

943 N	tron ent Addres		mber and street, city, state, zip code) k Dr, Evansville, IN, 4771	<sup>Telephone Number</sup> (812-402-6500 ( <redacted></redacted>	spection ) 8/2025	ір# 12133			
<sup>Owner</sup> Jose F	Ramir	ez			Purpose:	Follow-u NO		<sup>se Date</sup> <b>18/2025</b>	
Owner's A	ddress				Follow-up				
<reda< td=""><td></td><td></td><td></td><td></td><td>Complaint</td><td colspan="4"></td></reda<>					Complaint				
Person in C					Pre-Operational	с <u></u> О			
Responsible			1	Temporary	Menu Ty	oe (See addii	tional page)		
				НАССР			$\sim \sim \sim$		
Certified F		er		Other (list)	1 <u>0</u> 2	<u>3</u>	$\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$		
• CRITICAI	L ITEMS AR	RE IDH	CNTIFIED IN THE CHECKLIST AND NARRATIVE C	MARKED "C"					
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED I	N THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Nar	rative			To Be Co	orrected By	
191	С	R	Observed potentially hazardous	s food i	in cooler not date m	arked.	04/0	08/2025	
118	С	R	Food establishment does not	have	certified food empl	oyee.	04/0	08/2025	
294	С	R	Chemical sanitation concent	tration	tested below requi	red	04/0	)8/2025	
			level in dis	sh mac	hine.				
Received by			printed):		Inspected by (name and title p	rinted):			
Received by	(signature)	):			Inspected by (signature):				
cc: cc:						cc:			



Establishm 5625 Owner	lead ent Addres Pearl n Kur ddress cted> Charge cted> e Person's	na E-ma	Irritos mber and street, city, state, zip code) Ste A, Evansville, IN, 47712 r Patel	Telephone Number (253-205-5152 ( <redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u NO Summary C	p Release 04/ of Violation NC	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
			D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	ND IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No violations to n	lote.			
Received by				Inspected by (name and title p	rinted):		
Received by	(signature)	):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm	ent Addres	ss (nu	Catering at the Old Post Office	relephone Number (812-480-3573) ( <redacted></redacted>	<sup>ID #</sup> 12004		
-	W Se	CO	nd St, Evansville, IN, 47708			-	
owner Doug	& Ma	rla	Rennie	Purpose:	Follow-up NO		se Date <b>19/2025</b>
Owner's A				Follow-up	Summary of	f Violatio	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	с_О	NC_(	
Responsible			il	Temporary	Menu Type	(See addi	tional page)
				НАССР			
Certified Fo		er		Other (list)	1 <u>0</u> 2(	<u>)</u> 3	) <sub>4</sub> <u>0</u> 5 <u>0</u>
• CRITICAI	. ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	ON(S) REPE	ATEL	PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
			No violations to r	note.			
Received by				Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm 5210 Owner Murph Owner's Ad <reda Person in C <reda Responsible Certified F <redac< th=""><th>hy U ent Addres Pearl ddress cted&gt; Cted&gt; cted&gt; e Person's</th><th>ss (nu Dr US E-ma er</th><th></th><th>Telephone Number (812-422-9519 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redacted></th><th>Follow-u NO Summary C</th><th>p Releas 04/ of Violation NC</th><th><math display="block">\frac{ID \#}{11971}</math> se Date <math display="block">\frac{17/2025}{R}</math> se Date <math display="block">\frac{17/2025}{R}</math> se Date <math display="block">\frac{17/2025}{R}</math></th></redac<></reda </reda 	hy U ent Addres Pearl ddress cted> Cted> cted> e Person's	ss (nu Dr US E-ma er		Telephone Number (812-422-9519 ( <redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) MARKED "C"</redacted>	Follow-u NO Summary C	p Releas 04/ of Violation NC	$\frac{ID \#}{11971}$ se Date $\frac{17/2025}{R}$ se Date $\frac{17/2025}{R}$ se Date $\frac{17/2025}{R}$
• VIOLATIO	ON(S) REPE	ATED	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 r	note.			
Received by		-		Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	/ (signature	):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm 925 N Owner GOAT Owner's Au <redat< th=""><th>A HU ent Addres Gree Pizz ddress cted&gt; Charge</th><th>ss (nu en F a,</th><th>#41503 <sup>mber and street, city, state, zip code)</sup> River Rd, Evansville, IN, 4771 LLC</th><th>Telephone Number (812-426-1166 5 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational</redacted></th><th>Date of Ins (mm/dd/yr 04/09 Follow-up NO Summary</th><th>) /2025</th><th></th></redat<>	A HU ent Addres Gree Pizz ddress cted> Charge	ss (nu en F a,	#41503 <sup>mber and street, city, state, zip code)</sup> River Rd, Evansville, IN, 4771 LLC	Telephone Number (812-426-1166 5 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational</redacted>	Date of Ins (mm/dd/yr 04/09 Follow-up NO Summary	) /2025	
<reda Responsible</reda 			il	Temporary	Menu Typ		tional page)
Certified F	ood Handl			HACCP Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{)}_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
	DN(S) REPE	CATEI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S		D IN THE N		
Section#	C/NC	R	Narrative				orrected By
431 NC Observed floor area around ice machine				ne drain in need of cle	eaning.	04/0	)9/2025
Received by	(name and	l title	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:		



