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

| Name of facility Che | | | | | e | | License Number | | Date / | | | |
|----------------------|--|--|-------------------|--|------------------------|---|--|---|----------------------------|--|--|--|
| 6 | DV MV DID | 2201 + 621LL | ÍFSO □ RFE | | | 1724 | | 3/20/2(/ - | | | | |
| À | ddress | and the state of t | ty/State/Zip Code | | | | | | | | | |
| | 301 | roodskie de | \triangle | arcanum, of us sou | | | | | | | | |
| Li | icense holder | OCCUPY CONTRACTOR | ctio | n Time | Tra | evel Time | | was med December 1 | | | | |
| CBS of anchioned | | | | | | 110 | Rec raile | Cate | egory/Descriptive | | | |
| Ty | ype of Inspection (che | · · · · · · · · · · · · · · · · · · · | <u>()(</u> | ر | | Follow we dota (if we wise | | <u>(5)</u> | | | | |
| | | Control Point (FSO) ☐ Process Review (RFE) ☐ Varia | eviev | ν □ Foliow ι | up | Follow up date (if required | | Water sample date/result (if required) | | | | |
| | | ☐ Complaint ☐ Pre-licensing ☐ Consultation | | | | | | | | | | |
| | Posts and the second party of the second party | FOODBORNE ILLNESS RISK FACTO | RS A | Иħ | enial le l | iΕλι | eare windered vien belond | č a | | | | |
| I. | | ance status (IN, OUT, N/O, N/A) for each numbered i | | | | | | | erved N/A=not applicable | | | |
| | | Compliance Status | | T | | | Compliance Sta | | ored IMA-not applicable | | | |
| 37 | | Supervision: 57 | | Time/Temperature Controlled for Safety Food (TCS food) | | | | | | | | |
| 1 | □ IN □ OUT □ N/A | Person in charge present, demonstrates knowledge, a performs duties | nd | 23 | | UT | Proper date marking and | | | | | |
| 2 | │□IN □OUT □ N/A | Certified Food Protection Manager Employee Health | | 24 | | | Time as a public health co | ntrol: r | procedures & records | | | |
| | | Management food ampleyees and conditional available | 18. | 187 | | | Consumer Advis | | | | | |
| 3 | √□N □OUT □ N/A | knowledge, responsibilities and reporting | ,3, | 25 | □IN □ OI | CANADA AND AND AND AND AND AND AND AND AN | | | | | | |
| 4_ | DIN DOUT DN/A | Proper use of restriction and exclusion | | 23 | □N/A | | | 1.00 | r raw or undercooked foods | | | |
| 5 | │□IN □OUT □ N/A | Procedures for responding to vomiting and diarrheal ever | nts | | □IN □OI | IIT | Highly Susceptible Po | | | | | |
| 6 | /DIN □OUT □ N/O | | SAFATTANICE. | 26 | N/A | O I | Pasteurized foods used; p | prohibi | ted foods not offered | | | |
| 7 | DIN DOUT DN/O | | | | 1 | 1,1 | Chemical | | | | | |
| | OIN OUT ONO | reventing/Contamination by Hands | 14.05 | 27 | DIN DOL | UT | Food additives: approved | and r | properly used | | | |
| 8 | <u> </u> | Hands clean and properly washed | | ļ | N/A | | | | | | | |
| 9 | .□IN □ OUT □N/A □ N/O | No bare hand contact with ready-to-eat foods or approve alternate method properly followed | ed 28 | 28. | DIN DOL | UT | Toxic substances properly identified, stored, used | | | | | |
| | | | | | | С | onformance with Approve | d Pro | cedures : | | | |
| 10 | │□IN □OUT□N/A | Adequate handwashing facilities supplied & accessible Approved Source | | 29 | □IN □ OL | JT | Compliance with Reduced specialized processes, an | l Oxyg | en Packaging, other | | | |
| 11 | DIN DOUT | Food obtained from approved source | | - | DIN DOL | ΙΤ | | | | | | |
| 12 | DOUT DOUT | Food received at proper temperature | | 30 | □N/A □ N/ | | Special Requirements: Fre | sh Jui | ce Production | | | |
| 13 | | Food in good condition, safe, and unadulterated | | 31 | □IN □ OU □N/A □ N/0 | | Special Requirements: Hea | at Trea | atment Dispensing Freezers | | | |
| 14 | □IN □OUT | Required records available: shellstock tags, parasite | | | DIN DOL | | | | | | | |
| THE SECOND | | destruction | 2000,000 | 32 | □N/A □ N/0 | 0 | Special Requirements: Cus | stom F | Processing | | | |
| | □IN □OUT | Protection from Contamination : + | | 33 | □IN □OL | | Special Requirements: Bul | k Wat | er Machine Criteria | | | |
| 15 | DN/A DN/O | Food separated and protected | | | | | | | | | | |
| 16 | □IN □OUT □N/A □N/O | Food-contact surfaces: cleaned and sanitized | | 34 | | | Special Requirements: Aci Criteria | dified \ | White Rice Preparation | | | |
| 17 | JOUT □OUT | Proper disposition of returned, previously served, reconditioned, and unsafe food | | 35 | □IN □OL □N/A | JT | Critical Control Point Inspe | ction | | | | |
| | A D D D D D D D D D D D D D D D D D D D | rature Controlled for Safety Food (TCS food) | | 36 | □IN □OU | JT | Process Review | | | | | |
| 18 | □IN □ OUT □N/A □ N/O | Proper cooking time and temperatures | | | □ N/A | | | | | | | |
| 19 | □IN □ OUT □N/A □ N/O | Proper reheating procedures for hot holding | | 37 | □N/A □N/A | JT | Variance | | | | | |
| 20 | DIN DOUT | Proper cooling time and temperatures | | Risk factors are food preparation practices and employee behaviors | | | | | | | | |
| 21 | □IN □ OUT □N/A □ N/O | Proper hot holding temperatures | | that are identified as the most significant contributing factors to foodborne illness. | | | | | | | | |
| 22 | - DIN DOUT DN/A | Proper cold holding temperatures | | Public health interventions are control measures to prevent foodborne illness or injury. | | | | | | | | |

