



Public Health
Prevent. Promote. Protect.

Retail Food Establishment Inspection Report

State Form 22116 (R7 /12-04)
SDH Form 51-0001

Dubois County Health Department

Telephone 812-481-7055

Fax 812-481-7069

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name HEADQUARTERS INC.		Telephone Number (812-482-3411)	Date of Inspection (mm/dd/yr) 01/07/2019	ID # 91
Establishment Address (number and street, city, state, zip code) 201 MAIN STREET, JASPER, IN, 47546		(812-639-1844)		
Owner ANDREW J. FRITCH	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow-up No	Release Date 01/17/2019	
Owner's Address 201 MAIN STREET, JASPER, IN, 47546		Summary of Violations: C 1 NC 1 R 1		
Person in Charge ANDREW J. FRITCH		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler Mary Schroeder exp. 3/14/2019				

• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"

• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"

Section#	C/NC	R	Narrative	To Be Corrected By
295	C	R	Ice machine has some mold accumulation, can opener and microwave knife holder, single door prep fridge have some food build up (recommend replacing can opener blade)	03/01/2019
234	NC		Scoops for flour, sugar ect. should have handles to prevent contamination	03/01/2019

Received by (name and title printed): Andrew Fritchd	Inspected by (name and title printed): Christina Pierini
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name HOLIDAY INN EXPRESS		Telephone Number (812-482-3344)	Date of Inspection (mm/dd/yr) 01/14/2019	ID # 96
Establishment Address (number and street, city, state, zip code) 2000 HOSPITALITY DRIVE, JASPER, IN, 47546		(770-904-5220)		
Owner MADHAVA PATEL	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow-up No	Release Date 01/24/2019	
Owner's Address 26 STAR LANE, S BARRINGTON, IL, 60010		Summary of Violations: C <u>0</u> NC <u>0</u> R <u>0</u>		
Person in Charge Ronda Jameson		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler Exempt				

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Section#	C/NC	R	Narrative	To Be Corrected By
			No violations at this time	
			**** Kitchen is being remodeled and hand sink for employees is in a temporary location****	

Received by (name and title printed): Ronda Jameson	Inspected by (name and title printed): Christina Pierini
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name DOLLAR GENERAL STORE #7817		Telephone Number (812-817-0006)	Date of Inspection (mm/dd/yr) 10/15/2019	ID # 59
Establishment Address (number and street, city, state, zip code) 131 E 10TH STREET, FERDINAND, IN, 47532		Owner (615-855-4000)	Follow-up	Release Date 10/25/2019
Owner DOLGENCORP, LLC.		Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Summary of Violations: C 1 NC 1 R 2	
Owner's Address 100 MISSION RIDGE, GOODLETTSVILLE, TN, 37072			Menu Type (See additional page)	
Person in Charge DOLGENCORP, LLC.			1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Responsible Person's E-mail				
Certified Food Handler Exempt				

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Section#	C/NC	R	Narrative	To Be Corrected By
144	C	R	Observed multiple severely dented cans on shelves throughout establishment	10/15/2019
295	NC	R	Observed dirt and mold growth on drink racks in cold food section	12/15/2019

Received by (name and title printed): Deb	Inspected by (name and title printed): Kylie Shephard
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name WENDY'S #340		Telephone Number (812-367-0594)	Date of Inspection (mm/dd/yr) 10/16/2019	ID # 209
Establishment Address (number and street, city, state, zip code) 480 S. MAIN STREET, FERDINAND, IN, 47532		Owner (812-482-3212)	Follow-up	Release Date 10/26/2019
Owner SERVUS, INC.	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Summary of Violations: C 3 NC 2 R 2		
Owner's Address 4201 MANNHEIM RD., STE. A, JASPER, IN, 47546	Person in Charge Jessica Weger	Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0		
Responsible Person's E-mail	Certified Food Handler Rhonda Cuellar exp 4/11/2023			

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Section#	C/NC	R	Narrative	To Be Corrected By
187	C	R	Observed potentially hazardous food items cold held at approx 48F	10/16/2019
295	C	R	Observed significant dirt/grease/food debris throughout establishment	04/16/2020
			Debris on food and non food contact surfaces	
204	C		Significant water contamination noted near South facing wall	10/17/2019
416	NC		Observed accumulation of dead pests near south facing wall	10/17/2019
298	NC		Food debris buildup noted on microwave hood	10/16/2019