	e Slic ent Addres Lincol (umal ddress cted> Charge	ss (nu In <i>I</i> r	mber and street, city, state, zip code) Ave, Evansville, IN, 47714	Telephone Number (812-499-9659 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational</redacted>	Follow-u NO Summary	p Releas 04/	ID # 11534 se Date 17/2025		
Responsible			il	Temporary HACCP	Menu Type (See additional page)				
Certified Fo		er		Other (list)	1 <u>0</u> 2	<u>•</u> 3 <u>C</u>	) <sub>4</sub> <u>0</u> 5 <u>0</u>		
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M						
		<b>.</b>	D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N				
Section#	C/NC	R	Narrative			To Be Co	orrected By		
			No noted violation	ons.					
Received by				Inspected by (name and title pr <redacted></redacted>	rinted):				
Received by	(signature)	):		Inspected by (signature):					
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Establishm	Corn ent Addres N Fult Ches ddress cted> Charge cted>	ss (nu ton sei			elephone Number 312-428-2255 <redacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-u NO Summary C	r) D/2025 p Releas 04/ 7 of Violatior	L <u>R</u> 1
Certified F	cted>				Other (list)	1 <u>0</u> 2	<u></u> 3	) <sub>4</sub> <u>0</u> 5 <u>0</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M			D IN THE		DELOWAS "D"
• violarite Section#	C/NC	R	D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU Narrative	IVIIVI A	TRY OF VIOLATIONS" AN	D IN THE I		orrected By
310	NC	R	Observed hood vent sys	ster	m soiled			10/2025
510				5101	in solicu.		0-7/	0/2025
Received by			· /	-	redacted>	rinted):		
Received by	(signature)	):		Insp	bected by (signature):			
cc:			cc:			cc:		



Establishm	ont Nama			Telephone Number	Date of In	spection	ID #
		าย	r's Cafe	<sup>(812-488-2061)</sup>	(mm/dd/yr	r)	11471
			mber and street, city, state, zip code)		04/11	/2025	11771
			Ave, Evansville, IN, 47722	( <redacted></redacted>			
Owner				Purpose:	Follow-u		se Date
Chart	wells			✔ Routine	No	04/	21/2025
Owner's A				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$ U	NC L	
<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	1	НАССР	Menu Ty	pe (See addi	tional page)
	1.77 11			Other (list)	$1 \bigcirc 1$	$\bigcirc$	$) \cup \cup \cup$
Certified For		er			$1 \underline{\bigcirc} 2$		<u>/4050</u>
1					<u>i</u>		
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N				
VIOLATIC		ATEI	) 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 provided by (name and title p	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



Establishm 1801 V	ningto	ss (nu	School 6-8 mber and street, city, state, zip code) on Ave., EVANSVILLE, IN, 47714			<sup>r)</sup> )/2025	ID# 11432
<sup>Owner</sup> Evans	ville \	∕aı	nderburgh School Corp.	Purpose:	Follow-u NO		se Date 20/2025
Owner's A				Follow-up	Summary	of Violation	15:
<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			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-ma	il	НАССР	Menu Typ	pe (See addi	tional page)
				Other (list)	$\cap$	$\frown$	$) \cap \cap$
Certified For Certified For Certified For Certified For Certain Certai		er		Other (list)	$1 \underline{\bigcirc} 2$		<u>/4_5</u>
• CRITICAL	. ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
• VIOLATIO	)N(S) REPE	ATEI	) 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.			
Received by				Inspected by (name and title pr <b><redacted></redacted></b>	rinted):		
Received by	(signature)	):		Inspected by (signature):			
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cc:			cc:		cc:		



	ent Addres Linco wells ddress Cted> charge cted> e Person's	ss (nu	mber and street, city, state, zip code) Ave., Evansville, IN, 47722	(812-488-2061)       (mm/dd/yr)       1         ( <rédacted>       04/11/2025       1         Purpose:       No       04/21/2025         ✓ Routine       No       04/21/2025         Follow-up       Summary of Violations:       04/21/2025         Complaint       C</rédacted>					
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M						
	DN(S) REPE	ATEI	) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	ARY OF VIOLATIONS" AN	D IN THE N			
Section#	C/NC	R	Narrative				To Be Co	orrected By	
			No noted violation	ons	<b>.</b>				
Received by				-	redacted>	rinted):	L		
Received by	v (signature	):		Insp	ected by (signature):				
cc:			cc:			cc:			



	Ay # ent Addres . Wall syhan ddress Cted> Cted> Cted> cted> cted> ood Handle	n T n F	mber and street, city, state, zip code) St, Evansville, IN, 47713 Patel	Telephone Number (812-425-7585 ( <redacted> Purpose:</redacted>	Follow-u NO Summary C	) R 0	
1		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	ARKED "C"			
• VIOLATIC	ON(S) REPE	ATEI	) 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.			
		-					
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



Establishm Stock Establishm 4001 I Owner Audre Owner's Au <reda Person in C <reda Responsible</reda </reda 	ent Addres E Eich y Chr ddress cted> Charge cted>	rist	imber and street, city, state, zip code) Ave., EVANSVILLE, IN, 47715 ie	Telephone Number (812-476-2384 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-u NO Summary C_1	r) 7/2025 p Releas	<u> </u>
Certified F		er		Other (list)	1 <u>U</u> 2	<u>U</u> 3	<u>)4050</u>
• VIOLATIO	DN(S) REPE	ATE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N		
Section#	C/NC	R	Narrative				orrected By
173	С		Observed meat stored above ready to	eat food in walk-in o	cooler.	Co	rrected
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)	):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm 5600 Owner	Thea ent Addres Pearl can M ddress cted> charge cted> e Person's	ss (nu Dr 1ul	es Evansville 16 mber and street, city, state, zip code) , Evansville, IN, 47712 ti-Cinema, Inc.	Telephone Number (812-423-7566 ( <redacted> Purpose: ✓ Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) 7/2025 P Releas 04/ of Violation NC	
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ARKED "C"	1		
• VIOLATIC	DN(S) REPE	ATEI	D 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	acteo	d>		Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)	):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm	SMAr ent Addres	s (nu	Billards & Pub	relephone Number (812-422-0801 ( <redacted></redacted>	Date of Ins (mm/dd/yr 04/07		ID# 11332	
Z315 V Owner	/v Fra	INK	lin St, Evansville, IN, 47712	Purpose:	Follow-u	n Palaa	e Date	
Jerry (	Chano	dle	r	✓ Routine	No		17/2025	
Owner's Ad	ldress			Follow-up	Summary	of Violation	15:	
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td></td><td>2 ∩</td></reda<>				Complaint	$\cap$		2 ∩	
Person in C				Pre-Operational	с <u></u>	NC_		
Responsible			il and the second s	- Temporary	Menu Ty	oe (See addii	tional page)	
-				НАССР	$\sim$	$\sim c$		
Certified Food HandlerOther (list)12						<u>3</u>	<u>)4050</u>	
• CRITICAL	ITEMS AR	E IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	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	
138	NC		Observed food cook not wearing p	proper beard restra	int.	Corrected		
352	NC		Observed men's restroom not hav	ing a self-closing d	oor.	04/07/2025 04/07/2025		
234	NC		Observed bowls without handles being use	Observed bowls without handles being used to dispense bulk dry goods.				
Received by			printed):	Inspected by (name and title provided by (name and title p	rinted):			
Received by	(signature)	):		Inspected by (signature):				
cc:			cc:		cc:			



