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

_														
Name of facility						License Number	Date							
	Address (e) Q Wagner Ave] RFE	1 2++ 16-7.								
Ad	Idress		City/State/Zip Code											
(099) James Aug					Greenille OH 45231									
License holder Ins					ne Tra	avel Time	Category/Descriptive							
1					``	1/1	/> [
Faroug Shan							(5)							
Type of Inspection (check all that apply) □ Standard □ Critical Control Point (FSO) □ Process Review (RFE) □ Variance					F-U	Follow up date (if required)	Water sample date/result (if required)							
		☐ Complaint ☐ Pre-licensing ☐ Consultation	lice Kevie	w. ⊔	rollow up		(ii required)							
7														
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS														
М	ark designated compli	ance status (IN, OUT, N/O, N/A) for each numbered it	em: IN =in	com	pliance OUT:	not in compliance N/O=not	observed N/A=not applicable							
		Compliance Status		Compliance Status										
		Supervision		Time/Temperature Controlled for Safety Food (TCS food)										
1	THE TOUT THE	Person in charge present, demonstrates knowledge, ar	nd o		IN 🗆 OUT									
Ľ	A/N 🗆 TUO 🗆 N/A	performs duties	23		N/A □ N/O	Proper date marking and di	sposition							
2	☑IN □OUT □ N/A	Certified Food Protection Manager	24	11 4	IN 🗆 OUT	Time as a public health control:procedures & records								
	Section 2017 Section 2018 Secti	Employee Health	11.2	<u> </u> <u> </u> <u> </u>	N/A □ N/O	Time as a public realiti control procedures & records								
3	N/A DOUT D N/A	Management, food employees and conditional employee knowledge, responsibilities and reporting	s; 🔼	THE PROPERTY AND ADDRESS.	faller manner gener 501. The last manager of 1900.	Consumer Advisor								
4	N/A DOUT IN/A	Proper use of restriction and exclusion	25		IN □ OUT I/A	Consumer advisory provide	d for raw or undercooked foods							
5	SIN DOUT DN/A	Procedures for responding to vomiting and diarrheal ever	its .			Highly Susceptible Populations								
		Good Hygienic Practices	10.00		IN 🗆 OUT									
6	☐ NO □ TUO □ N/O	Proper eating, tasting, drinking, or tobacco use	26	JIV	N/A	Pasteurized foods used; pro	onibited foods not offered							
7		No discharge from eyes, nose, and mouth			Controller Start Sagned Startes	Chemical								
208		reventing Contamination by Hands	27	ارِت ا	IN 🗆 OUT	Food additives: approved a	nd properly used							
8	DIN DOUTDN/O	Hands clean and properly washed	[pd (1/A	1 ood additives, approved a	id property daed							
9	ĬQIN □ OUT □N/A □ N/O	No bare hand contact with ready-to-eat foods or approvalternate method properly followed	red 28		IN □ OUT N/A	Toxic substances properly id	entified, stored, used							
						Conformance with Approved Procedures								
10	N/A □ TUO□ NIĢ	Adequate handwashing facilities supplied & accessible	29	a.	N 🗆 OUT	Compliance with Reduced C								
	Jan a out	Approved Source Food obtained from approved source		PIN		specialized processes, and	HACCP plan							
11	DIN DOUT	rood obtained from approved source	30		IN □ OUT I/A □ N/O	Special Requirements: Fresh	Juice Production							
12	□N/A, ☑ N/O	Food received at proper temperature	-	<u> </u>	IN 🗆 OUT									
13	TUO □ NI 🗹	Food in good condition, safe, and unadulterated	31		I/A □ N/O	Special Requirements: Heat Treatment Dispensing Freeze								
14	□IN □OUT □N/A □N/O	Required records available: shellstock tags, parasite destruction	32)	IN □ OUT I/A □ N/O	Special Requirements: Custom Processing								
	out Comments of Cal	Protection from Contamination			N 🗆 OUT	Chariel Degree	Medan Maskins C ii i							
15	□ IN POUT	Food separated and protected	33		I/A □ N/O	Special Requirements: Bulk	Water Machine Criteria							
	□N/A □ N/O ☑ IN □ OUT		34		N DOUT	Special Requirements: Acidit	ied White Rice Preparation							
16	□N/A □ N/O	Food-contact surfaces: cleaned and sanitized		PIN	I/A	Criteria								
17	I OUT	Proper disposition of returned, previously served, reconditioned, and unsafe food	35	ZIV	IN □ OUT I/A	Critical Control Point Inspect	ion							
Time/Temperature Controlled for Safety Food (TCS food)					N 🗆 OUT	Process Review								
18	IÍN □ OUT □N/A □ N/O	Proper cooking time and temperatures	36	KIN	ZN/A									
19	□ IN □ OUT □ N/A ☑*N/O	Proper reheating procedures for hot holding	37	7	N 🗆 OUT I/A	Variance								
20	□IN □ OUT □N/A □ N/O	Proper cooling time and temperatures		Risk factors are food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness.										
21	□ IN □ OUT □ DN/A ☑ N/O	Proper hot holding temperatures	fc											
22	IN OUT ON/A	Proper cold holding temperatures		Public health interventions are control measures to prevent foodborne illness or injury.										