Received by (name and title printed): Beth	Inspected by (name and title printed): Kylie Shephard
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name WENDY'S #384		Telephone Number (812-482-3111)	Date of Inspection (mm/dd/yr) 12/02/2019	ID # 210
Establishment Address (number and street, city, state, zip code) 3565 NEWTON STREET, JASPER, IN, 47546		(812-482-3212)		
Owner SERVUS, INC.	Purpose: <input type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow-up	Release Date 12/12/2019	
Owner's Address 4201 MANNHEIM RD., STE. A, JASPER, IN, 47546			Summary of Violations: C <u>4</u> NC <u>2</u> R <u>2</u>	
Person in Charge Wendy Copley			Menu Type (See additional page)	
Responsible Person's E-mail			1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler Brandon Jump exp. 12/10/2020 John Swick 2019				

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Section#	C/NC	R	Narrative	To Be Corrected By
192	C		Observed food with expired used-by date not being disposed of in walk-in	12/02/2019
177	C		Food and food-contact items observed being stored directly on the floor	12/02/2019
443	C		Sanitizing solution observed to be foggy, contained food debris, and weak	12/02/2019
295	C	R	Food and non-food contact surfaces observed to be heavily soiled with food debris and grease throughout establishment	12/31/2019
298	NC	R	Hood of microwave observed to be heavily soiled with food debris	12/03/2019
430	NC		Observed broken tiles near fryer allowing accumulation of water, grease, and food	

Received by (name and title printed): MF	Inspected by (name and title printed): Kylie Shephard
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name DEB'S TRUCK STOP		Telephone Number (812-389-2290)	Date of Inspection (mm/dd/yr) 12/26/2019	ID # 54
Establishment Address (number and street, city, state, zip code) 502 W HWY 64, BIRDSEYE, IN, 47513		Owner (812-639-7526)	Follow-up No	
Owner DEBORAH D ERNST		Purpose: <input checked="" type="checkbox"/> Routine	Release Date 01/05/2020	
Owner's Address 25150 CHANDLER RD, BRISTOW, IN, 47515		<input type="checkbox"/> Follow-up	Summary of Violations: C 1 NC 1 R 2	
Person in Charge DEBORAH D ERNST		<input type="checkbox"/> Complaint		
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	Menu Type (See additional page)	
Certified Food Handler DEBORAH ERNST EXP. 7/9/2019		<input type="checkbox"/> Temporary	1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

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Section#	C/NC	R	Narrative	To Be Corrected By
295	C	R	Observed heavy grease debris on hoods and floors around grills and fryers	06/26/2020
297	NC	R	Fridges inside and out as well as prep area has dirt, food build up	06/26/2020
			Owner has enrolled in manager food certification class	
			1/6/2020	

Received by (name and title printed): Deborah Ernst	Inspected by (name and title printed): Christina Pierini
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name MIRANDA'S RESTAURANT		Telephone Number (812-309-0053)	Date of Inspection (mm/dd/yr) 12/23/2019	ID # 199
Establishment Address (number and street, city, state, zip code) 1338 NEWTON STREET, JASPER, IN, 47546		Owner (812-309-0053)	Follow-up No	
Owner ADRIAN MIRAANDA / Juan A. Miranda		Purpose: <input checked="" type="checkbox"/> Routine	Release Date 01/02/2020	
Owner's Address 602 W 7TH STREET, APT 16, JASPER, IN, 47546		<input type="checkbox"/> Follow-up	Summary of Violations: C 2 NC 2 R 4	
Person in Charge JUAN MIRANDA		<input type="checkbox"/> Complaint	Menu Type (See additional page)	
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Certified Food Handler Adrian A. Miranda exp. 11/18/21		<input type="checkbox"/> Temporary		
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

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Section#	C/NC	R	Narrative	To Be Corrected By
191	C	R	Several items in walk in fridge and kitchen prep table observed with no dates	01/06/2020
177	NC	R	Several food items stored directly on the floor in walk in fridge	06/23/2020
173	C	R	Raw meats being stored above beer bottles and reach in freezer in front of register has combination of all meats in in	01/06/2020
174	NC	R	Observed items throughout the facility without name labels to identify what it is	06/23/2020

Received by (name and title printed): Miranda	Inspected by (name and title printed): Christina Pierini
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name VILLA PIZZERIA		Telephone Number (812-482-2555)	Date of Inspection (mm/dd/yr) 01/31/2019	ID # 205
Establishment Address (number and street, city, state, zip code) 124 THIRD AVENUE, JASPER, IN, 47546		(720-422-9972)		
Owner SSB HOLDINGS	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input checked="" type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow-up Yes	Release Date 02/10/2019	
Owner's Address 4463 DOWNEY ST, JASPER, IN, 47546		Summary of Violations: C 4 NC 5 R 3		
Person in Charge SSB HOLDINGS		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler HUNTER THEWES 9/28/21				