3700   <sup>Owner</sup>	ucks ent Addres First A ucks N ddress cted> Charge cted> e Person's		mber and street, city, state, zip code) e, EVANSVILLE, IN, 47710 kets Inc	Telephone Number (812-464-3920 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	r) B/2025 P Releas 04/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N 9 FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	JARRATIVE	BELOW AS "R"
	-						
Section#	C/NC	R	Narrative				orrected By
			Observed mops in bakery not be	eing properly store	d.	Co	rrected
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	v (signature)	):		Inspected by (signature):			
cc:			сс:		cc:		



Establishm	Main ent Addres Main Feat ddress cted> Charge cted> cted> cted> cted> cted>	ss (nu St he		Telephone Number (812-250-4551 ( <redacted> Purpose:</redacted>	Follow-uj NO Summary C	p Releas 04/ of Violation NC_	
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M ) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
Section#	CITC	K	No violations to n	ote		10 DC CC	nicelled By
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by				Inspected by (signature):			
cc:			cc:		cc:		



Establishm 1535 J Owner	ary N ent Addres Joyce	ss (nu PAV	dle School 6-8 <sup>mber and street, city, state, zip code)</sup> ve, EVANSVILLE, IN, 47 <sup>-</sup> nderburgh School Corp.	714	Telephone Number (812-469-5088 ( <redacted> Purpose:</redacted>	Date of Ins (mm/dd/yr 04/09 Follow-u NO	) )/2025 p Releas	ID # 11209 ee Date 19/2025
Owner's A		vai	iderburgh School Corp.		✔ Routine			
<reda< td=""><td></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			) [)
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Pre-Operational</td><td><u> </u></td><td>NC_</td><td></td></reda<>	cted>			Pre-Operational	<u> </u>	NC_		
Responsible	e Person's	E-ma	il	Temporary	Menu Typ	oe (See addi	tional page)	
					$\square$	$\frown$	$\neg \cap \cap$	
Certified F		er			Other (list)	$1 \underline{\bigcirc} 2$		<u>/4_5_</u>
• CRITICAI	ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE (	COLUMNS N	- MARKED "C"			
• VIOLATIO	)N(S) REPE	ATED	<b>PROM PREVIOUS INSPECTIONS ARE DENOTED</b>	IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Nai	rrative			To Be Co	orrected By
			No noted	l violati	ons.			
Received by		-			Inspected by (name and title p	rinted):		
Received by					Inspected by (signature):			
cc:			cc:			cc:		



