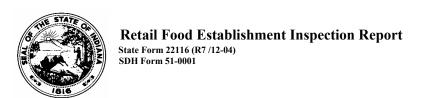
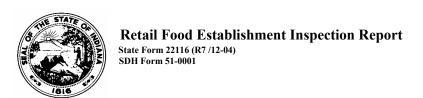


Establishm		_		Telephone Number	Date of Insp	ection	ID#
Zaxby	y's - I	٧.	Burkhardt	812-602-5515	(mm/dd/yr) 08/13/2	2024	13086
			mber and street, city, state, zip code)	<pre></pre>	06/13/	2024	
1021 I	N. Bu	rkh	nardt , Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner	1.1	- (	NA/ Dana - att 1 1 0	Purpose:	Follow-up		se Date
		s (	CW Properties LLC	<b>✓</b> Routine	No	08/	23/2024
Owner's Ac				Follow-up	Summary o	f Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>NC_</td><td></td></reda<>				Complaint	$\cap$	NC_	
Person in C				Pre-Operational	C	NC	R = R
Responsible			<u> </u>	Temporary	Menu Tyne	(See addi	tional page)
Responsible	c i cison s	L-ma		НАССР	wienu Type	(See aaai	nonui puge)
Certified F	ood Handle	er		Other (list)	$ _{1}\bigcirc_{2}($	$)_3$ ( $\bullet$	$_{4}O_{5}O_{1}$
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• CRITICAL	LITEMS AR	E IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
					IN IN THE NA	DD ATIVE	DELOWAS "D"
			PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	WIMARY OF VIOLATIONS AN			
Section#	C/NC	R	Narrative	at an anational			orrected By
218	NC		Air curtain on back door no	ot operational.		08/3	30/2024
	1						
				Y			
Received by	`			Inspected by (name and title pr	rınted):		
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Received by	(signature)	):		Inspected by (signature):			
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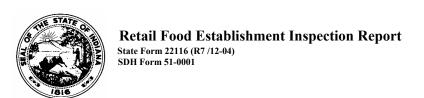
Establishm		_		Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
			ood Mart	812-402-0144	08/12/	2024	12366
			mber and street, city, state, zip code) Cky Ave, Evansville, IN, 47714	<pre>(<redacted></redacted></pre>	00/12/	2024	
Owner	0			Purpose:	Follow-up		se Date
Gulsh		ora		<b>✓</b> Routine	No	08/	22/2024
Owner's Ac				Follow-up	Summary o	f Violation	as:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>  1</td><td>(</td><td>) ()</td></reda<>				Complaint	1	(	) ()
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td><math>\frac{1}{R}</math></td></reda<>				Pre-Operational	C	NC_	$\frac{1}{R}$
Responsible			il	Temporary	Menu Type	(See addi	tional page)
			_	НАССР		,	
Certified F	ood Handle	er		Other (list)	$ _{1}\bigcirc_{2}($	$)_3$ $\bullet$	$)_{4}\bigcirc_{5}\bigcirc$
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• CRITICAL	ITEMS AR	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 NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be C	orrected By
118	С		Establishment doesn't have cer	rtified food handler		09/	12/2024
					<del></del>		
Received by		_		Inspected by (name and title p	rinted):		
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Received by	(signature)	):		Inspected by (signature):			
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Establishm				Telephone Number Date of Inspection (mm/dd/yr)					
Ruler	Foo	d S	Store #235	812-423-5751	(812-423-5751 08/13/2024 1202				
			mber and street, city, state, zip code)	<redacted></redacted>	06/13	2024			
	N Firs	St A	ve, Evansville, IN, 47710		77.11	151	7		
		Sto	res Kroger Limited Partnership 1	Purpose:  Routine	Follow-up No		se Date 123/2024		
Owner's A				Follow-up	Summary	of Violatio	ns:		
<reda< td=""><td></td><td>1</td><td></td><td>Complaint</td><td>1</td><td>(</td><td>) ()</td></reda<>		1		Complaint	1	(	) ()		
Person in C				Pre-Operational	C	NC_	$I_{R}U$		
Responsible			il	Temporary	Menu Tyn	e (See addi	itional page)		
Trosponsion.	0 1 013011 3			НАССР		_			
Certified F		er		Other (list)	$1 \bigcirc 2$	<u>3</u>	<u>)4O5O</u>		
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• CRITICAI	L ITEMS AF	RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"					
		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				orrected By		
139	С		Baby formula on shelf past of	expiration date.		<u>Co</u>	rrected		
Received by		_		Inspected by (name and title p < redacted>	rinted):				
Received by				Inspected by (signature):					
		_							
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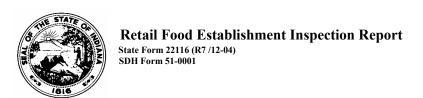
Establishme				Telephone Number	Date of Inspo (mm/dd/yr)	ection	ID#
S&A	Food	M	art	812-402-2101		2024	11999
			mber and street, city, state, zip code)	() Owner	08/14/2	2024	
1000 \	<i>N</i> ash	ing	ton Ave, Evansville, IN, 47714	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Neera		<u>ink</u>	I	<b>✓</b> Routine	No	08/	24/2024
Owner's Ac				Follow-up	Summary of	f Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_	$\mathcal{I}_{R}$
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Responsible	e Person's	E-mai	ıl	НАССР	Menu Type	(See addi	tional page)
Certified Fo	od Handle	nr.		Other (list)	$1_1\bigcirc_2$	)	$)_4\bigcirc_5\bigcirc$
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		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IADVED "C"			
					ID IN THE NA	DD ATIME	DELOW AC 4D9
	C/NC		PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			то ве Сс	orrected By
			No noted violation	ons.			