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Section#	C/NC	R	Narrative	To Be Corrected By
191	C	R	Did not observe a dating system throughout the facility	02/28/2019
173	C		Raw sausage being stored with ready to eat meats	Corrected
296	C		Observed all refrigeration units to have food, dirt and debris build up	02/28/2019
295	C	R	Kitchen area and equipment presenting heavy food and dirt accumulation, floors, hoods, walls, shelves, prep tables	02/28/2019
174	NC		Product that has been removed from original packaging has no labeling to identify where it came from or what it is	02/28/2019
426	NC	R	Multiple pieces of broken and dirty equipment throughout kitchen area	04/30/2019
177	NC		Single use items being stored directly on the floor, pizza boxes, cups	02/28/2019
231	NC		Industrial can opener has built up food and dirt also blade might need to be replaced	02/28/2019
297	NC		Ice machine seen to have moisture build up resulting in mold build up	02/28/2019

Received by (name and title printed): Keila Woodhull	Inspected by (name and title printed): Christina Pierini
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name FAZOLI'S #1675		Telephone Number (812-634-1574)	Date of Inspection (mm/dd/yr) 02/27/2019	ID # 72
Establishment Address (number and street, city, state, zip code) 703 THIRD AVENUE, JASPER, IN, 47546		Owner (859-825-6200)	Follow-up No	Release Date 03/09/2019
Owner FAZOLI'S JOINT VENTURE, LTD		Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Summary of Violations: C 2 NC 4 R 3	
Owner's Address 2470 PALUMBO DRIVE, LEXINGTON, KY, 40509			Menu Type (See additional page) 1 0 2 0 3 0 4 0 5 0	
Person in Charge Bill Clark		Responsible Person's E-mail		
Certified Food Handler Rion Jones 10/24/2024				

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Section#	C/NC	R	Narrative	To Be Corrected By
296	C	R	Observed serve dirt, debris and food build up in all the refrigeration units in the kitchen area, topping tables, upright fridge and freezer	08/31/2019
295	C	R	Observed heavy concentration of dirt, debris and food build throughout the back of the facility, prep tables, clean dish holding station and shelving units	08/31/2019
431	NC		Air vents, floors, walls and ceilings showed signs of food, dirt and dust build up	08/31/2019
177	NC		Some boxes with food storage containers seen being stored on the floor such items should be stored 6" of the floor	02/28/2019
399	NC	R	Tiles in walk in fridge falling apart as well as some ceiling panels noticed to be missing	08/31/2019
433	NC		Did not see a mop drying process to prevent it from properly drying	08/31/2019

Received by (name and title printed): Rion Jones	Inspected by (name and title printed): Christina Pierini
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Received by (signature):	Inspected by (signature):
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cc:	cc:	cc:
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Establishment Name HAPPY HOUR BAKERY		Telephone Number (812-639-8753)	Date of Inspection (mm/dd/yr) 03/11/2019	ID # 333
Establishment Address (number and street, city, state, zip code) 914 S CELESTINE RD S, SCHNELLVILLE, IN, 47580		Owner (812-639-8753)	Follow-up	Release Date 03/21/2019
Owner JEREMY BETZ	Purpose: <input checked="" type="checkbox"/> Routine	Summary of Violations: C 1 NC 3 R 0		
Owner's Address 914 S CELESTINE RD S, SCHNELLVILLE, IN, 47580	<input type="checkbox"/> Follow-up	Menu Type (See additional page)		
Person in Charge JEREMY BETZ	<input type="checkbox"/> Complaint	1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Responsible Person's E-mail	<input type="checkbox"/> Pre-Operational			
Certified Food Handler LEE ANN WEATHERS 8/30/2021	<input type="checkbox"/> Temporary			
	<input type="checkbox"/> HACCP			
	<input type="checkbox"/> Other (list)			

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Section#	C/NC	R	Narrative	To Be Corrected By
187	C		PHF observed at approx 52F in walk in cooler	03/12/2019
218	NC		Walk in cooler observed not being in good repair (not cooling adequately)	04/11/2019
256	NC		Freezer/cooler observed not equipped with temperature measuring device	03/11/2019
297	NC		Mold growth observed in ice machine	03/12/2019