Establishm 1148 V Owner	ent Addres Wash Enter ddress Cted> Cted> Cted> cted> cted> cted> cted>	ss (nu ing rpri E-ma	Washington <sup>mber and street, city, state, zip code)</sup> iton Ave., Evansville, IN, 47714 ises LLC/ Susan Mann	Telephone Number (812-425-1712 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_1	p Releas 04/ of Violation NC	
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M ) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		ID IN THE N	JARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
443	C		Sanitizing solution tested belo	w required level			rrected
0						00	
Received by			· /	Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm 3704   Owner  Van C Owner's Ad <reda Person in C <reda Responsible Certified F <redac< th=""><th>onald ent Addres N 1st Carvaj ddress cted&gt; cted&gt; cted&gt; cted&gt; cted&gt; cted&gt; cted&gt;</th><th>er (nu Av al</th><th>#35249 mber and street, city, state, zip code) 'e, Evansville, IN, 47710 il</th><th>Telephone Number (201-654-1243 (<redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted></th><th>Follow-u Yes Summary C</th><th>p Releas 04/ of Violation</th><th></th></redac<></reda </reda 	onald ent Addres N 1st Carvaj ddress cted> cted> cted> cted> cted> cted> cted>	er (nu Av al	#35249 mber and street, city, state, zip code) 'e, Evansville, IN, 47710 il	Telephone Number (201-654-1243 ( <redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) </redacted>	Follow-u Yes Summary C	p Releas 04/ of Violation	
			) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
218	NC		Observed freezer door in	poor repair.			)8/2025
<u> </u>						0.10	
		1					
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Establishm 1301 Owner Evans	er Fa ent Addres Judsc sville '	ss (nu DN S	y Learning Center <sup>nber and street, city, state, zip code)</sup> St, EVANSVILLE, IN, 4 <sup>-</sup> nderburgh School Corp.		Telephone Number (812-435-8593 ( <redacted> Purpose: Routine</redacted>	Date of Insp (mm/dd/yr) 04/10/ Follow-up NO	2025 Releas	ID # 11177 se Date 20/2025
Owner's A					Follow-up	Summary of	f Violatio	15:
Person in C					Complaint			
<reda< td=""><td></td><td></td><td></td><td></td><td>Pre-Operational</td><td>с</td><td>NC_</td><td><u> </u></td></reda<>					Pre-Operational	с	NC_	<u> </u>
Responsibl			1		Temporary	Menu Type	(See addi	tional page)
					HACCP	$\cap$		$\sim \sim$
Certified F		er			Other (list)	1 <u>0</u> 2	<u>_3</u>	$\underline{)}_{4}\underline{\bigcirc}_{5}\underline{\bigcirc}$
			NTIFIED IN THE CHECKLIST AND NARRATIV FROM PREVIOUS INSPECTIONS ARE DENOTI			D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R		Narrative				orrected By
			No note	ed violati	ons.			
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Received by	(signature	):			Inspected by (signature):			
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Establishment Name		Telephone Number	Date of Inspe	ction	ID #
Coconut Cafe @ Walther's G	olf-N-Fun Center	(812-464-4472	(mm/dd/yr) 04/09/2	0025	11163
Establishment Address (number and street, city, state, z		<pre></pre>	04/09/2	2025	
2301 N First Ave, EVANSVI	ILLE,IIN,47710			<b>D</b> 1	
<sup>Owner</sup> Robert Walther		Purpose:	Follow-up NO	$\frac{\text{Releas}}{04}$	e Date <b>19/2025</b>
Owner's Address		Follow-up	Summary of	Violatior	IS:
<redacted></redacted>		Complaint	$\cap$	ſ	
Person in Charge		Pre-Operational	с <u></u> U		
Responsible Person's E-mail	Temporary	Menu Type	(Soo addi	tional naga)	
Responsible rerson's E-man	НАССР	Menu Type	(see uuuii	ionai page)	
Certified Food Handler	Other (list)	$1 \underline{\bigcirc} 2 \underline{\bigcirc}$	<u>]3</u> C	$\underline{0}_{4} \underline{0}_{5} \underline{0}$	
<redacted></redacted>					
<ul> <li>CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIS</li> <li>VIOLATION(S) REPEATED FROM PREVIOUS INSPECTI</li> </ul>			D IN THE NA	RRATIVE	BELOW AS "R"
Section# C/NC R	Narrative				orrected By
	note.			·	
Received by (name and title printed):		Inspected by (name and title provided by (name and title p	rinted):		
Received by (signature):		Inspected by (signature):			
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Establishme LOS B		ç		Telephone Number         Date of Inspection (mm/dd/yr)           (812-464-3163)         04/07/2025			ID# 11103	
			mber and street, city, state, zip code)		04/07	/2025	11103	
			Expressway, Evansville, IN, 47712	<pre>(<redacted></redacted></pre>				
Owner				Purpose:	Follow-u			
Ana B				<b>✔</b> Routine	No	04/	10/2025	
Owner's Ac				Follow-up	-	of Violation		
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td colspan="4"><math>\begin{bmatrix} 1 \\ NC \end{bmatrix}</math></td></reda<>				Complaint	$\begin{bmatrix} 1 \\ NC \end{bmatrix}$			
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC</td><td></td></reda<>				Pre-Operational	C	NC		
Responsible			il	Temporary	Menu Ty	oe (See addii	tional page)	
_				НАССР		$\sim$		
Certified Fo		er		Other (list)	$1 \underline{\bigcirc} 2$	<u></u> 3	$\underline{O}_{4} \underline{O}_{5} \underline{O}_{5}$	
1		E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
			) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
443	С		Sanitizer solution tested below required co	nsecration in wiping l	oucket.	Со	rrected	
347	NC		Observed no disposable towels p	rovided at hand sir	nk.	Co	rrected	
Received by	(name and	titla	nrinted):	Inspected by (name and title p	rinted):			
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Establishm 2000   Owner Evans Owner's Ad <reda Person in C <reda Responsible</reda </reda 	e Col ent Addres Lodge sville \ ddress cted> charge cted> e Person's	ss (nu ≥ A √ar	nunity School K-8 <sup>mber and street, city, state, zip code)</sup> ve, EVANSVILLE, IN, 47714 nderburgh School Corp.	Telephone Number <sup>(812-469-5085)</sup> <sup>(</sup> <redacted> Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	с_ <b>0</b>	/2025 Releas 04/ of Violation NC_	ID # 11090 ise Date 18/2025 is: 
Certified Fo		er.					<u>′4030</u>
• VIOLATIO	ON(S) REPE	ATED	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU		D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violati	ons.			
Received by	(name and	title	arinted):	Inspected by (name and title pr	rinted):		
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Received by				Inspected by (signature):			
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1750 I	Spirit ent Addres	ss (nu	chool <sup>mber and street, city, state, zip code)</sup> ve., EVANSVILLE, IN, 47714	relephone Number <sup>(812-476-5984)</sup> <sup>(</sup> <redacted></redacted>	04/08	<sup>r)</sup> 9/2025	ı⊅# 11040
<sup>Owner</sup> Evans	ville (	Cat	tholic Diocese	Purpose:	Follow-u NO		se Date 19/2025
Owner's A	ddress			Follow-up	Summary	y of Violation	
<reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td></td><td>(</td><td></td></reda<>		1		Complaint		(	
<reda< td=""><td>0</td><td></td><td></td><td>Pre-Operational</td><td>с_<b>U</b></td><td>(</td><td><math>P_{R}</math></td></reda<>	0			Pre-Operational	с_ <b>U</b>	(	$P_{R}$
Responsible			il	Temporary	Menu Ty	pe (See addi	tional page)
				НАССР		$\sim$	$\sim \sim \sim$
Certified Fo		er		Other (list)	$1 \bigcirc 2$		) <sub>4</sub> <u>0</u> 5 <u>0</u>
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ARKED "C"			
• VIOLATIO	DN(S) REPE	ATEI	) 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
			No noted violation	ons.			
Received by				Inspected by (name and title p	orinted):		
Received by				Inspected by (signature):			
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	er's V ent Addres V Lloy te Cro ddress cted> Charge cted>	ss (nu d E DW	mber and street, city, state, zip code) Expressway, Evansville, IN, 47712	Telephone Number (812-492-8000 ( <redational Purpose: ✓Routine Follow-up Complaint Pre-Operational Temporary HACCP</redational 	ID # 13753 se Date 17/2025 ns: <b>D</b> R tional page)		
Certified F		er		Other (list)	1 <u>0</u> 2	<u></u> 3	<u>)4050</u>
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M				
• VIOLATIC Section#	DN(S) REPE	R	P FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI Narrative	MMARY OF VIOLATIONS" AN	D IN THE N		orrected By
Section#	Cinc	K	No violations to r	note.		10 DC CC	freedu by
Received by	acte	d>		Inspected by (name and title pr <b><redacted></redacted></b>	rinted):		
Received by	(signature	):		Inspected by (signature):			
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	x-fil-A ent Addres Linco wells ddress cted> Charge cted> cted> cted> cted>	ss (nu In / E-ma	mber and street, city, state, zip code) Ave, Evansville, IN, 47722 il	(812 ( <r€ Purpose Purpose Follo Follo Pre- Tem</r€ 	tine ow-up uplaint Operational uporary	C Menu Typ	) /2025 D Releas 04/ of Violation NC	<u>R</u> <u>O</u> tional page)
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			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU			D IN THE N	A D D A TIVE	RELOW AS "P"
Section#	C/NC	R	Narrative		of violations and			orrected By
Section#	C/NC	K	No noted violatio	000			10 De Co	frected by
				uns.				
		1						
Received by				-	t by (name and title pr	inted):		
Received by	/ (signature	):		Inspected	l by (signature):			
cc:			cc:			cc:		



