Robert Huisla Haleonnecticut Department of Public Health

Risk Category: 5 Food Establishment Inspection Report Page 1 of											
Establishment type Permanent Temporary Mobile Other					Date: 7/10/2	. —					
Establishment Bar 140		pin	onner	cticut Heat	Time In Ald AM/PM	Time Out_	30	AM/PM			
Address 140 Centust			DI		1016)		AWITW			
					Purpose of Inspection: F	Routine Pre	e-op				
Town/City Specific 4005			cut Der	partment			-ор				
Permit Holder	ıblic He	ealth	Reinspection Other								
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS											
Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Interventions are control measures to prevent foodborne illness or injury.											
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				compliar			D=not obs	33101103330			
P=Priority item Pf=Priority foundation item C=Core item V=violation type			-					t violation			
IN OUT N/A N/O Supervision	V	cos	R		N/A N/O Protection from		V	COS R			
Person/Alternate Person in charge present,	Pf	0		15			P/C	00			
demonstrates knowledge and performs duties	3.5			16	Food-contact surfaces:		P/Pf/C	00			
Certified Food Protection Manager for Classes 2, 3, & 4	С		0	17	Proper disposition of ref		Р	00			
Employee Health					Time/Temperature Co		2000				
Management, food employee and conditional employee;	DIDE			18	Proper cooking time and	d temperatures	P/Pf/C	00			
knowledge, responsibilities and reporting	P/Pf	0	\circ	19 🔾	Preper reheating proced	dures for hot holding	P	00			
4 Proper use of restriction and exclusion	P	0	0	20 🔾	Proper cooling time and	temperatures	Р	00			
Written procedures for responding to vomiting and	-			21 🔾	Proper hot holding temp		Р	00			
diarrheal events	Pf	0	0	22 @	Proper cold holding tem		Р	00			
Good Hygienic Practices				23	Proper date marking an		P/Pf	00			
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	101	0		Time as a public health		T				
7 No discharge from eyes, nose, and mouth	C		0	24	and records	осиман ризосиинос	P/Pf/C	00			
Preventing Contamination by Hands				73.00	Consumer Ad	visorv					
8 O Hands clean and properly washed	P/Pf	101	0	25	Consumer advisory provided		Pf	00			
No hare hand contact with RTE food or a			\sim	20	Highly Susceptible						
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26	Pasteurized foods used; prof		P/C	00			
	Pf/C			20	Food/Color Additives and		170	00			
	PI/C	19		27			D	00			
Approved Source		1		27	Food additives: approve		P	90			
Food obtained from approved source	P/Pf/C		0	28	Toxic substances prope	riy identified,	P/Pf/C	00			
12 Food received at proper temperature	P/Pf	_	0		stored & used	10					
13 O Food in good condition, safe, and unadulterated	P/Pf	0	0		Conformance with Appr		F-803				
Required records available: molluscan shellfish	P/Pf/C	0	0	29	Compliance with varian		P/Pf/C	00			
identification, parasite destruction					process/ROP criteria/H/	ACCP Plan					
				ACTIC		lata fa a da					
Good Retail Practices are preventative measures to							_				
				for COS			The state of the s	violation			
OUT N/A N/O Safe Food and Water	V	cos		OUT	Proper Use of Ute	nsils	V	COS R			
30 Pasteurized eggs used where required	Р		0		-use utensils: properly stored		C	00			
31 Water and ice from approved source	P/Pf/C	-	0		ensils/equipment/linens: properly store		Pf/C				
32 Variance obtained for specialized processing methods	Pf	0	0		ngle-use/single-service articles: prope	rly stored & used	_				
Food Temperature Control				46	loves used properly		C	00			
Proper cooling methods used; adequate equipment for	Pf/C		0		Utensils and Ed		300.000				
temperature control				47	ood and non-food contact surfaces		P/Pf/C	00			
34 O O Plant food properly cooked for hot holding	Pf	-	0		operly designed, constructed, and						
35 O Approved thawing methods used		_	0	48	arewashing facilities: installed, ma		Pf/C	00			
36 C Thermometers provided and accurate	Pf/C	0	0		eaning agents, sanitizers, and test	strips available					
Food Identification		, ,		49	on-food contact surfaces clean		С	00			
37 C Food properly labeled; original container	Pf/C	0	0		Physical Fac						
Prevention of Food Contamination					ot and cold water available; adequa		Pf	00			
38 Insects, rodents, and animals not present	Pf/C	0	0		lumbing installed; proper backflow		P/Pf/C				
39 Contamination prevented during food preparation, storage & display	P/Pf/C				ewage and waste water properly di			00			
40 Personal cleanliness	Pf/C	_			pilet facilities: properly constructed,		_	00			
41 O Wiping cloths: properly used and stored	С	0			arbage and refuse properly disposed;		С	00			
42 Washing fruits and vegetables	P/Pf/C	0	0		hysical facilities installed, maintaine			00			
56 Adequate ventilation and lighting; designated areas used C											
Natural rubber latex gloves not used per CGS §19a-36f Violations documented Date corrections due #											
Person in Charge (Signature) Date	101	2	>	Priority	em Violations	_					
Date III-	/				oundation Item Violations						
Person in Charge (Printed)	, ,	_			Violations						
0///	Inl	11			or/Public Health Intervention Violat						
Inspector (Signature) Date	wi	Ju			isk Factor/Public Health Interventional Practices Violations	ii violadolis		_			
Inapactor (Printed) (M 14 Ma BUINA)						intend to reinspect	-	17			
Inspector (Printed) Requires Reinspection - check box if you intend to reinspect Requires Reinspection - check box if you intend to reinspect Requires Reinspection violation identified by the food inspector or to hold, destroy											
Appeal: The owner of operator of a food establishment aggrieved by this order to correct any inspection violation identified by the food inspector or to hold, destroy, or dispose of upsafe food, may appeal such order to the Director of Health, not later than forty-eight hours after issuance of such order.											



INSPECTION REPORT FOOD SERVICE ESTABLISHMENTS CONTINUATION SHEET

STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

	STABLISHMENT		TOWN		DATE OF INSPECTION			
80	140		hello	\	7/10/25			
INSPECTION FORM #	REMARKS							
		Consect	ed violus	has fun	1 mp. (1/19/2:			
					Chiles			
	1. P	10 Opt	CFPU au	Mication -	en the dung			
	ì	neversion	n					
	2.	Tisting	strips au	zuil. fas	anchizu-twicol			
		Squer 2	1- llogg	en 0				
	3. L	infra	refaire					
	4.	Stills	outga	is ral co	ntreme labella			
	5. 6	Man	clutery	wayhat -	Incl. buement			
	4 9	n //						
	X	Ellyin	poster pos	tra wis	training los			
		ringle	fe-make pooter pos ted.		7 0			
		V						
INITIAL (IN	SPECTOR)	B	5	INITIAL (PERSON IN C	CHARGE) Z.H.			