State of Ohio Food Inspection Report Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility						10		License Number		Date			
Address SHI MARIN STREET						SO PRE SS			17/12/25				
Address						City/State/Zip Code							
	341	1411	11241101 Street	GREENUILL, OH US33/									
						n Time							
						0	Irave	avel Time Category/Descriptive					
60-eenukle sunoco								7 5 3		<u> </u>			
Type of Inspection (check all that apply)							F	ollow up date (if requir	red)	Water sample date/result			
	Standard □ (Foodborne □ 3	oniicai (30 Dav	Control Point (FSO) □ Process Review (RFE) □ Varia □ Complaint □ Pre-licensing □ Consultation	ance Re	viev	w ∐ Follow up	Р			(if required)			

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS													
Mark designated compliance status (IN, OUT, N/O, N/A) for each numbered item: IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable													
			Compliance Status		Compliance Status								
1200	1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (Supervision	STUP 18 September	Time/Temperature Controlled for Safety Food (TCS food)								
1	-ØIN □OUT [D 1		ınd		□IN ZÍOU							
			performs duties		23	□N/A □ N/C	0	Proper date marking ar	position				
2	-EIN □OUT [24	□IN □ OU		Time as a public health of	contro	l: procedures & records			
2700		Employee Health				□N/A □ N/C))	The paper wheelers and the paper wheelers are the paper wheelers and the paper wheelers are					
3	.⊡îN □OUT □	∃ N/A	Management, food employees and conditional employee knowledge, responsibilities and reporting	es;	77.5			Consumer Advisory					
4	TIN DOUT D] N/A	Proper use of restriction and exclusion		25	□IN □OUT □N/A	1	Consumer advisory pro	vided	for raw or undercooked foods			
5	TUOUT [Procedures for responding to vomiting and diarrheal eve	nts				Highly Susceptible F	opul:	ations			
(a. 7)0. (a. 7)0. (a. 7)0.			Good Hygienic Practices			□IN □ OUT	T	Pasteurized foods used	d. prot	nibited foods not offered			
6	_☐IN □ OUT I		Proper eating, tasting, drinking, or tobacco use		26	□N/A	son sons de			inplied loods flot othered			
7	.□IN □ OUT I	F. 2 P.	No discharge from eyes, nose, and mouth eventing Contamination by Hands	104.	5 13 2 13		Ť.	Chemical	J. Table 14				
8	DIN DOUT	Market and Advisor Service		Section 1	27	□IN □OUT	IT	Food additives: approve	ed and	d properly used			
-	المال الماليين	□ N/O	No bare hand contact with ready-to-eat foods or approve alternate method properly followed						100				
	.⊡ IN □ OUT			ved	28	□ N/A □ OUT	T	Toxic substances properly identified, stored, used					
9	□N/A □ N/O				Conformance with Approved Procedures								
10	ØIN □OUT □	1 N/A	Adequate handwashing facilities supplied & accessible	,		□IN □ OUT	Charles and add	Committee of the control of the cont	40.00	had the second of the second o			
		Approved Source		1 7 7	29	□N/A		Compliance with Reduc specialized processes,	and H	lygen Packaging, other IACCP plan			
11	☐ÎÑ □OUT		Food obtained from approved source		30	□IN □ OUT	Т	1900.000		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
12	□ IN □ OUT		Food received at proper temperature		30	_EN/A □ N/O)	Special Requirements: F	-resn .	Juice Production			
40	A".		Food in good condition, cafe, and unadultarated		31	□ IN □ OUT		Special Requirements: I	Heat T	reatment Dispensing Freezers			
13			Food in good condition, safe, and unadulterated Required records available: shellstock tags, parasite			□ IN □ OUT	-			, , , , , , , , , , , , , , , , , , , ,			
14	N/A N/O		destruction		32	☑N/A □ N/O		Special Requirements: 0	Duston	n Processing			
0.15 (g 3-46/2)		Children Was	Protection from Contamination	100	30	TUO 🗆 NI	т	Special Description 1 7		Internal Communication Communi			
15	☑ N □ OUT		Food separated and protected		33	□N/A □ N/O)	Special Requirements: E	ouik W	rater iviachine Criteria			
	□N/A □ N/O □N/A □ OUT				24	□ IN □ OUT	т	Special Requirements: <i>F</i>	Acidifie	ed White Rice Preparation			
16			Food-contact surfaces: cleaned and sanitized		34	☑N/A ☐ N/O		Criteria		The state of the s			
17	□ N □ OUT		Proper disposition of returned, previously served,			□ IN □ OUT	Т						
17			reconditioned, and unsafe food		35	☑N/A		Critical Control Point Ins	pectio	n			
		Temper	ature Controlled for Safety Food (TCS food)		36	□ IN □ OUT	т	Process Review					
18	□·IN □ OUT □N/A □ N/O	OUT	Proper cooking time and temperatures			·□N/A		1 100000 I/GAIGAA					
-					37	□ IN □ OUT	т ,	Variance					
19	□ IN □ OUT □N/A □ N/O		Proper reheating procedures for hot holding			□NÎA							
_	IN DOUT	-											
20			Proper cooling time and temperatures		Risk factors are food preparation practices and employee behaviors								
_	□ IN □ OUT				th	nat are identified as the most significant contributing factors to							
21	□N/A □ N/O		Proper hot holding temperatures		foodborne illness.								
					Pt	ublic health interventions are control measures to prevent foodbor ness or injury.				sures to prevent foodborne			
22	IN DOUT	□N/A	Proper cold holding temperatures		illiless of Ilijuly.								