	ent Addres Linco Wells ddress Cted> Charge Cted> cted> e Person's	ss (nu In A E-ma	mber and street, city, state, zip code) Ave., Evansville, IN, 47722	(812-488-2061)       (mm/dd/yr)       1         ( <redacted>       04/11/2025       1         Purpose:       Follow-up       Release Dat         Routine       NO       04/21/2         Follow-up       Summary of Violations:       0         Complaint       C</redacted>					
		RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	ARKED "C"					
• VIOLATIO	DN(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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Owner's A			gio		Follow-up		of Violation		
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Person in C	0				Pre-Operational	$_{\rm C}$ U		J <sub>R</sub> U	
<reda Responsible</reda 			1		Temporary				
Responsible	e Person's	E-ma	1		НАССР	Menu Type (See additional page)			
Certified F		er			Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{)}_{4}\underline{O}_{5}\underline{O}$	
			NTIFIED IN THE CHECKLIST AND FROM PREVIOUS INSPECTIONS A		D IN THE N	а DD а тілле	RELOW AS "D"		
• VIOLATIC Section#	C/NC	R	FROM FREVIOUS INSPECTIONS A	MART OF VIOLATIONS' AN	P IN THE N		orrected By		
Section#         C/NC         R         Narrative           Image: Comparison of the section of the sectin of the sectin of the section of the section of the sectin of th					note.		10 20 00	••••• <i>D</i> j	
Received by	·		printed):	Inspected by (name and title printed):					
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Establishme Dairy	-	on		Telephone Number     Date of Inspection (mm/dd/yr)     ID				
				(812-428-4022	04/09	/2025	10892	
			mber and street, city, state, zip code) 9, Evansville, IN, 47710	( <redacted></redacted>				
Owner	0.14			Purpose:	Follow-up		e Date	
		rga	an Kirk	✔ Routine	No	04/	19/2025	
Owner's Ac				Follow-up		of Violation	15:	
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Person in C				Pre-Operational	С			
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Responsible	e Person's	E-mai		НАССР	Menu Typ	e (See addi	tional page)	
	1 11 11			Other (list)	$-\Omega$	$\bigcirc$	$\mathcal{O}_{\mathcal{O}}$	
Certified Fo		er			$1 \underline{\bigcirc} 2$		<u>′4050</u>	
		E IDF	NTIFIED 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 N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
191	С		Observed ready to eat foods not c	late marked in coo	ler.	04/0	)9/2025	
Received by		-		Inspected by (name and title printed):				
Received by	(signature)	):		Inspected by (signature):				
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Establishm	e Hig	ss (nu	School mber and street, city, state, zip code) on Ave., EVANSVILLE, IN, 47714	relephone Number (812-474-6935 ( <redacted></redacted>	Date of In: (mm/dd/yr 04/10		<sup>ID #</sup> 10875
Owner	ddress cted> Charge Cted>	√aı	nderburgh School Corp.	Purpose: Routine Follow-up Complaint Pre-Operational Temporary	с_ <b>0</b>	of Violation	
Certified Fo	ood Handl			HACCP Other (list)	1 <u>0</u> 2		$\underline{)}_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
• VIOLATIO	)N(S) REPE	ATEI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU!		D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
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1213 Owner JOSEP Owner's Ad <redation Person in C <redation Responsible Certified For <redation< th=""><th>OP ent Addres W Ma h T H ddress cted&gt; cted&gt; cted&gt; cted&gt; cted&gt; cted&gt; cted&gt; cted&gt;</th><th>er</th><th>il</th><th></th><th>lephone Number 312-306-5319 <redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>Follow-u NO Summary C_</th><th>p Releas 0/2025 04/ of Violation NC_</th><th>· ·</th></redation<></redation </redation 	OP ent Addres W Ma h T H ddress cted> cted> cted> cted> cted> cted> cted> cted>	er	il		lephone Number 312-306-5319 <redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_	p Releas 0/2025 04/ of Violation NC_	· ·
			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
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4579 <sup>Owner</sup> Ji Lon <sup>Owner's Ad</sup> <reda< th=""><th>e Of C ent Address Unive g Lin ddress cted&gt;</th><th>rs (nu rsi</th><th>ina Imber and street, city, state, zip code) ty Dr., Evansville, IN, 47712</th><th>Telephone Number (812-422-1260 (<redacted> Purpose: Routine Follow-up Complaint</redacted></th><th>Follow-u NO Summary</th><th>r) /2025 p Releas 04/</th><th>21/2025 ns:</th></reda<>	e Of C ent Address Unive g Lin ddress cted>	rs (nu rsi	ina Imber and street, city, state, zip code) ty Dr., Evansville, IN, 47712	Telephone Number (812-422-1260 ( <redacted> Purpose: Routine Follow-up Complaint</redacted>	Follow-u NO Summary	r) /2025 p Releas 04/	21/2025 ns:		
Person in C		_		Pre-Operational	С				
Responsible			il	Temporary	Menu Type (See additional page				
Certified Fo		er		HACCP Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{0}_{4} \underline{0}_{5} \underline{0}_{5}$		
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			D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N				
Section#	C/NC	R	Narrative				orrected By		
191	C		Observed ready to eat foods in walk i	in with no date mai	kings.	04/1	1/2025		
Received by			· /	Inspected by (name and title p <redacted></redacted>	rinted):				