							·
Received by	(name and	title p	printed):	Inspected by (name and title p	rinted):		
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Received by				Inspected by (signature):			
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Establishm				Telephone Number	Date of Insp (mm/dd/yr)		ID#
Dolla	r Ger	ner	al #12805	812-228-8601	08/15/		11947
			mber and street, city, state, zip code)	<pre><redacted></redacted></pre>	06/15/	2024	
	N Ful	ton	Ave, Evansville, IN, 47710	<re><redacted></redacted></re>			
Owner DOLG	SENC	OR	RP LLC	Purpose:  Routine	Follow-up NO		se Date //16/2024
Owner's Ac				Follow-up	Summary o	of Violation	ns:
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Complaint</td><td>آ م</td><td>_</td><td></td></reda<>	cted>			Complaint	آ م	_	
Person in C				Pre-Operational		NC_(	J <sub>R</sub> U
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>	cted>			Temporary			
Responsible	e Person's	E-ma	il	НАССР	Menu Type	(See addi	tional page)
						$\neg \cap$	
Certified Fo		er		Other (list)	102	<u>3</u>	<u> 1405</u>
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• CRITICAL	L 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 "S	UMMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No violations to	note.			
							<del></del>
Received by	(name and	title 1	L printed):	Inspected by (name and title p	rinted):		
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Establishm	ent Name				Telephone Number	Date of Inspe	ection	ID#	
CVS	Phar	ma	acy #7045		812-467-0109	(mm/dd/yr)	2004	11909	
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)			08/16/2	2024		
801 N	First	A۷	e, Evansville, IN, 47710		' <redacted></redacted>				
Owner		\	27/11/0		Purpose:	Follow-up		se Date	
		<u>'Ŀ</u>	RX LLC		<b>✓</b> Routine	No	08/	26/2024	
Owner's Ac					Follow-up	Summary of	f Violatio	ns:	
<reda< td=""><td></td><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td>) (</td></reda<>					Complaint	$\cap$	(	) (	
Person in C	0				Pre-Operational	$_{\rm C}$	$_{\rm NC}$	$R_{\rm R}$	
Responsible				Temporary	Menu Type	(See addi	tional naga)		
Kesponsible	c i cison s	L-ma	u	НАССР	- Type	(See aaai	nonui puge)		
Certified Fo	ood Handle	er		Other (list)	$_{1}\bigcirc_{2}($	$\bullet$ ) <sub>3</sub> (	$_{4}\bigcirc_{5}\bigcirc$		
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• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE C	OLUMNS M	MARKED "C"	-			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED I	N THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"	
Section#	C/NC	R	Nar	rative			Го Ве Со	orrected By	
			No violatio	ns to r	note.				
Received by	(name and	title 1	printed):	<u> </u>	Inspected by (name and title pr	rinted):			
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Received by				Inspected by (signature):					
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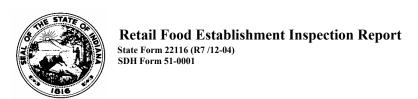
Establishme			`	Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Little	Caes	sar	`s Pizza	812-471-5755		2024	11776
			mber and street, city, state, zip code)	( )Owner .	08/14/	2024	
2007 V	Vashii	ngt	on Ave #1, Evansville, IN, 47714	<pre>(<redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Kamle		ate		<b>✓</b> Routine	No	08/	24/2024
Owner's Ac				Follow-up	Summary o	f Violation	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td><math>\cap</math></td><td>(</td><td>) ()</td></reda<>				Complaint	$\cap$	(	) ()
Person in C				Pre-Operational	$_{\rm C}$ $\cup$	NC_	J <sub>R</sub> U
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Responsible	e Person's	E-ma	il	НАССР	Menu Type	(See addi	tional page)
Certified Fo	ood Handle	210		Other (list)	10,0	),(	),(),()
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		E INE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IADVED "C"			
					ID IN THE NA	DD A TIME	DELOW AC 4D*
	C/NC		FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			lo Be Co	orrected By
			No noted violation	ons.			_
Received by	(name and	title 1	printed):	Inspected by (name and title p	rinted):		
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Received by				Inspected by (signature):			
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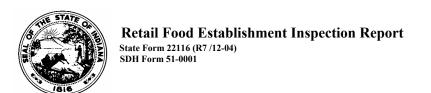
Establishm				Telephone Number	Date of Inspec	ction	ID#	
			et- Royal	812-424-8289	(mm/dd/yr) 08/15/2	024	11446	
			Mber and street, city, state, zip code) Ave, Evansville, IN, 47710	( <redacted></redacted>	00/13/2	.024		
	N I UII	LOIT	Ave, Evansvine, iii, 47710		To U	D 1	se Date	
Owner Winkle	er Inc			Purpose:  Routine	Follow-up NO		25/2024	
Owner's Ac				Follow-up	Summary of	Violation	1S:	
<reda< td=""><td>cted&gt;</td><td>ı</td><td></td><td>Complaint</td><td></td><td></td><td>•</td></reda<>	cted>	ı		Complaint			•	
Person in C				Pre-Operational	$_{\rm C}$ U	NC_	J <sub>R</sub> U	
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Responsible	e Person's	E-mai	il	НАССР	Menu Type (	See addii	tional page)	
Certified F	ood Handle	or		Other (list)	10,0	),(	),(),()	
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• CRITICAL	. ITEMS AR	RE 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	RATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative		Т	o Be Co	orrected By	
			No violations to	note.				