Received by (name and title printed): Lee Ann Weathers	Inspected by (name and title printed): Kylie Shephard
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name JASPER SKATE PALACE, INC.		Telephone Number (812-482-4565)	Date of Inspection (mm/dd/yr) 03/26/2019	ID # 117
Establishment Address (number and street, city, state, zip code) 1013 4TH AVENUE, JASPER, IN, 47546		Owner (812-482-2838)	Follow-up No	
Owner BRIAN AND STEPHANIE RAWLINS		Purpose: <input checked="" type="checkbox"/> Routine	Release Date 04/05/2019	
Owner's Address 1795 W. 5TH AVENUE, JASPER, IN, 47546		<input type="checkbox"/> Follow-up	Summary of Violations: C 0 NC 3 R 2	
Person in Charge BRIAN AND STEPHANIE RAWLINS		<input type="checkbox"/> Complaint		
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	Menu Type (See additional page)	
Certified Food Handler N/A		<input type="checkbox"/> Temporary	1 <input type="radio"/> 2 <input checked="" type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

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Section#	C/NC	R	Narrative	To Be Corrected By
416	NC		Old mouse droppings observed in the storage cabinets recommend removal of all old signs of rodents	04/30/2019
355	NC	R	No service sink in the establishment for removal of waste water	09/02/2019
218	NC	R	Industrial can opener is worn and appears to be chipping recommend replacing blade to avoid contamination	09/02/2019

Received by (name and title printed): AUSTIN RAWLINS	Inspected by (name and title printed): Christina Pierini
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name HUCK'S #339		Telephone Number (812-683-5566)	Date of Inspection (mm/dd/yr) 04/09/2019	ID # 105
Establishment Address (number and street, city, state, zip code) 601 N MAIN STREET, HUNTINGBURG, IN, 47542		Owner (618-382-2334)	Follow-up Yes	
Owner MARTIN & BAYLEY INC.		Purpose: <input checked="" type="checkbox"/> Routine	Release Date 04/19/2019	
Owner's Address 1311A W MAIN STREET, CARMIL, IL, 62821		<input type="checkbox"/> Follow-up	Summary of Violations: C 4 NC 2 R 5	
Person in Charge None Given		<input type="checkbox"/> Complaint		
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	Menu Type (See additional page) 1 0 2 0 3 1 4 0 5 0	
Certified Food Handler Kathy Harris 2021		<input type="checkbox"/> Temporary		
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"

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Section#	C/NC	R	Narrative	To Be Corrected By
192	C	R	Several ready to eat deli items observed out for the public to purchase with expired use by dates as well as milk and eggs	Corrected
296	C	R	Prep and cooking areas throughout the whole kitchen seen to have built up food, dirt and debris	05/07/2019
295	C	R	All refrigeration and freezer units throughout the entire kitchen area as well as all walk in fridge units have very heavy signs of food, dirt and debris build up on the doors, shelves and floors	05/07/2019
426	NC		Observed multiple items in the back storage walk way by bag in the box station cluttering up the area	09/03/2019
240	C	R	Several items that are for food production and storage being stored directly on the floor	05/07/2019
297	NC	R	Soda station observed to have some build up where ice is received and around nozzles	05/07/2019

Received by (name and title printed): Kathy Harris	Inspected by (name and title printed): Christina Pierini
Received by (signature):	Inspected by (signature):
cc:	cc:



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Fax 812-481-7069

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Establishment Name VILLA PIZZERIA		Telephone Number (812-482-2555)	Date of Inspection (mm/dd/yr) 04/03/2019	ID # 205
Establishment Address (number and street, city, state, zip code) 124 THIRD AVENUE, JASPER, IN, 47546		(812-482-2555) Telephone Number (720-422-9972)		
Owner SSB HOLDINGS	Purpose: <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list) _____	Follow-up No	Release Date 04/13/2019	
Owner's Address 4463 DOWNEY ST, JASPER, IN, 47546		Summary of Violations: C 2 NC 4 R 5		
Person in Charge SSB HOLDINGS		Menu Type (See additional page) 1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Responsible Person's E-mail				
Certified Food Handler HUNTER THEWES 9/28/21				