Received by	(signature)	):		Inspected by (signature):					
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Establishm				Telephone Number	Date of Insp	ection	ID #
Doub	letre	еE	By Hilton Evansville	(812-423-5002	(mm/dd/yr) 04/08/	2025	13678
			mber and street, city, state, zip code)	<pre>(<redacted>)</redacted></pre>	04/06/	2025	
	ob Jo	ne	s Way, Evansville, IN, 47708				
		svi	lle Hotel, LLC Rick Huffman	Purpose:	Follow-up NO		se Date 18/2025
Owner's A				Follow-up	Summary of	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	с <u></u>	NC_	) <sub>R</sub> _0
Responsibl			il	<b>Temporary</b>	Menu Type	See addi	tional page)
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Certified F		er		Other (list)	$1 \bigcirc 2$	<u>3(</u>	$)_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
		RE IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S		D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				orrected By
Section	ente		No noted violat	ions		10 20 0	/// <i>eecca</i> 25
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	1						
Received by			printed):	Inspected by (name and title p <redacted></redacted>	rinted):		
Received by				Inspected by (signature):			
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Establishm	t Ma ent Addree Linco wells	ss (nui In <i>1</i>	et (Koch Build mber and street, city, state, z Ave, Evansville	rip code)	Telephone Number (812-488-2061 ( <redacted> Purpose: Purpose: Follow-up Complaint</redacted>	Date of Ins (mm/dd/yr 04/11 Follow-u NO Summary	) /2025 0 Releas 04/ of Violation			
Person in C					Pre-Operational	<u>c</u> <u></u> <b>U</b>		$J_{R}$		
Responsible			il		Temporary	Menu Typ	e (See addi	tional page)		
Certified F		er			$\begin{array}{c} HACCP \\ \hline Other (list) \\ \hline \end{array} \\ 1 \\ \hline 2 \\ \hline 3 \\ 4 \\ \hline \end{array}$					
• VIOLATIO	ON(S) REPE			T AND NARRATIVE COLUMNS I ONS ARE DENOTED IN THE "SU		ID IN THE N	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R		Narrative			To Be Co	orrected By		
No noted vio					ons.					
-	Received by (name and title printed):				Inspected by (name and title p	rinted):				
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1 SE 9 Owner Tara 0 Owner's Au <reda Person in 0</reda 	Daily ent Addres 9th St Gore ddress cted> Charge	ss (nu : #1	rind <sup>mber and street, city, state, zip code)</sup> 102, Evansville, IN, 47708	Telephone Number (812-401-2040 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational</redacted>	Follow-u NO Summary	r) 7/2025 P Releas 04/ of Violation	17/2025	
<reda Responsible</reda 			il	Menu Type (See additional page				
Certified F	ood Handl			HACCP Other (list)		<u></u> 3		
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"				
			) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N			
Section#	C/NC	R	Narrative	izer et required lev			orrected By	
285	NC		Dishwasher not dispensing sanit	izer at required lev	ei.	04/0	)7/2025	
		-						
Received by	acteo	d>		Inspected by (name and title provided by (name and title p	rinted):			
Received by	(signature	):		Inspected by (signature):				
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Establishm 601 B Owner	ucks ent Addres ob Jo	ss (nu ne	Doubletree <sup>mber and street, city, state, zip code)</sup> s Way, Evansville, IN, 47708 lle Hotel LLC Rick Huffman	Telephone Number (812-423-5002 ( <redacted> Purpose: Routine</redacted>	Date of Ins (mm/dd/yr 04/08 Follow-u NO	) /2025 p Releas	ID # 13926 se Date 18/2025
Owner's A				Follow-up	Summary	of Violation	15:
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Person in C				Pre-Operational	$_{\rm C}$ U		J <sub>R</sub> U
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Responsible	e Person's	E-ma	11	НАССР	Menu Typ	be (See addi	tional page)
Certified F	ood Handl	er		Other (list)	1 <u>0</u> 2	<u>O</u> 3 <u>C</u>	$)_4 \bigcirc_5 \bigcirc$
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
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Section#	C/NC	R	Narrative			To Be Co	orrected By
			No noted violation	ons.			
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22 NW Owner Carl A Owner's Ad <reda Person in C <reda< th=""><th>demie ent Addres V Sixt Innhei ddress Cted&gt; Cted&gt; Cted&gt;</th><th>ter</th><th></th><th>(6 ( V Pu V</th><th>lephone Number 46-361-0903 (redacted&gt; rpose: Routine Follow-up Complaint Pre-Operational Temporary</th><th>Follow-u NO Summary C_</th><th>r) D/2025 P Releas 04/ of Violation NC_1</th><th>19/2025</th></reda<></reda 	demie ent Addres V Sixt Innhei ddress Cted> Cted> Cted>	ter		(6 ( V Pu V	lephone Number 46-361-0903 (redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary	Follow-u NO Summary C_	r) D/2025 P Releas 04/ of Violation NC_1	19/2025
Responsible Certified Fo	ood Handle				HACCP Other (list)		pe (See addit $03$	
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	ED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMA	RY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative					orrected By
138	NC		Observed kitchen employee not wearing	ng	proper beard res	straint.	Coi	rrected
							·	
							·	
Received by	acteo	d>			ected by (name and title pr edacted>	rinted):		
Received by	(signature)	):		Insp	ected by (signature):			
cc:			cc:			cc:		