			-					
-	Received by (name and title printed): <redacted>  Inspected by (name and title printed):  <redacted></redacted></redacted>							
Received by				Inspected by (signature):				
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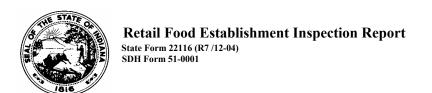
Establishm				Telephone Number	Date of Ins (mm/dd/yr)		ID#
Wess	selma	ins	Sonntag	812-424-3549	08/14		11442
			mber and street, city, state, zip code)	( )Owner	06/14/	2024	
	<u>onnta</u>	g A	Ave., EVANSVILLE, IN, 47712	<re><reuacieu></reuacieu></re>			
Owner Winkle	er Inc			Purpose:	Follow-up No		se Date //24/2024
Owner's Ac	ddress			Follow-up	Summary	of Violation	ns:
<reda< td=""><td>cted&gt;</td><td></td><td></td><td>Complaint</td><td></td><td></td><td></td></reda<>	cted>			Complaint			
Person in C				Pre-Operational	$\begin{bmatrix} 1 \end{bmatrix}$	NC_(	J <sub>R</sub> U
<reda< td=""><td></td><td></td><td></td><td>Temporary</td><td></td><td></td><td></td></reda<>				Temporary			
Responsible	e Person's	E-ma	il	НАССР	Menu Typ	e (See addi	tional page)
Certified Fo		er		Other (list)	1 2	<u>3</u>	<u>/4</u> 5 <u> </u>
• CRITICAL	L 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 N.	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
139	С		Baby formula on shelf past	expiration date.		Co	rrected
							-
Received by		_		Inspected by (name and title properties)	rinted):		
Received by				Inspected by (signature):			
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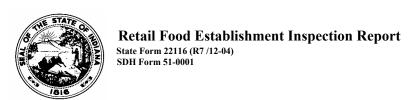
Establishm				Telephone Number	Date of Inspe	ction	ID#	
Walm	nart #	#1:	341	812-424-5475	(mm/dd/yr) 08/15/2	0024	11430	
			mber and street, city, state, zip code) NK Rd, Evansville, IN, 47712	<pre></pre>	00/13/2	.024		
	Neu	Da	TIK INU, EVALISVIIIE, IIN, 477 12		T. II	I n ı		
Wal-m	nart S	tor	es East, LP	Purpose:  Routine	Follow-up NO		25/2024	
Owner's Ac				Follow-up	Summary of	Violation	1S:	
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Person in C				Pre-Operational	$_{\rm C}$ ${\sf U}$	NC_	J <sub>R</sub> U	
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Responsible	e Person's	E-ma	il	НАССР	Menu Type	See addii	tional page)	
Certified F	ood Handl	or		Other (list)	$10^{\circ}$	)	),(•),(•)	
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• CRITICAL	L ITEMS AF	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS I	MARKED "C"				
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE NAF	RRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative		Т	o Be Co	orrected By	
			No violations to	note.				
Received by	,		Inspected by (name and title properties)	rinted):				
Received by				Inspected by (signature):				
cc:			cc:		cc:			



Establishm Achie		Sr	niles Waiver Services, Inc	Telephone Number (812-477-1707	Date of Ins (mm/dd/yr	j	то# 11280
Establishm	ent Addres	ss (nu	mber and street, city, state, zip code) On Ave, EVANSVILLE, IN, 47714	( )Owner	08/12	/2024	200
Owner			PELAND	Purpose:	Follow-up		se Date //22/2024
Owner's A				Follow-up		of Violation	
<reda< td=""><td>cted&gt;</td><td>,</td><td></td><td></td><td></td><td>_</td><td>_</td></reda<>	cted>	,				_	_
Person in C				Complaint	[ ( )	,,,(	$\frac{0}{R}$
<reda< td=""><td></td><td></td><td></td><td>✔ Pre-Operational</td><td>[ C</td><td>NC_</td><td><u> </u></td></reda<>				✔ Pre-Operational	[ C	NC_	<u> </u>
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР			
Certified F		er		Other (list)	$1 \bigcirc 2$	<u>3</u>	<u>)</u> 4 <u>U</u> 5 <u>U</u>
• CRITICAI	L ITEMS AF	RE IDI	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 N	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			Approved for oper	ation.			
			1.				