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State of Ohio

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

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Name of Facility

Type of Inspection

Signature

Date

3/242/

| | | - | | | | | 7 |
|--------------------------|-------------------------|--|------------------|---|--|----------------------|--------------|
| | | GOOD RETAI | L PRA | CTICES | | | |
| Good Reta | all Practices are | preventative measures to control the int | roductio | on of pathogens, ch | emicals, and physical phiects into foc | ode | |
| Mark designated com | pliance status (I | N, OUT, N/O, N/A) for each numbered item: | IN ≕in c | ompliance OUT=not | in compliance N/O=not observed N/A= | ruo. =n∩t annli | icablo |
| | Safe Foo | od and Water | | | Utensils, Equipment and Vending | | Salt |
| 38 | | urized eggs used where required | 54 | | Food and nonfood-contact surfaces cle designed, constructed, and used | anable, p | properly |
| 39 IN I OUT IN/ | | and ice from approved source perature Control | 55 | OIN OUT ON/A | Warewashing facilities: installed, mainta strips | ined, used | d; test |
| 40 IN I OUT IN/A | N/O Proper for tem | cooling methods used; adequate equipment | 56 | DIN DOUT | Nonfood-contact surfaces clean | 1770 000 20 20 20 20 | Construction |
| 41 IN OUT ON/A | N/O Plant f | ood properly cooked for hot holding | 57 | TÉ IN OUT ON/A | Physical Facilities | | |
| 42 🗖 ÎN 🗆 OUT 🗆 N/A | | ved thawing methods used | 58 | | Hot and cold water available; adequate Plumbing installed; proper backflow de | | e |
| 43 II IN II OUT II N/A | Thermo | ometers provided and accurate | 1 | □N/A □ N/O | Transing installed, proper backlow de | vices | |
| | Food Id | dentification | 59 | Ó IN □ OUT □N/A | Sewage and waste water properly dispos | ed | |
| 44 ☐ IN ☐ OUT | Food p | properly labeled; original container | 60 | □″IN □ OUT □N/A | Toilet facilities: properly constructed, supp | lied, clear | ned |
| | | Food Contamination | 61 | □-IN □ OUT □N/A | Garbage/refuse properly disposed; facilitie | s maintain | ned |
| 45 | opening Contan | , rodents, and animals not present/outer ps protected nination prevented during food preparation, | 62 | □.IN □ OUT □N/A □ N/O | Physical facilities installed, maintained, ar outdoor dining areas | nd clean; d | dogs in |
| 47 IN - OUT - N/A | | & display al cleanliness | 63 | □ IN □ OUT | Adequate ventilation and lighting; designar | ted areas | used |
| 48 ⊿I'IN □ OUT □N/A | | cloths: properly used and stored | 64 | □ IN □ OUT □N/A | · · · · · · · · · · · · · · · · · · · | | |
| 49 │□ IN □ OUT □N/A | SAN SECTION AND SECTION | g fruits and vegetables | 7/12 | | Administrative | | 56 - H |
| 50 IN OUT ON/A | _ | se of Utensils utensils: properly stored | 65 | ☐ IN ☐ OUT ☐Ñ/A | 901:3-4 OAC | | |
| | | s, equipment and linens: properly stored, dried, | | | 901.5-4 OAC | | |
| | handled | | 66 | ☐IN □ OUT □N/A | 3701-21 OAC | | |
| 52 IN OUT N/A | | use/single-service articles: properly stored, used | 4 | | | | |
| SO PARIO SO PARIO | LI WO Slash-le | esistant, cloth, and latex glove use | | | | | |
| Item No. Code Section | Mark "> Priority Level | Observations and (X" in appropriate box for COS and R: COS=cor Comment | orre rected o | CTIVE ACTIONS on-site during inspection | n R≑repeat violation | | |
| Nom No. Gode Goerion | Priority Level | Comment | į | | | cos | R |
| | | 15000000000000000000000000000000000000 | 1 | 0 1 19 | rection - | | |
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| Person in Charge | Swah | Kyllenskin - | | 73.00 | Date: 3-20-202 | 14 | |
| Environmental Health Spe | ecialist | ~ ~ ~ ~ | | Licensor: | D(19) | | |
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PRIORITY LEVEL: C= CRITICAL NC= NON-CRITICAL

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