401 SE Owner Allisor Owner's Ad <redae Person in C <redae Responsible</redae </redae 	and Address and Skel Address Cted> harge Cted> Person's pood Handle Cted>	ss (nui St : Itor E-ma	mber and street, city, state, zip code) Suite 104, Evansville, IN, 47713	(¿)	elephone Number 312-598-2049 <redacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list) KED "C"</redacted>	Follow-u NO Summary C	) /2025 P Releas 04/ of Violation NC	
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S	JMMA	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	ons	6.			
Received by	acteo	d>	printed):	<	redacted>	inted):		
Received by	(signature)	):		Insp	bected by (signature):			
cc:			cc:			cc:		



Establishm Fredo Establishm 5501 Owner M&M Owner's Ad <reda Person in C <reda Responsible</reda </reda 	dy's Pearl Custa ddress cted> Charge cted>	Dr. ard.		Telephone Number (812-303-6137 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary</redacted>	Follow-u NO Summary C	r)  /2025 p Releas	<u></u>		
Certified F		er		HACCP Other (list)					
• CRITICAI	L ITEMS AR	₹E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"					
			D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUP	MMARY OF VIOLATIONS" AN	D IN THE N				
Section#	C/NC NC	R	Narrative	propor boir rootroi	nt		prrected By		
130			Observed employee not wearing	proper nail restrai	11.		Tecleu		
						<u> </u>			
Received by	acteo	d>		Inspected by (name and title provided by (name and title p	rinted):				
Received by	(signature)	):		Inspected by (signature):					
cc:			сс:		cc:				



2039 \ Owner	BBC ent Addres Wash & Ta ddress cted> Charge cted> cted> cted> cted>	ss (nu ing imi mi E-ma	mber and street, city, state, zip code) ton Ave., Evansville, IN, 47714 a McNeal	Telephone Number (812-746-3184 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 04/ of Violation NC_	<u>R</u> <u>O</u> tional page)
	TEME AT		ENTREPORT IN THE CHECKLET AND MADDATIME COLUMNIC A				
			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
			Approved for the se	eason			
Received by				Inspected by (name and title provided by (name and title p	rinted):		
Received by				Inspected by (signature):			
cc:			сс:		cc:		



204 M <sup>Owner</sup>	r Dor ent Addres ain S	ss (nu) t.,	S <sup>nber and street, city, state, z</sup> Evansville, IN,		Telephone Number (812-303-4487 ( <redacted> Purpose:</redacted>	Follow-u	.) 7/2025 p Releas	ID # 14320 e Date		
Josh Owner's Ad		a			✔ Routine	No		17/2025		
Person in C					Follow-up Complaint Pre-Operational	-	of Violation			
Responsible	e Person's	E-mai	1		Temporary	Menu Tyj	pe (See addi	tional page)		
Certified Fo		er			HACCP Other (list)	102	<u>•</u> 3C	<u>4</u> <u>0</u> 5 <u>0</u>		
				T AND NARRATIVE COLUMNS I ONS ARE DENOTED IN THE "SU		ND IN THE N	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R		Narrative			To Be Corrected By			
413 NC Observed gap to outside				gap to outside at bo	ottom of back door.		04/0	)7/2025		
Received by			printed):		Inspected by (name and title p	orinted):				
Received by	(signature	):			Inspected by (signature):					
cc:				cc:	cc:			cc:		



Establishm	CEN S	ss (nu	ad Chick Imber and street, city, state, zip code) nd Road, Evansville, IN, 47715	8) (<	redacted>	Date of Inspection (mm/dd/yr) 04/09/2025		ID # 14379 e Date
Danny	/ Dua	ae	r		rpose: Routine	Follow-u NO	T	19/2025
Owner's A		90			Follow-up		of Violation	
<reda< td=""><td>cted&gt;</td><td>•</td><td></td><td></td><td>Complaint</td><td>-</td><td></td><td></td></reda<>	cted>	•			Complaint	-		
Person in C					Pre-Operational			J <sub>R</sub> U
<reda< td=""><td></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 Ty	pe <i>(See addii</i>	ional page)
Certified F		er			Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{O}_4 \underline{O}_5 \underline{O}_5$
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARK	ED "C"			
• VIOLATIO	ON(S) REPE	ATEI	) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	мма	RY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"
Section# C/NC R Narrative							To Be Co	orrected By
294 C Chemical sanitizer tested below r				required concentration. Correct				
303 C Observed food contact surfaces not properly s				aniti	zed in 3 compartme	ent sink.	Co	rrected
Received by		_		-	ected by (name and title pr edacted>	rinted):		
Received by	/ (signature	):		Insp	ected by (signature):			
cc:			cc:			cc:		



	a Jap		nese Restaurant mber and street, city, state, zip code)	Telephone Number (812-303-0359	Date of In: (mm/dd/yr 04/09		<sup>ID #</sup> 14383	
			Ste 3D, Evansville, IN, 47712	<pre>(<redacted></redacted></pre>				
<sup>Owner</sup> Winda				Purpose:	Follow-u NO		<sup>e Date</sup> 19/2025	
Owner's Ad				Follow-up	Summary	of Violation	IS:	
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>1</td><td>1</td><td>1</td></reda<>				Complaint	1	1	1	
Person in C	0			Pre-Operational	C	NC_	R	
Responsible				- Temporary	Menu Type (See additional page)			
responsion	i cison s			НАССР				
Certified Fo		r		Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{O}_4 \underline{O}_5 \underline{O}_5 \underline{O}_5$	
• CRITICAL	ITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"				
• VIOLATIO	N(S) REPE	ATED	) FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
329	С		Women's restroom sink not pro	oviding hot water.		04/0	)9/2025	
234 NC R Observed bowls without handles being us				d to dispense bulk dry	goods.	Co	rrected	
Received by		-		Inspected by (name and title p <redacted></redacted>	rinted):			
Received by	(signature)	12		Inspected by (signature):				
cc:			cc:		cc:			