Received by				Inspected by (name and title p < redacted>	rinted):		
Received by				Inspected by (signature):			
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Establishm				Telephone Number Date of Inspection (mm/dd/yr)				
			ns - Wash. Sq.	(8	312-473-4606	08/14/	2024	11226
			mber and street, city, state, zip code)	(	) Owner	00/14/	202 <del>4</del>	
	vvasr	nın	gton Sq, Evansville, IN, 4771	_				
Owner Drion	Citzm	on		I	urpose:	Follow-up		se Date
Brian		an		<u> </u>	Routine	No		24/2024
Owner's Ad				L	Follow-up	Summary o	f Violatio	ns:
Person in C				<u> </u>	Complaint	$\cap$	NC_	$\cap$
<reda< td=""><td></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 Type	: (See addi	tional page)
					НАССР			
Certified Fo		er			Other (list)	1 <u>0</u> 2	<u>•)</u> 3 <u>C</u>	<u>)4</u> <u>0</u> 5 <u>0</u>
		E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	S MAR	KED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "S			D IN THE NA	RRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative				To Be Co	orrected By
			No noted violat	ions	S.			-
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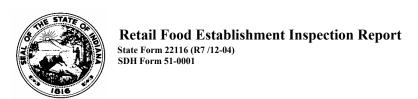
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Circle	) K #	470	00091	812-461-2373	08/15/	2024	11106
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	06/13/	2024	
7 N Ft	ulton <i>i</i>	<u> 4ve</u>	e, Evansville, IÑ, 47710	<re><redacted></redacted></re>			
Owner	_		. 0. 110	Purpose:	Follow-up		se Date
		/er	nience Store LLC	Routine	No	08/	25/2024
Owner's A				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_	$\frac{\mathbf{J}}{\mathbf{R}}$
Responsible			:1	Temporary	Monu Tyme	(Saa addi	tional page)
Kesponsibil	e i eison s	L-ma	11	НАССР	Wichu Type	- (See aaai	tional page)
Certified F	ood Handl	er		Other (list)	$ _{1}\bigcirc_{2}($	$)_3$ ( $\bullet$	$)_4\bigcirc_5\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"			
					ID IN THE NA	DD A TIME	DELOWAS "D"
	C/NC		PROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMINIARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative		<del></del>	10 ве С	orrected By
			No violations to	note.			
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Establishm	_			Telephone Number	ID#		
Leroy	r´s Ta	<b>ave</b>	ern	812-464-8300	(mm/dd/yr) 08/14/		11081
			mber and street, city, state, zip code)	( ) Owner	00/14/	2024	
1	Mt. V	<u>ern</u>	on Ave., Evansville, IN, 47712				
Owner	امدا			Purpose:	Follow-up		se Date
Terri (				Routine	No		24/2024
Owner's Ad				Follow-up	Summary of	of Violation	ns:
Person in C				Complaint	$\cap$	$_{\rm NC}$	$\cap$
<reda< td=""><td></td><td>,</td><td></td><td>Pre-Operational</td><td>C</td><td>NC_</td><td><math>\frac{1}{R}</math></td></reda<>		,		Pre-Operational	C	NC_	$\frac{1}{R}$
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР			
Certified F		er	_	Other (list)	$_{1}\bigcirc_{2}($	$\bigcirc_3$ $\bigcirc$	$)_{4}\bigcirc_{5}\bigcirc$
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• CRITICAI	L 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 "SUI	MMARY OF VIOLATIONS" AN	D IN THE NA	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrative			To Be Co	orrected By
			No violations to r	note.			
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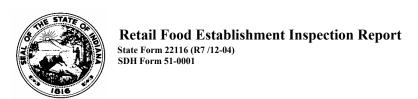
EALPT AN	TO L. L. NY. L	D-461	4*	TD //
Hillcrest Home	Telephone Number (812-428-0698	Date of Insp (mm/dd/yr)		ть# 11030
Establishment Address (number and street, city, state, zip code)	( )Owner .	08/14/	2024	11000
2700 W Indiana St, EVANSVILLE, IN, 47	712 <redacted></redacted>			
Owner HILLCREST HOME	Purpose:  Routine	Follow-up NO		se Date 24/2024
Owner's Address	Follow-up	Summary o		
	Complaint	Summary		_
Person in Charge	Pre-Operational	$_{c}$ $0$	NC_(	) , ()
<redacted></redacted>		C	NC	K
Responsible Person's E-mail	Temporary	Menu Type	(See addi	tional page)
	HACCP	$\sim$		
Certified Food Handler <redacted></redacted>	Other (list)	1 <u>U</u> 2 <u>U</u>	<u>J</u> 3 <u>C</u>	<u> 1405</u>
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COL	UMNS MARKED "C"			
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN T	THE "SUMMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
Section# C/NC R Narrat	tive		To Be Co	orrected By
No violation:	s to note.			