HEA 5302A Ohio Department of Health (10/19) AGR 1268 Ohio Department of Agriculture (10/19)

State of Ohio

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Name	e of Facility	(t		Type of Inspection	Date								
	Har	dee	? 5		Standage	1 6) <u>. Z</u>	3						
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														
			d and Water		Utensils, Equipmen	Programme and the second statement of the second state								
38	IN OUT ON/A ON/	O Pasteui	rized eggs used where required	54 🗆 IN 🖭 OUT	Food and nonfood designed, constru	od-contact surfaces cleanab ucted, and used	ole, pro	perly						
39	Ù IN □OUT □N/A	radine fizare azbana end	and ice from approved source	55 1 IN 1 OUT [cilities: installed, maintained,	used;	test						
		h 2001 of Philippan No. of product and all pages of the Control of	erature Control	56 IN IN OUT	strips Nonfood-contact	aurfacea alega								
40	À IN 🗆 OUT 🗆 N/O		cooling methods used; adequate equipment perature control	56 E IN E OUT	Physical Fa									
41	☐ IN ☐ OUT ☐N/A ☐ N/O Plant food properly cooked for hot holding		57 AIN - OUT [□N/A Hot and cold wa	ter available; adequate pre	ssure								
42		Approv	ed thawing methods used	58 Ø IN □OUT	Plumbing installe	ed; proper backflow devices	ces							
43	AND TUO D NI D	Thermo	meters provided and accurate	□N/A□N/O										
		Food Id	entification	59 🗹 IN 🗆 OUT [□N/A Sewage and wast	e water properly disposed								
44	тио □ иі 💆	Food p	roperly labeled; original container	60 DIN DOUT	□N/A Toilet facilities: pr	operly constructed, supplied,	cleane	d						
	Preve	ntion of F	ood Contamination	61 1 IN 1 OUT [□N/A Garbage/refuse pr	operly disposed; facilities ma	aintaine	d						
45	D IN □ OUT		rodents, and animals not present/outer sprotected	62 1 IN 1 OUT	Physical facilities outdoor dining are	installed, maintained, and cle	ean; dog	gs in						
46	TUO 🗹 NI	Contarr	ination prevented during food preparation, & display	□N/A□N/O	outdoor diffing are									
	☐ IN ☐ OUT ☐ N/A	Person	al cleanliness	63 7 IN [] OUT		ion and lighting; designated a	areas u	sed						
	N OUT ONA ONO		cloths: properly used and stored	64 DIN DOUT	□N/A Existing Equipmen	t and Facilities								
49	□ IN □ OUT □N/A 🗖 N/C		g fruits and vegetables se of Utensils		Administr	ative								
50	N □ OUT □N/A □ N/O In-use utensils: properly stored		65 🗆 IN 🗆 OUT J	N/A 901:3-4 OAC										
51	☐ IN ☐ OUT ☐ N/A Utensils, equipment and linens: properly stored, dried,		66 Ø IN □ OUT [□N/A 3701-21 OAC										
52	handled ☐ IN ☐ OUT ☐ N/A Single-use/single-service articles: properly stored, used		If											
53	D IN DOUT DN/A D N/C	Slash-re	esistant, cloth, and latex glove use											
			Observations and C X" in appropriate box for COS and R: COS=corr			on								
Item 15	No. Code Section Prior	rity Level	Comment	1			cos	R						
د ا	5.20	٠	observed bacon		atoes and le									
1-1/	c 3.7Q /	UC.	01-0	Coole (=)	ric reorgani	red order of lax	ĮĮ.							
110	(),(\		ODServed Cooler	case of	lettince in	d case								
			. 01	. 11	on Cooler	to trash.								
H	LI.H.C. A	<u>) (</u>	observed build up		n ovens	10 11 7071		<u>,</u>						
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						14.0								
		1 1 1				No. 1								
Person in Charge Date:														
Sanitarian Licensor:														
PRIORITY LEVEL: C = CRITICAL NC = NON ₇ CRITICAL Page of 7														
rnic	MITTLEYEL. C= CKII	TOPE I	NC = NON ₇ 9RITICAL			rage OT (Program.							

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