State of Ohio

Food Inspection Report Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility	LE SUNCEO		Tv	rpe of Inspection Date + CNCORCO 7/12/	l _{2.5}								
GOOD RETAIL PRACTICES Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods. Mark designated compliance status (IN, OUT, N/O, N/A) for each numbered item: IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable Safe Food and Water Utensils, Equipment and Vending													
38 🖾 IN 🗆 OUT 🗆 N/A 🗆 N/O		54 [Food and nonfood-contact surfaces cleanal										
39 É IN OUT ON/A	Water and ice from approved source		 ∃ IN □ OUT □N//	designed, constructed, and used Warewashing facilities: installed, maintained	, used;	test							
District and the contract of t	od Temperature Control Proper cooling methods used; adequate equipment		⊒ IN, É OUT	Strips Nonfood-contact surfaces clean	****								
40 IN OUT IN/A N/O	for temperature control			Physical Facilities									
41 _ IN _ OUT _ N/A _ N/O	Plant food properly cooked for hot holding	57	ZIN OUT ON/	A Hot and cold water available; adequate pre	essure								
42 IN I OUT IN/A I N/O	Approved thawing methods used		∃ IN □OUT ⊐N/A □ N/O	Plumbing installed; proper backflow device	s								
43 IN II OUT IIN/A	Thermometers provided and accurate Food Identification		☐ IN ☐ OUT ☐N//	/A Sewage and waste water properly disposed									
44 - IN II OUT	Food properly labeled; original container	60 IN OUT IN/A Toilet facilities: properly constructed, supplied, cle											
Preven	tion of Food Contamination	61, 4	□ IN □ OUT □N//	A Garbage/refuse properly disposed; facilities ma	aintaine	d							
45 🗆 IN 🗆 OUT	Insects, rodents, and animals not present/outer openings protected	i l	TUO 🗆 NI 🗈	Physical facilities installed, maintained, and cloutdoor dining areas	ean; dog	gs in							
46 DINETOUT	Contamination prevented during food preparation, storage & display		□N/A □ N/O										
47	Personal cleanliness		IN OUT	Adequate ventilation and lighting; designated	areas u	sed							
48	Wiping cloths: properly used and stored Washing fruits and vegetables	64 1	Í IN □ OUT □N/		Skille of the state of the stat								
	Proper Use of Utensils			Administrative -									
50 IN OUT ONA ONO	In-use utensils: properly stored	65 [Z IN □ OUT □N//	A 901:3-4 OAC									
51 DIN DOUT DN/A	Utensils, equipment and linens: properly stored, dried, handled	66 [IN □ OUT,⊡N//	A 3701-21 OAC									
52	Single-use/single-service articles: properly stored, used Slash-resistant, cloth, and latex glove use												
00 L W 00 L W 1	Observations and C	orrec	tive Actions										
Item No. Code Section Prior	Mark "X" in appropriate box for COS and R: COS=corrity Level Comment	ected on	-site during inspect	ion R=repeat violation	cos	R							
31 U.UA NO		(CC)	vers by	Men									
50 45A 2 N	Noticed ice but	d 13	3000 1712	7 1127 AA \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \									
500 ADA - M	Obstill it has	U O	ZOJITEC.	CROM FREEZER									
83 34H C	agence mily deter	7/1	1/25. F	uc discounted									
		1 ./.	edo eso										
49 321 NO	- DOSTURE AUG HOW	1 10/1	ates on	(Bu,15) (C/15)									
						믐							
Person in Charge	MA			Date: 7-14-23	·								
Sanitarian	Cont		Licensor:	DAND									

PRIORITY LEVEL: C = CRITICAL NC = NON-CRITICAL