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Received by (signature):	Inspected by (signature):			



5440 F	enda ent Addres Pearl Acqui dress cted> harge cted>	Dr.	mber and street, city, state, zip code) , Evansville, IN, 47712 on Company, Inc.	Pu Pu	lephone Number 12-422-2055 Credacted> rpose: Routine Follow-up Complaint Pre-Operational Temporary	Follow-u NO Summary	P Release 08/		
Certified Fo		er		$\vdash$	HACCP Other (list)	102	<u></u>	)4050	
• CRITICAL	ITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIV	E COLUMNS M	MARK	ED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTE		MMA	RY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R		Narrative	0 O t 4			To Be Co	orrected By
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Establishmo Fairfic		n	Evansville East	Telephone Number (812-471-7000)	Date of Ins (mm/dd/yr)	)	10960
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	( )Owner .	08/16	/2024	
7879 E	<u>=agie</u>	<u>Cr</u>	est Blvd., Evansville, IN, 47715				
Owner La Pos	sada	Gr	oup LLC	Purpose:	Follow-up		se Date //26/2024
Owner's Ac			•	Follow-up	Summary	of Violation	ne:
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Person in C				Complaint	()		$0_{\rm R}$
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Responsible			il	Temporary	Menu Tvr	e (See addi	tional page)
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Certified Fo		er		Other (list)	102	<u>3</u>	$)_4$ $\bigcirc_5$ $\bigcirc$
<1 <del>C</del> uac	ileu>				<u> </u>		
• 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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3600 I	s #72 ent Addres First A	ss (nui	e, Evansville, IN, 47710	Telephone Number  (812-484-1244  ( <redacted> Purpose:</redacted>	Date of Insp (mm/dd/yr) 08/13/ Follow-up	/2024	10848 10848
Person in Correction Responsible	ddress Cted> Charge Cted> e Person's	E-ma	g Company	Routine Follow-up Complaint Pre-Operational Temporary HACCP Other (list)	No Summary of C Menu Typo  1 2 (	of Violation	_
• CRITICAL	. ITEMS AR ON(S) REPE		ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS  FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SI				
Section#	C/NC	R	Narrative			To Be Co	orrected By
294	С		Chemical sanitation concentration	n above required le	vel.	08/	13/2024
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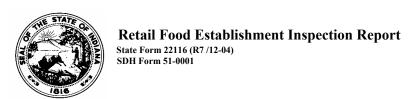
Establishm				Telephone Number	Date of Inspe (mm/dd/yr)	ection	ID#
Span	key's	U	na Pizza	812-402-6776	08/14/2	2024	13746
			mber and street, city, state, zip code)	<pre></pre>	06/14/	2024	
4404 \	W Llo	yd	Expwy, Evansville, IN, 47712	<re><redacted></redacted></re>			
Owner				Purpose:	Follow-up		se Date
Ryan				<b>✓</b> Routine	No	08/	24/2024
Owner's A				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_	$\mathcal{L}_{R}$
Responsible			:1	Temporary	Many Tyma	(Can addi	tional page)
Kesponsibio	e rerson's	c-ilia	ш	HACCP	Menu Type	(see aaai	nonai page)
Certified F	ood Handle	er		Other (list)	1()2(	),(•	$)_4\bigcirc_5\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS IN	AARKED "C"			
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			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative			ro Be Co	orrected By
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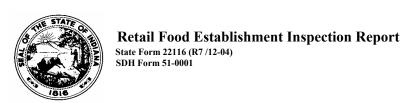
			• • •	•			
Establishmo Pana		9	an Miguel LLC	Telephone Number	Date of Ins (mm/dd/yr)		13839
				812-814-8037	08/14	/2024	13039
			mber and street, city, state, zip code) ton Ave, Evansville, IN, 47714	' <redacted></redacted>			
Owner				Purpose:	Follow-up		se Date
Migue	I Och	oa		<b>✓</b> Routine	No	08/	24/2024
Owner's Ac	ddress			Follow-up	Summary	of Violatio	ns.
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Person in C					$\int_{\Omega} \mathbf{U}$	NC_(	$\mathbf{J}$ $\mathbf{L}$
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Responsible	e Person's	E-ma	il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР		_	
Certified Fo	ood Handl	er		Other (list)	$_{1}()_{2}($	$(\bullet)_3($	)4()5()
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• CRITICAL	. ITEMS AF	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"			
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			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE NA		
Section#	C/NC	R	Narrative			To Be Co	orrected By
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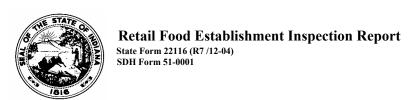
							-
Establishmo		col	unt Tobacco and Convenience	Telephone Number (812-492-8800)	Date of Ins (mm/dd/yr	o)	то# 14160
Establishm	ent Addres	s (nu	mber and street, city, state, zip code) AY Ave, Evansville, IN, 47712	<pre>(<redacted></redacted></pre>	08/15	/2024	
Owner	<u> </u>		, , , , , , , , , , , , , , , , , , ,	Purpose:	Follow-uj		se Date
Kevin	Singl	1		<b>✓</b> Routine	No	08/	25/2024
Owner's Ac				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_	$0_{R}$
Responsible				Temporary	Monu Tur	o (Saa addi	tional page)
Kesponsible	e i cison s	L-ma	ш	НАССР	- Wichu Typ	c (see addi	iionai page)
Certified Fo		er		Other (list)	102	$\bigcirc_3$	$)_4 \bigcirc _5 \bigcirc$
		RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"	L		
• VIOLATIO		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.			
Received by		_		Inspected by (name and title precised>	rinted):		
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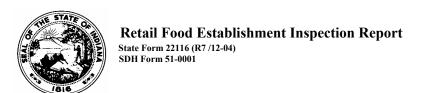
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Noble	Ror	na	ns	812-303-4010	08/14/	2024	14185
			mber and street, city, state, zip code)	( )Owner _	00/14/	2024	
	Red B	anl	k Rd Ste M, Evansville, IN, 47712	<re><redacted></redacted></re>			
Owner				Purpose:	Follow-up		se Date
Scott		nba	ach	<b>✓</b> Routine	No	08/	24/2024
Owner's A				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	C	NC_(	$\mathcal{L}_{R}$
Responsible			:1	Temporary	Manu Tyma	(Can addi	tional page)
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Certified F	ood Handle	er		Other (list)	$ _{1}\bigcirc_{2}($	$)_3$ ( $\bullet$	$)_4\bigcirc_5\bigcirc$
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		E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	TARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI		ID IN THE NA	DD ATIVE	DELOWAS "D"
Section#	C/NC	R	Narrative	WINIARY OF VIOLATIONS AN			
Section#	C/NC	K		n o t o		10 ве С	orrected By
			No violations to r	iote.			
		L					
D-: 11	. (	4141		Tunnated 1 / 100	-i4- 1\		
Received by	*	_ *		Inspected by (name and title p < redacted>	rinted):		
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Establishm				Telephone Number	Date of Ins		ID#
Delma	r Petro	oleu	ım Inc dba Broadway Foodmart	(812-303-5502	08/15	,	14234
			mber and street, city, state, zip code) Ave, Evansville, IN, 47712	<pre>(<redacted></redacted></pre>	06/13	12024	
Owner				Purpose:	Follow-up		se Date
Rajino		ıur		Routine	No	08/	25/2024
Owner's Ac				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_(	$\frac{1}{R}$
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)
				НАССР			
Certified Fo		er		Other (list)	1 2	<u>3</u>	<u>)4</u> <u>0</u> 5 <u>0</u>
• CRITICAL	L ITEMS AF	RE IDF	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MA	ARKED "C"			
• VIOLATIO	ON(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUM	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 no	ote.			
Received by				Inspected by (name and title properties)	rinted):		
Received by			1	Inspected by (signature):			
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Establishm				Telephone Number	spection ·)	ID#	
Canto				812-428-6611		/2024	14335
			mber and street, city, state, zip code)	<pre><redacted></redacted></pre>	00/10	// <b>Z</b> UZ-T	
4	orth F	ar <u>ع</u>	k Dr, Evansville, IN, 47710				
Owner				Purpose:	Follow-u		se Date
Fei Li				Routine	No	08/	23/2024
Owner's A				Follow-up	Summary	of Violatio	ns:
<reda< td=""><td></td><td></td><td></td><td>Complaint</td><td>2</td><td>(</td><td>) (</td></reda<>				Complaint	2	(	) (
Person in C				Pre-Operational	$_{\rm C}$	NC (	$0_{R}$
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Responsible	e Person's	E-ma	il	НАССР	Menu Typ	oe (See addi	tional page)
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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
177	С		Food stored improperly	y on floor			13/2024
	C						
177	C		Food not covered or dated in	n waik in cooler.		06/	13/2024
Received by		_		Inspected by (name and title p	rinted):		
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Establishm	ent Name			Telephone Number	Date of Inspe	ection	ID#
Taqu	<u>eria `</u>	<u> </u>	Pupuserias Miranda	812-492-9992	(mm/dd/yr) 08/14/2	2024	14373
			mber and street, city, state, zip code) ton Ave., Evansville, IN, 47714	<pre>(<redacted></redacted></pre>	00/14/2	2027	
		nda	& Johnathan Barrera	Purpose:  Routine	Follow-up No		se Date 24/2024
Owner's A				Follow-up	Summary of	f Violatio	ns:
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Person in C				Pre-Operational	$_{\rm C}$ U	NC_	J <sub>R</sub> U
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Responsible	e Person's	E-ma	il	НАССР	Menu Type	(See addi	tional page)
Certified F	ood Handl	er		Other (list)	$10^{\circ}$	$)_3$ ( $\bullet$	$)_{4}\bigcirc_{5}\bigcirc$
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• CRITICAL	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 "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			_	Telephone Number	Date of Inspe	ection	ID#
Chick	<u>cen S</u>	ala	ad Chick	<sup>(</sup> 812-401-2770	(mm/dd/yr) 08/13/2	2024	14379
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	00/13/2	2024	
		IIai	nd Road, Evansville, IN, 47715				
Owner Danny	/ Dua	aeı	r	Purpose:	Follow-up NO		se Date 23/2024
Owner's Ac		3 -		Follow-up	Summary of	-	
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Person in C				Pre-Operational		NC_	J b O
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Responsible	e Person's	E-ma	il	Temporary HACCP	Menu Type	(See addi	tional page)
C (C IE	177 11			Other (list)	.0.0		$\bigcirc$
Certified Fo		er				<u></u>	<u>/4050</u>
		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		7	Го Ве Со	orrected By
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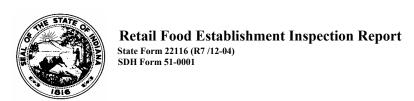
Establishm				Telephone Number	Date of Insp	ection	ID#
M&N	Food	Λk	⁄lart	812-401-2066	(mm/dd/yr)	2024	14578
			mber and street, city, state, zip code)		08/15/	2024	
1321 l	N Fult	ton	Ave, Evansville, IN, 47710	<pre><redacted></redacted></pre>			
Owner M&N I	Food	Ma	art	Purpose:	Follow-up NO		se Date //25/2024
Owner's Ac	ddress			Follow-up	Summary o	f Violatio	ns.
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Responsible	e Person's	E-ma	il	HACCP	Menu Type	(See addi	tional page)
						$\neg \bigcirc$	
Certified Fo		er		Other (list)	102	<u>3</u>	<u> 14</u> 5 <u></u> 5
<1 <del>E</del> uat	ieu>						
• CRITICAL	LITEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS N	MARKED "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			To Be Co	orrected By
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			mber and street, city, state, zip code)	812-423-5961	08/12	/2024	14608		
920 E	RIVE	RS	SIDE DR, Evansville, IN, 47713	' <redacted></redacted>					
Owner TAP T	REA	TS	. INC.	Purpose:	Follow-uj		se Date // 22/2024		
Owner's Ac			,	Follow-up		of Violatio			
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Person in C				Complaint	L ()	, (	$0_{\rm R}$		
<reda< td=""><td></td><td></td><td></td><td>Pre-Operational</td><td><u> </u></td><td>NC_</td><td><u> </u></td></reda<>				Pre-Operational	<u> </u>	NC_	<u> </u>		
Responsible			il	Temporary	Menu Typ	e (See addi	tional page)		
				НАССР		00			
Certified Fo		er		Other (list)	1 2	$\bigcirc_3$	) <sub>4</sub> <u>0</u> 5 <u>0</u>		
		RE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	IARKED "C"					
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"		
Section#	C/NC	R	Narrative			To Be Co	orrected By		
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Establishmo Missio	_	roı	ınds	Telephone Number (812-421-3808)	Date of Insp (mm/dd/yr)		то# 14734
			mber and street, city, state, zip code)		08/14/	2024	
1107 V	Vashii	ngt	on Square, Evansville, IN, 47715	<pre><redacted></redacted></pre>			
Owner			•	Purpose:	Follow-up	Releas	se Date
Evans	sville	Re	scue Mission, Inc.	<b>✓</b> Routine	No	08/	24/2024
Owner's Ac			·	Follow-up	Summary o	of Violatio	ns:
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Responsible	e Person's	E-ma	il		Menu Type	: (See addi	tional page)
				HACCP	$\sim$		
Certified Fo	ood Handle	er		Other (list)	1 <u>U</u> 2 <u>U</u>	<u>3</u>	<u> </u>
• CRITICAL	LITEMS AR	E IDE	NTIFIED 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			To Be Co	orrected By
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			140 Hoted violatio	JII3.			
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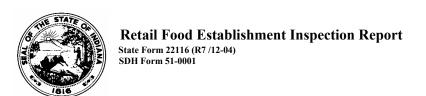
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Parar	ns IN	1C		812-437-5128	08/15/	2024	14915
			mber and street, city, state, zip code)	<pre>(<redacted></redacted></pre>	06/15/	2024	
	Fulto	n <i>F</i>	Ave, Evansville, IN, 47710	<re><redacted></redacted></re>			
Owner	<b>.</b>	ı		Purpose:	Follow-up		se Date
Sumit				Routine	No	08/	25/2024
Owner's A				Follow-up	Summary o	f Violatio	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_	J <sub>R</sub> U
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Responsible	e Person's	E-ma	II	НАССР	Menu Type	(See addi	tional page)
Certified F	and Handl			Other (list)	1.0.0	),(•	$\bigcirc$
Cerunea r	oou manui	er				<u></u>	<u> </u>
• CRITICAL	LITEMS AF	KE IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"			
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE NA	RRATIVE	BELOW AS "R"
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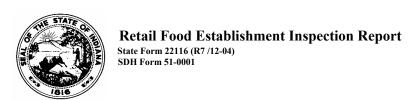
Establishm				Telephone Number	Date of Insp (mm/dd/yr)	ection	ID#
Boba	ccinc	s (	Cafe	812-604-1050	08/16/	2024	14972
			mber and street, city, state, zip code)	<pre></pre>	06/16/	2024	
3848 I	N. Fir	st /	Ave., Evansville, IN, 47710	<re><redacted></redacted></re>			
Owner			,	Purpose:	Follow-up		se Date
Bradle		od	art	Routine	No	08/	26/2024
Owner's A				Follow-up	Summary o	f Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$	NC_(	$\frac{1}{R}$
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Responsible	e Person's	E-ma	il	НАССР	Menu Type	(See addi	tional page)
Certified F	ood Handle	D. M.		Other (list)	100	7,6	$)_{4}\bigcirc_{5}\bigcirc$
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• CRITICAL	TTEMS AR	E IDE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	MARKED "C"			
			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
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Establishm Chipo		1ex	kican Grill #4693	Telephone Number (614-318-2482	Date of Ins (mm/dd/yr	o)	тр# 15122
Establishm	ent Addres	s (nu	mber and street, city, state, zip code)	<pre><redacted></redacted></pre>	08/13	/2024	10122
	Hirsch	าเลเ	nd Rd, Evansville, IN, 47715				
Owner Chipo	tle Me	exic	can Grill of Colorado LLC	Purpose:  Routine	Follow-uj		se Date //23/2024
Owner's Ac				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational			$0_{R}$
