/2024	
Received by				Inspected by (name and title p	rinted):			
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Establishme 303 N Owner SCOtt A Owner's Ac <reda Person in C <reda< th=""><th>Johr Weir Alpers ddress cted> charge cted></th><th>s (nu Iba S</th><th>Pizza #52 mber and street, city, state, zip code) ich Ave., Evansville, IN, 47711</th><th>Telephone Number (812-477-7700 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary</redacted></th><th>Follow-u NO Summary C_1</th><th>r) D/2024 P Releas 12/ r of Violatior NC</th><th>19/2024 </th></reda<></reda 	Johr Weir Alpers ddress cted> charge cted>	s (nu Iba S	Pizza #52 mber and street, city, state, zip code) ich Ave., Evansville, IN, 47711	Telephone Number (812-477-7700 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary</redacted>	Follow-u NO Summary C_1	r) D/2024 P Releas 12/ r of Violatior NC	19/2024
Responsible Certified Fo			ш 	HACCP Other (list)		$ \underbrace{\bigcirc}_{3} $	$\underline{)}_{4} \underline{\bigcirc}_{5} \underline{\bigcirc}$
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Section#	C/NC	R	Narrative			To Be Co	orrected By
118	С		Establishment does not have a co	ertified food handle	er.	12/0)9/2024
Received by		-		Inspected by (name and title pr <redacted></redacted>	inted):		
Received by	(signature)):		Inspected by (signature):			
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3901 ^{Owner}	ort Ir ent Addres N Hig Jios Y ddress Cted> Cted> Cted> cted> cted> ood Handl	ss (nu hw erc	mber and street, city, state, zip code) ay 41, Evansville, IN, 47711 olemou	Te (8) (< Pu •	ID # 10935 e Date 20/2024 is: R 0 tional page) $4 0 5 0$			
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	KED "C"			
• VIOLATIO	ON(S) REPE	ATEI	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 violations to n	ote	Э.			
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Received by	/ (signature):		Insp	ected by (signature):			
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Establishm 1 SE M Owner John S Owner's Ad <reda< th=""><th>I Dots ant Address lartin L Spies ddress cted></th><th>ss (nu uth</th><th>Concessions Imber and street, city, state, zip code) er King Jr Blvd, Evansville, IN, 47708</th><th>Telephone Number (812-499-3687 (<redacted> Purpose: Routine Follow-up Complaint</redacted></th><th>Follow-uj</th><th>p Releas 12/ of Violation</th><th></th></reda<>	I Dots ant Address lartin L Spies ddress cted>	ss (nu uth	Concessions Imber and street, city, state, zip code) er King Jr Blvd, Evansville, IN, 47708	Telephone Number (812-499-3687 (<redacted> Purpose: Routine Follow-up Complaint</redacted>	Follow-uj	p Releas 12/ of Violation	
Person in C				Pre-Operational		(
Responsible				- Temporary	Menu Tvi	ne <i>(See addi</i>	tional page)
Responsible	e i cison s	L-1114		НАССР			
Certified Fo		er		Other (list)	1 <u>02</u>	<u> </u>	<u>)4</u> 050
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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></redacted>	rinted):		
Received by	/ (signature)):		Inspected by (signature):			
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Establishm 324 R Owner	ay In ent Addres ushei	r C	Express mber and street, city, state, zip code) reek Rd, Evansville, IN, 47725	(8 (Pu	Rephone Number 812-867-2200 <redacted></redacted>	Follow-u	r))/2024 1 p Releas	ID # 10862 se Date
		a r	lospitality	<u> </u>	Routine	No	12/	20/2024
Owner's Ac					Follow-up	Summary	of Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>╘</td><td>Complaint</td><td>\mathbf{O}</td><td>(</td><td>$) \cap$</td></reda<>				╘	Complaint	\mathbf{O}	($) \cap$
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Responsible			il	╘	Temporary	Menu Tv	pe (See addi	tional page)
p					НАССР	•		
Certified Fo		er			Other (list)	1 <u>0</u> 2	<u></u> 3	$)_4 \bigcirc_5 \bigcirc$
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	JARK	ED "C"			
) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI			D IN THE N	NARRATIVE	BELOW AS "P"
Section#	C/NC	R	Narrative		INT OF VIOLATIONS AN	DINTINE		orrected By
Section#	Cinc	N	No violations to n	ote	2		TODCC	meeted by
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Received by				-	ected by (name and title pr edacted>	rinted):		
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Establishm 1301 Owner Ameri Owner's Ad <redat Person in C <redat Responsible Certified Fd <redat< th=""><th>rican ent Addres N Far can L ddress cted> Cted> cted> e Person's</th><th>ss (nu eS eG E-ma</th><th></th><th>(8) (~ Pu (~</th><th>elephone Number 12-423-4033 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u NO Summary C</th><th>p Releas 12/ of Violation NC</th><th></th></redat<></redat </redat 	rican ent Addres N Far can L ddress cted> Cted> cted> e Person's	ss (nu eS eG E-ma		(8) (~ Pu (~	elephone Number 12-423-4033 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	p Releas 12/ of Violation NC	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M 9 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