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Section#	C/NC	R	Narrative	To Be Corrected By
426	NC	R	Equipment that is not being used in the back storage area should be removed	10/08/2019
			ALL CRITICAL VIOLATIONS HAVE BEEN CORRECTED	
231	NC	R	Industrial can opener has built up food and dirt also blade might need to be replaced	Corrected
174	NC	R	Product that has been removed from original packaging has no labeling to identify where, and when it comes from	Corrected
296	C	R	Observed all refrigeration units to have food, dirt and debris build up Kitchen area and equipment presenting heavy food and dirt	Corrected
295	C	R	accumulation, floors, hoods, walls, shelves, prep tables	Corrected
226	NC		Walk in refrigeration units condenser is leaking and causing possible contamination	Corrected

Received by (name and title printed): Steve Schnarr	Inspected by (name and title printed): Christina Pierini
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Received by (signature):	Inspected by (signature):
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cc:	cc:	cc:
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Establishment Name WINGS, ETC		Telephone Number (812-556-0399)	Date of Inspection (mm/dd/yr) 04/09/2019	ID # 311
Establishment Address (number and street, city, state, zip code) 3683 N. NEWTON, JASPER, IN, 47546		Owner (812-278-1766)	Follow-up	Release Date 04/19/2019
Owner MICHELLE OAFUTT	Owner's Address	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Summary of Violations: C 3 NC 1 R 1	
Person in Charge eric wilson	Responsible Person's E-mail		Menu Type (See additional page)	
Certified Food Handler TABITHA FINLEY 3/13/22			1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	

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Section#	C/NC	R	Narrative	To Be Corrected By
345	C		Hand washing sinks (2) in kitchen area observed being used for things other than handwashing	04/09/2019
443	C		Sanitizer concentration throughout establishment observed to be extremely low (>100PPM)	04/09/2019
342	NC		Handwash sink near ware-washing machine only reaching ~90F	04/16/2019
177	C	R	Foods observed to be uncovered in reach in fridge near fryers	04/09/2019

Received by (name and title printed): Eric Wilson	Inspected by (name and title printed): Kylie Shephard
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name HOMETOWN IGA #460		Telephone Number (812-683-4653)	Date of Inspection (mm/dd/yr) 05/22/2019	ID # 99
Establishment Address (number and street, city, state, zip code) 312 E 12TH STREET, HUNTINGBURG, IN, 47542		Owner (812-482-1366)	Follow-up No	
Owner HOUCHENS NORTH FOODS LLC		Purpose: <input checked="" type="checkbox"/> Routine	Release Date 06/01/2019	
Owner's Address 611 BARTLEY STREET, JASPER, IN, 47546		<input type="checkbox"/> Follow-up	Summary of Violations: C 3 NC 1 R 2	
Person in Charge Jeremy Thyen		<input type="checkbox"/> Complaint		
Responsible Person's E-mail		<input type="checkbox"/> Pre-Operational	Menu Type (See additional page)	
Certified Food Handler Jeremy Thyen exp. 3/30/2021		<input type="checkbox"/> Temporary	1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
		<input type="checkbox"/> HACCP		
		<input type="checkbox"/> Other (list)		

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Section#	C/NC	R	Narrative	To Be Corrected By
128	C		Observed items in hand sink in bakery/deli area (Hand sink being used for things other than washing hands)	05/23/2019
295	C	R	Heavy accumulation of food, dirt, debris on nonfood contact surfaces throughout deli/bakery (Floors, shelves, walls, etc)	11/22/2019
296	C		Observed severe accumulation of food particles in deli cases at front of deli/bakery	11/22/2019
416	NC	R	Observed dead flies accumulating in dairy/yogurt cases	05/23/2019

Received by (name and title printed): Deb Altadonna	Inspected by (name and title printed): Christina Pierini
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name SUBWAY #2776 -Sharma Inc. (@ 26th St.)		Telephone Number (812-482-4422)	Date of Inspection (mm/dd/yr) 06/04/2019	ID # 185
Establishment Address (number and street, city, state, zip code) 2506 NEWTON STREET, JASPER, IN, 47546		Owner (812-661-9658)	Follow-up	Release Date 06/14/2019
Owner RINA AND PRAVEZ SHARMA- SHARMA INC.		Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Summary of Violations: C 0 NC 2 R 2	
Owner's Address 3289 ST. CHARLES, JASPER, IN, 47546			Menu Type (See additional page)	
Person in Charge RINA AND PRAVEZ SHARMA- SHARMA INC.			1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	
Responsible Person's E-mail				
Certified Food Handler Pravez Sharma exp. 7/21/2020				

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Section#	C/NC	R	Narrative	To Be Corrected By
226	NC	R	Water standing on bottom of cooler on southeast water contributing to water contamination	06/05/2019
297	NC	R	Observed excessive buildup on drink nozzles in customer area	06/04/2019