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Responsible	e Person's	E-ma	il		Menu Typ	e (See addi	tional page)
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Certified F	ood Handl	er		Other (list)	1 <u>U</u> 2		<u> 1405</u> 0
• CDITICAL	ITEMS AT	E IDI	PATTIFIED IN THE CHECKLIST AND NADDATINE COLUMNS.	MARKER "C"			
			ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS				
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	JMMARY OF VIOLATIONS" AN	D IN THE N		
Section#	C/NC	R	Narrative			To Be Co	orrected By
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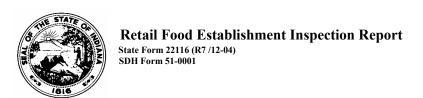
Establishm Strinc		۱.S	moke and Convenience	Telephone Number	Date of Ins (mm/dd/yr		ъ# 15215
				812-401-3090	08/15	/2024	13213
1311 S	String	ss (nui  tov	mber and street, city, state, zip code) VN Rd, Evansville, IN, 47711	<pre><redacted></redacted></pre>			
Owner				Purpose:	Follow-up		se Date
Peter	Singh	1		<b>✓</b> Routine	No	08/	25/2024
Owner's Ac				Follow-up	Summary	of Violation	ns:
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Person in C				Pre-Operational	$_{\rm C}$ U	NC (	$0_{\rm R}$
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					D IN THE N	ADD ATIME	DELOW AC 4D9
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN	DINTHEN		
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Teata	alk Go	ela	to	812-455-2382	08/15/2	2024	15278
			mber and street, city, state, zip code)	( )Owner _	06/15/2	2024	
1524 N	N. Gre	en	River Rd., Evansville, IN, 47715	<re><redacted></redacted></re>			
Owner				Purpose:	Follow-up		se Date
Fan Y				<b>✓</b> Routine	No	08/	25/2024
Owner's A				Follow-up	Summary of	f Violatio	ns:
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Person in C				Pre-Operational	C	NC_	$R_{\underline{U}}$
Responsible			9	Temporary	Menu Type	(Coo addi	tional nace)
Kesponsibio	e rerson's	c-ma	ш	НАССР	Menu Type	(See aaai	uonai page)
Certified F	ood Handle	er		Other (list)	100	•),(	$)_4\bigcirc_5\bigcirc$
Certifica 1	ood Handi	<b>,</b> 1				<u></u>	<u>/4030</u>
• CRITICAL	ITEMS AD	E IUE	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	AARKED "C"	<u> </u>		
					ID IN IDITE S	DD A CERT TO	DELOW 10 (P*
			FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" AN			
Section#	C/NC	R	Narrative		ì		orrected By
234	NC		In-use utensils improperly stored in	water less than 1	35F.	Co	rrected
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Establishme BlueE		lot	Chicken LLC		Telephone Number (812-632-0428)	Date of Ins (mm/dd/yr)	j	тр# 15352
			mber and street, city, state, zip code)			08/16	/2024	
506 ea			street, Evansville, IN, 476	39	<pre>(<redacted></redacted></pre>			
Owner Tait To	enbar	ae			Purpose:  Routine	Follow-up		se Date /26/2024
Owner's Ac		<u> </u>			<del></del>			
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Person in C					Pre-Operational	$c_{\rm C}$	NC_	$\int_{\mathbb{R}} U$
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Responsible	e Person's	E-ma	ll .	НАССР	Menu Typ	e (See addi	itional page)	
Certified Fo	ood Handl	er		Other (list)	$1 \bigcirc 2$	$\bigcirc_3$	$)_4 \bigcirc_5 \bigcirc$	
• CRITICAL	ITEMS AF	E IDE	NTIFIED IN THE CHECKLIST AND NARRATIVE COLU	JMNS N	MARKED "C"			
• VIOLATIO	N(S) REPE	ATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN T	HE "SU	MMARY OF VIOLATIONS" AN	D IN THE N.	ARRATIVE	BELOW AS "R"
Section#	C/NC	R	Narrati	ive			To Be C	orrected By
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Establishm Helac		ce	Cream Antojitos LLC	Telephone Number  (812-598-8091   Date of Inspection (mm/dd/yr)   153				
			mber and street, city, state, zip code)		08/16	/2024	10000	
779 S	. Gree	en l	River Rd, Evansville, IN, 47715					
Owner Ana Isa	abel Lo	ope	z Angel and Fernando Lopez Angel	Purpose:	Follow-up Yes		se Date //26/2024	
Owner's A		-		Follow-up		of Violation		
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Person in C				Complaint	( )	,,, (	$\frac{1}{R}$	
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Responsible			il	Temporary	Menu Typ	e (See addi	tional page)	
•				НАССР				
Certified F	ood Handl	er		Other (list)	$1 \bigcirc 2$	<u>3</u>	<u>)4</u> <u>0</u> 5 <u>0</u>	
• CRITICAI	L ITEMS AI	RE IDI	ENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS M	L IARKED "C"				
• VIOLATIO	ON(S) REPE	CATED	FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUI	MMARY OF VIOLATIONS" AN	D IN THE N	ARRATIVE	BELOW AS "R"	
Section#	C/NC	R	Narrative			To Be Co	orrected By	
			Approved for oper	ation.				
				<u> </u>				
Received by				Inspected by (name and title properties)	rinted):			
Received by				Inspected by (signature):				
cc:			cc:		cc:			