

Brian Kelly
7/24/25

Connecticut Department of Public Health

Risk Category: 3 **Food Establishment Inspection Report** Page 1 of 2

Establishment type: Permanent Temporary Mobile Other _____ Date: 10/29/25

Establishment: Catarogos Time In: 12:30 AM/PM Time Out: 11:00 AM/PM

Address: 112 Center St. LHD: NVHTD

Town/City: Shelton #4141 Purpose of Inspection: Routine Pre-op

Permit Holder: _____ 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 item IN=in compliance OUT=not in compliance N/A=not applicable N/O=not observed

P=Priority item	Pf=Priority foundation item	C=Core item	V=violation type	Mark in appropriate box for COS and/or R			COS=corrected on-site during inspection			R=repeat violation			
IN	OUT	N/A	N/O	V	COS	R	IN	OUT	N/A	N/O	V	COS	R
Supervision													
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Person/Alternate Person in charge present, demonstrates knowledge and performs duties Pf													
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Certified Food Protection Manager for Classes 2, 3, & 4 C													
Employee Health													
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Management, food employee and conditional employee; knowledge, responsibilities and reporting P/Pf													
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Proper use of restriction and exclusion P													
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Written procedures for responding to vomiting and diarrheal events Pf													
Good Hygienic Practices													
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Proper eating, tasting, drinking, or tobacco products use P/C													
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
No discharge from eyes, nose, and mouth C													
Preventing Contamination by Hands													
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Hands clean and properly washed P/Pf													
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed P/Pf/C													
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Adequate handwashing sinks, properly supplied/accessible P/C													
Approved Source													
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Food obtained from approved source P/Pf/C													
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Food received at proper temperature P/Pf													
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Food in good condition, safe, and unadulterated P/Pf													
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Required records available: molluscan shellfish identification, parasite destruction P/Pf/C													
Protection from Contamination													
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Food separated and protected P/C													
16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Food-contact surfaces: cleaned & sanitized P/Pf/C													
17	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Proper disposition of returned, previously served, reconditioned, and unsafe food P													
Time/Temperature Control for Safety													
18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Proper cooking time and temperatures P/Pf/C													
19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Proper reheating procedures for hot holding P													
20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Proper cooling time and temperatures P													
21	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Proper hot holding temperatures P													
22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Proper cold holding temperatures P													
23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Proper date marking and disposition P/Pf													
24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Time as a public health control: procedures and records P/Pf/C													
Consumer Advisory													
25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Consumer advisory provided: raw/undercooked food Pf													
Highly Susceptible Population													
26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Pasteurized foods used; prohibited foods not offered P/C													
Food/Color Additives and Toxic Substances													
27	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Food additives: approved and properly used P													
28	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Toxic substances properly identified, stored & used P/Pf/C													
Conformance with Approved Procedures													
29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
Compliance with variance/specialized process/ROP criteria/HACCP Plan P/Pf/C													

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark OUT if numbered item is not in compliance V=violation type Mark in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation

OUT	N/A	N/O	V	COS	R	OUT	N/A	N/O	V	COS	R
Safe Food and Water											
30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Pasteurized eggs used where required P											
31	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Water and ice from approved source P/Pf/C											
32	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Variance obtained for specialized processing methods Pf											
Food Temperature Control											
33	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Proper cooling methods used; adequate equipment for temperature control P/C											
34	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Plant food properly cooked for hot holding Pf											
35	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Approved thawing methods used Pf/C											
36	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Thermometers provided and accurate Pf/C											
Food Identification											
37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Food properly labeled; original container Pf/C											
Prevention of Food Contamination											
38	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Insects, rodents, and animals not present Pf/C											
39	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Contamination prevented during food preparation, storage & display P/Pf/C											
40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Personal cleanliness Pf/C											
41	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Wiping cloths: properly used and stored C											
42	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Washing fruits and vegetables P/Pf/C											
Proper Use of Utensils											
43	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
In-use utensils: properly stored P/C											
44	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Utensils/equipment/linens: properly stored, dried, & handled P/C											
45	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Single-use/single-service articles: properly stored & used P/C											
46	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Gloves used properly C											
Utensils and Equipment											
47	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Food and non-food contact surfaces cleanable, properly designed, constructed, and used P/Pf/C											
48	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available P/C											
49	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Non-food contact surfaces clean C											
Physical Facilities											
50	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Hot and cold water available; adequate pressure Pf											
51	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Plumbing installed; proper backflow devices P/Pf/C											
52	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Sewage and waste water properly disposed P/Pf/C											
53	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Toilet facilities: properly constructed, supplied, & clean Pf/C											
54	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Garbage and refuse properly disposed; facilities maintained C											
55	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Physical facilities installed, maintained, and clean P/Pf/C											
56	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Adequate ventilation and lighting; designated areas used C											
Natural rubber latex gloves not used per CGS §19a-36f											

Person in Charge (Signature) _____ Date 10/29

Person in Charge (Printed) Loe Cam

Inspector (Signature) _____ Date 10/29/25

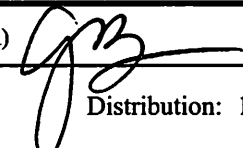
Inspector (Printed) Blinda Brunant

Appeal: The owner or 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 unsafe food, may appeal such order to the Director of Health, not later than forty-eight hours after issuance of such order.

Violations documented	Date corrections due	#
Priority Item Violations		
Priority Foundation Item Violations		
Core Item Violations	<u>90 days</u>	<u>5</u>
Risk Factor/Public Health Intervention Violations		
Repeat Risk Factor/Public Health Intervention Violations		
Good Retail Practices Violations		<u>4</u>
Requires Reinspection - check box if you intend to reinspect		<u>no</u>

Calamari 40.
 Salmon 39.5
 Raw beef 39.0
 ranch chicken 39.0
 Sauer 141.
 meatballs 114.
 mashed pot. soup 162.
 pasta soup 160.
 skin steak 39.0
 steak tips 39.5
 mashed pot. 37.3
 lasagna 37.5
 pork 37.5
 potato 37.3
 Chicken w/ryz 38.0

INSPECTION REPORT
 FOOD SERVICE ESTABLISHMENTS
 CONTINUATION SHEET
 STATE OF CONNECTICUT
 DEPARTMENT OF PUBLIC HEALTH

NAME OF ESTABLISHMENT	TOWN	DATE OF INSPECTION
INSPECTION FORM #	REMARKS	
Calaroso	Shelton	10/27/25
43C/47C	plastic/glass dishware being used as scoops -	
49C	buried in food product	
49C	ext. of food containers unclear	
57C	unclean walls; ceiling	
10C	missing signage in bathroom	
	☐ hand sinks still dead	
	☐ allergen poster posted	
	☐ sanitize food	
	- exposed ceiling repaired	
	- int. of ice machine cleaned; ice dumped out	
	- FCS - on-site during insp and cleared the ground	
	Asaru system; hood prof cleaned last week.	
INITIAL (INSPECTOR)		INITIAL (PERSON IN CHARGE) 