Received by (name and title printed): Christian Hopf	Inspected by (name and title printed): Kylie Shephard
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name TACO BELL #3001034 (Jasper)		Telephone Number (812-634-9536)	Date of Inspection (mm/dd/yr) 06/03/2019	ID # 194
Establishment Address (number and street, city, state, zip code) 3592 NEWTON STREET, JASPER, IN, 47546		Owner (503-722-2825)	Follow-up No	
Owner BELL INDIANA, LLC	Purpose: <input checked="" type="checkbox"/> Routine	Release Date 06/13/2019		
Owner's Address PO BOX 507, WEST LINN, OR, 97068	<input type="checkbox"/> Follow-up	Summary of Violations: C 2 NC 3 R 2		
Person in Charge BELL INDIANA, LLC	<input type="checkbox"/> Complaint	Menu Type (See additional page)		
Responsible Person's E-mail	<input type="checkbox"/> Pre-Operational	1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler Carrie Broadway exp. 7/21/2022	<input type="checkbox"/> Temporary			
	<input type="checkbox"/> HACCP			
	<input type="checkbox"/> Other (list)			

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Section#	C/NC	R	Narrative	To Be Corrected By
296	C		Food preparation lines observed to have prolonged food and dirt buildup	06/17/2019
295	C	R	Kitchen area floors have sever food, dirt and debris build up as well as the refrigeration units on the prep line	06/17/2019
297	NC	R	Both soda machines have sever build up around nozzles	11/01/2019
226	NC		Lobby soda machine observed to be leaking	11/01/2019
399	NC		Several tiles missing from wall near dish sink also some tiles starting break apart around floor drain in front of fryers	11/01/2019

Received by (name and title printed): Carrie Broadway	Inspected by (name and title printed): Christina Pierini
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name HOLIDAY FOODS #3		Telephone Number (812-367-1771	Date of Inspection (mm/dd/yr) 07/02/2019	ID # 94
Establishment Address (number and street, city, state, zip code) 1815 MAIN STREET, FERDINAND, IN, 47532		(812-937-4428		
Owner JOSH WINKLER	Purpose: <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow-up	Release Date 07/12/2019	
Owner's Address P.O. BOX 139, SANTA CLAUS, IN, 47579		Summary of Violations: C 1 NC 2 R 3		
Person in Charge Dan Jacob		Menu Type (See additional page)		
Responsible Person's E-mail		1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>		
Certified Food Handler Dan Jacob exp. 3/13/2023				

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Section#	C/NC	R	Narrative	To Be Corrected By
295	C	R	Dust/Dirt/Mold buildup observed on shelves in juice area, on ceiling tiles in produce storage, and fans/ceiling in bakery walk in Significant food debris buildup observed in bakery	
416	NC	R	Observed a failure to remove dead flies from bakery/juice areas	
430	NC	R	Damaged walls/ceiling tiles observed in produce storage area	

Received by (name and title printed): Dan Jacob	Inspected by (name and title printed): Kylie Shephard
Received by (signature):	Inspected by (signature):
cc:	cc:



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Establishment Name YAMATO		Telephone Number (812-556-0500)	Date of Inspection (mm/dd/yr) 06/26/2019	ID # 215
Establishment Address (number and street, city, state, zip code) 3015 N. NEWTON STREET, JASPER, IN, 47546		Owner (706-680-5719)	Follow-up No	Release Date 07/06/2019
Owner DAVID DONG	Purpose: <input checked="" type="checkbox"/> Routine	Summary of Violations: C 1 NC 1 R 2		
Owner's Address 3015 NEWTON ST, JASPER, IN, 47546	<input type="checkbox"/> Follow-up			
Person in Charge DAVID DONG	<input type="checkbox"/> Complaint			
Responsible Person's E-mail	<input type="checkbox"/> Pre-Operational			
Certified Food Handler 8/16/21	<input type="checkbox"/> Temporary			
		<input type="checkbox"/> HACCP	Menu Type (See additional page)	
		<input type="checkbox"/> Other (list)	1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/>	

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Section#	C/NC	R	Narrative	To Be Corrected By
177	C	R	Food stored directly on floor in walk in freezer	06/26/2019
297	NC	R	Mold growth observed around ice machine and walk in freezer	12/26/2019

Received by (name and title printed): COCO	Inspected by (name and title printed): Christina Pierini
Received by (signature):	Inspected by (signature):
cc:	cc:

