


6079

Risk Category: 3		Food Establishment Inspection Report		Page 1 of 2	
Establishment type: Permanent Temporary Mobile Other		Date: 1/13/25		Time In 10:25 AM/PM Time Out 11:15 AM/PM	
Establishment Casa Bianca Pizza				LHD NVHD	
Address 669 Main St.				Purpose of Inspection: Routine Pre-op	
Town/City Ansonia				Reinspection Other	
Permit Holder Ihsan Ulhag					
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS					
<i>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.</i>					
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		Supervision		V COS R	
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf <input type="checkbox"/>
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Certified Food Protection Manager for Classes 2, 3, & 4	C <input type="checkbox"/>
IN OUT N/A N/O		Employee Health		V COS R	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf <input type="checkbox"/>
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of restriction and exclusion	P <input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written procedures for responding to vomiting and diarrheal events	Pf <input type="checkbox"/>
IN OUT N/A N/O		Good Hygienic Practices		V COS R	
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco products use	P/C <input type="checkbox"/>
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose, and mouth	C <input type="checkbox"/>
IN OUT N/A N/O		Preventing Contamination by Hands		V COS R	
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean and properly washed	P/Pf <input type="checkbox"/>
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 <input type="checkbox"/>
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Adequate handwashing sinks, properly supplied/accessible	Pf/C <input type="checkbox"/>
IN OUT N/A N/O		Approved Source		V COS R	
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source	P/Pf/C <input type="checkbox"/>
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food received at proper temperature	P/Pf <input type="checkbox"/>
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe, and unadulterated	P/Pf <input type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C <input type="checkbox"/>
GOOD RETAIL PRACTICES					
<i>Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.</i>					
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		Safe Food and Water		V COS R	
30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required	P <input type="checkbox"/>
31	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	P/Pf/C <input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Variance obtained for specialized processing methods	Pf <input type="checkbox"/>
IN OUT N/A N/O		Food Temperature Control		V COS R	
33	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	Pf/C <input type="checkbox"/>
34	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plant food properly cooked for hot holding	Pf <input type="checkbox"/>
35	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used	Pf/C <input type="checkbox"/>
36	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate	Pf/C <input type="checkbox"/>
IN OUT N/A N/O		Food Identification		V COS R	
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container	Pf/C <input checked="" type="checkbox"/>
IN OUT N/A N/O		Prevention of Food Contamination		V COS R	
38	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insects, rodents, and animals not present	Pf/C <input type="checkbox"/>
39	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display	P/Pf/C <input type="checkbox"/>
40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness	Pf/C <input type="checkbox"/>
41	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored	C <input type="checkbox"/>
42	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing fruits and vegetables	P/Pf/C <input type="checkbox"/>
Permit Holder shall notify customers that a copy of the most recent inspection report is available.					
Person in Charge (Signature) [Signature]		Date 1/13/2025			
Person in Charge (Printed)					
Inspector (Signature) [Signature]		Date 1/13/25			
Inspector (Printed) John Mucha					
Violations documented		Date corrections due		#	
Priority Item Violations		C.O.S		1	
Priority Foundation Item Violations		4/13/25		8	
Core Item Violations				1	
Risk Factor/Public Health Intervention Violations				1	
Repeat Risk Factor/Public Health Intervention Violations				8	
Good Retail Practices Violations					
Requires Reinspection - check box if you intend to reinspect					
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.					

Food Establishment Inspection Report

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LHD NVHD

Inspection Report Continuation Sheet

Date 1/13/25

Establishment Casa Bianca Pizza Town Ansonia

TEMPERATURE OBSERVATIONS

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Chicken wings	41°F	Meatballs	176°F	Reheated	
Raw hamburger	37°F	Freezers	Frozen		
Sliced tomato	40°F				
Mozzarella	38°F				
Sausage	39°F				
Chicken wings	38°F				
Sliced tomato	37°F				
Marinara	189°F	Reheated			

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 & 8-406.11 of the food code.
	CFPM: Ihsan Ullah Exp: 5/18/27
55C	Broom in kitchen not hung up → Correct by 4/13/25
47C	Top shelf near stove is unclean → Correct by 4/13/25
55C	Fan in kitchen unclean → Correct by 4/13/25
47C	Shelf near fan is unclean → Correct by 4/13/25
47C	Front of pizza oven is unclean → Correct by 4/13/25
47C	Pipe for pizza oven has dust build-up → Correct by 4/13/25
37C	Granular powder unlabeled → C.O.S labeled
52C	Water on floor in walk-in → Correct by 4/13/25
23PF	Chicken wings not date-marked → C.O.S marked
	- Handsink ✓ Hot/Cold H ₂ O ✓ Thermometers ✓
	- Allergen Notice ✓ Sanitizer: Chlorine-100ppm ✓

Person in Charge (Signature)

Date 1/13/2025

Inspector (Signature) [Signature]

Date 1/13/25