Establishm MCAI Establishm 5301 Owner David Owner's Au <reda Person in C <reda Responsible Certified F <reda< th=""><th>ent Address Pearl Black ddress Cted&gt; Cted&gt; Cted&gt; cted&gt; cted&gt; ood Handle</th><th>ss (nu Dr kbu</th><th>umber and street, city, state, zip code) Ste 100, Evansville, IN, 47712 Jrn</th><th>Telephone Number (812-228-4222 (<redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>Follow-u NO Summary C_1</th><th>r) 7/2025 p Releas</th><th><u> </u></th></reda<></reda </reda 	ent Address Pearl Black ddress Cted> Cted> Cted> cted> cted> ood Handle	ss (nu Dr kbu	umber and street, city, state, zip code) Ste 100, Evansville, IN, 47712 Jrn	Telephone Number (812-228-4222 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C_1	r) 7/2025 p Releas	<u> </u>
1		F ID	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
			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
443	С		Sanitizer solution tested above required co	onsecration in wiping	bucket.		rrected
				1 3			
Received by				Inspected by (name and title p <redacted></redacted>	rinted):		
Received by	(signature)	):		Inspected by (signature):			
cc:			cc:		cc:		



Establishm 5501 Owner Derek Owner's A <reda Person in C <reda Responsibl</reda </reda 	ent Addres Pearl Unge ddress cted> Charge cted> e Person's	ss (nur Dr eth		Telephone Number (812-303-4036 ( <redacted> Purpose:</redacted>	Follow-u NO Summary C	r) /2025 P Releas 04/ of Violation NC	L R O
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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				orrected By
294	C		Chemical sanitation concentration	n below required le	vel.		11/2025
346	NC		Soap not provided at I			11/2025	
324	С		Grease trap log not m			04/1	1/2025
Received by	i (name and	l title ı	printed):	Inspected by (name and title p	rinted):		
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Received by				Inspected by (signature):			
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1418 Owner Jerem Owner's Ad <redae Person in C <redae Responsible Certified Fe <redae< th=""><th>Rand ent Address W Fra iah G idress cted&gt; cted&gt; cted&gt; e Person's cted&gt;</th><th>ss (nu ank Gale E-ma</th><th>nber and street, city, state, zip code) lin St, Evansville, IN, 47710 ey</th><th></th><th>elephone Number 312-401-2332 <redacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted></th><th>Follow-u NO Summary C</th><th>p Releas 04/ of Violation NC_</th><th></th></redae<></redae </redae 	Rand ent Address W Fra iah G idress cted> cted> cted> e Person's cted>	ss (nu ank Gale E-ma	nber and street, city, state, zip code) lin St, Evansville, IN, 47710 ey		elephone Number 312-401-2332 <redacted> urpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>	Follow-u NO Summary C	p Releas 04/ of Violation NC_	
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S			D IN THE N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
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				1101				
Received by		-	printed):	-	redacted>	inted):		
Received by	(signature)	):		Insj	bected by (signature):			
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Establishm 900 M Owner	's Ve ent Addres lain S nder I ddress cted>	ss (nu St., Rai	ezuelan Cuisine Imber and street, city, state, zip code) Evansville, IN, 47708 mirez Villalobos	(4 (~ Pu	Performe Number 107-371-8818 <redacted> urpose: Routine Follow-up Complaint</redacted>	<sup>Follow-u</sup> NO	r) )/2025 p Releas	
<reda< td=""><td></td><td>•</td><td></td><td></td><td>Pre-Operational</td><td>L</td><td>NC</td><td><u> </u></td></reda<>		•			Pre-Operational	L	NC	<u> </u>
Responsible	e Person's	E-ma	il	┣	Temporary HACCP	Menu Ty	pe <i>(See addi</i>	tional page)
Certified F		er			HACCP Other (list)	1 <u>0</u> 2	<u></u> 3	)_45
• CRITICAI	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	ЛАRF	KED "C"			
• VIOLATIO	DN(S) REPE	ATEI	D FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MM/	ARY 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	6.			
Received by	/ (name and	l title	printed):	Insr	bected by (name and title pr	rinted):		
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Received by					pected by (signature):			
cc:			cc:			cc:		



	gan's ent Addree lain S a Pie ddress cted> Charge cted>	ss (nu t., tro	mber and street, city, state, zip code) Evansville, IN, 47708 wski	Telephone Number (812-746-8848 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP</redacted>	Follow-u NO Summary C	r) B/2025 P Releas 04/ of Violation NC	
Certified F		er		Other (list)	1 <u>0</u> 2	<u></u> 3	$\underline{)}_4 \underline{\bigcirc}_5 \underline{\bigcirc}$
			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				orrected By
Section#	C/NC	K				TO BE CO	Jirected By
	No noted violations.						
Received by				Inspected by (name and title pr <redacted></redacted>	rinted):		
Received by	(signature	):		Inspected by (signature):			
cc:			cc:		cc:		



	s Piz ent Addres W. De Clark ddress cted> Charge cted> e Person's	ss (nu elav E-ma	mber and street, city, state, zip code) ware St., Evansville, IN, 47712	Telephone Number (812-423-3160 ( <redacted> Purpose: Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)</redacted>			<u> </u>
<ul> <li>CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"</li> <li>VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"</li> </ul>							
Section#	C/NC	R	Narrative				orrected By
Section#	C/NC	K	No violations to r	noto		TO BE CO	frected by
				IOLE.			
<redacted></redacted>				Inspected by (name and title printed): <redacted></redacted>			
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