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2320 N Owner Kenne Owner's Ad <reda Person in C <reda Responsible</reda </reda 	y Joh ent Address I Green eth Bu ddress cted> Cted> cted> cted> cted> ood Handle	ss (nu nriv Itle E-ma	umber and street, city, state, zip code) ver Road, Evansville, Indiana, 47715 er	(8) (V Pu	lephone Number 312-402-5747 Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u Yes Summary c_2	r))/2024 p Releas 2 12/	<u>8</u> <u>R</u> <u>0</u>	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!			D IN THE N	JARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative					orrected By	
118	C	N	Establishment does not have ce	rtif	ied food handle	r.		10/2024	
324	NC		Grease trap log not ma						
351	NC		Trash receptacle with lid not provide			oom.	12/1	0/2024	
118	С		Person in charge was not knowledgea						
			Or proper food handling	prc	ocedures.	12/1	10/2024		
214	NC		Cutting boards in poor	CO	ndition.	12/1	10/2024		
Received by					redacted by (name and title provided by (name and title pr	rinted):			
Received by	(signature)):		Insp	bected by (signature):				
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865 N Owner WU Q Owner's Ad <redat Person in C <redat Responsible Certified Fe <redat< th=""><th>Seat ent Addres Gree UAN ddress cted> cted> cted> cted> cted> cted> cted> cted> cted> cted></th><th>ss (nu en f ZH E-ma</th><th>mber and street, city, state, zip code) River Rd, Evansville, IN, 47715 IANG</th><th>(8) (~ Pu (~</th><th>Performance Number 12-303-6871 Credacted> redacted> roose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</th><th>Follow-u NO Summary C</th><th>p Releas 12/ of Violation NC_</th><th></th></redat<></redat </redat 	Seat ent Addres Gree UAN ddress cted> cted> cted> cted> cted> cted> cted> cted> cted> cted>	ss (nu en f ZH E-ma	mber and street, city, state, zip code) River Rd, Evansville, IN, 47715 IANG	(8) (~ Pu (~	Performance Number 12-303-6871 Credacted> redacted> roose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	Follow-u NO Summary C	p Releas 12/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M) 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
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Establishment Name	Telephone Number	Date of Insp	ection	ID #	
Freedom Bowls insid	(812-807-6348	(mm/dd/yr) 12/10/	2024	15380	
Establishment Address (number and street, city, state, zip code) 4209 US-41 Suite 12, Evansville, IN, 47711		(<redacted></redacted>	12/10/	2024	
^{Owner} Erik Martinez		Purpose:	Follow-up NO		e Date 20/2024
Owner's Address		✔ Routine	_		
<redacted></redacted>		Follow-up	Summary o	ns:	
Person in Charge		Complaint	~ 0) [)
<redacted></redacted>		Pre-Operational	C_{-} NC_{-} K_{-}		
Responsible Person's E-mail		- Temporary HACCP	Menu Type	ype (See additional page)	
		Other (list)			\square
Certified Food Handler <redacted></redacted>			$1 \underline{\bigcirc} 2 \underline{\lor}$	$\underline{\bigcirc}_{3}\underline{\bigcirc}_{4}\underline{\bigcirc}_{5}\underline{\bigcirc}$	
• CRITICAL ITEMS ARE IDENTIFIED IN THE C	CHECKLIST AND NARRATIVE COLUMNS N	MARKED "C"			
VIOLATION(S) REPEATED FROM PREVIOUS		MMARY OF VIOLATIONS" AN			
Section# C/NC R	Narrative			To Be Corrected By	
	NO VIOLATIONS AT TIMES O	violations at times of inspection.			
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Received by (name and title printed): <redacted></redacted>		Inspected by (name and title printed): <redacted></redacted>			
Received by (signature):		Inspected by (signature):			
cc:	cc:		cc:		



Establishment Name Thai Lanna Establishment Address (number and street, city, state, zip code) 601 E Boonville New Harmony Rd, Evansville, IN, 47725 Owner Chutikan Souvannachack Owner's Address <redacted> Person in Charge <redacted> Responsible Person's E-mail Certified Food Handler <redacted></redacted></redacted></redacted>			Telephone Nut (765-729 (erediant) Purpose: Purpose: Purpose: Complaint Pre-Operat Temporary HACCP Other (list)	9=6001 cted>	$\begin{array}{c c} \text{Date of Inspection} \\ (mm/dd/yr) \\ 12/10/2024 \\ \hline \\ 15383 \\ \hline 15383 \\ \hline \\ 15383$			
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Section#	C/NC	R	Narrative				To Be Co	orrected By
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