6095

Connecticut Department of Public Health

Risk Category: 3 Food Estab	egory: 3 Food Establishment Inspection Report Page 1 of _c									
Establishment type: Permanent Temporary Mobile Other			Date:	2/4/2	5					
Establishment Chifring LLC		Leeping Con-	necticul Health	Time In_	2:55 A	M/PM) Time Out 3:4	/ 5_AM(PM)			
Address 309 Main St.			H)	LHD	NVHD					
Town/City Ansonia				Purpose	of Inspection:	Routine Pre	-ор			
Permit Holder Astrid Clack	C	onnecticut D of Public	epartment Health	Reinspe	ection	Other				
FOODBORNE ILLNESS RISK F										
Risk factors are important practices or procedures identified as the most prevalent cont										
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered i			compliance		ot in compliance		D=not observed			
P=Priority item Pf=Priority foundation item C=Core item V=violation type							R=repeat violation			
IN OUT N/A N/O Supervision	V	COS R		OUT N/A N/C		on from Contamination	V COS R			
Person/Alternate Person in charge present,	Pf	00	15	The second second	Food separated		P/C 0 0			
demonstrates knowledge and performs duties	_	-	16 🛇 🗸			rfaces: cleaned & sanitized	P/Pf/C O			
2 Certified Food Protection Manager for Classes 2,	С	00	17 🛇 🤇			on of returned, previously	POO			
3, & 4						tioned, and unsafe food				
Employee Health						ure Control for Safety	Inings of o			
Management, food employee and conditional employee;	P/Pf	100	18			time and temperatures	P/Pf/C O			
knowledge, responsibilities and reporting						g procedures for hot holding	P 0 0			
Proper use of restriction and exclusion	Р	00				ime and temperatures	P 0 0			
5 Written procedures for responding to vomiting and	Pf	00			Proper hot holdi		POO			
diarrheal events	1 200					ding temperatures	POO			
Good Hygienic Practices			23 🔾		Proper date mai	rking and disposition	P/Pf O O			
6 Proper eating, tasting, drinking, or tobacco products us	_		2400	000		health control: procedures	P/Pf/C			
7 O No discharge from eyes, nose, and mouth	С	00			and records					
Preventing Contamination by Hands				-		mer Advisory				
8 🍑 🔾 Hands clean and properly washed	P/Pf	100	25 0			provided: raw/undercooked food	Pf OO			
9 No bare hand contact with RTE food or a	P/Pf/C			1		ceptible Population				
pre-approved alternative procedure properly followed			26 0		Pasteurized foods u	used; prohibited foods not offered	P/C O			
10 O Adequate handwashing sinks, properly supplied/accessible	Pf/C			Fo	od/Color Additiv	es and Toxic Substances				
/ Approved Source	3333		27 0		Food additives:	approved and properly used	POO			
11 💆 🔾 Food obtained from approved source	P/Pf/C	00	28 😿 🤇		Toxic substance	es properly identified,	P/Pf/C			
12 Coron Food received at proper temperature	P/Pf	00	20		stored & used	3 8 18	P/FI/C			
13 🗸 🔾 Food in good condition, safe, and unadulterated	P/Pf	00		, (Conformance wit	th Approved Procedures				
14 O Required records available: molluscan shellfish	P/Pf/C	00	29 0	0	Compliance with	variance/specialized	P/Pf/C O O			
identification, parasite destruction	FIFIIC		29		process/ROP cr	iteria/HACCP Plan	P/FI/O			
GO	OD RE	TAIL PI	RACTICES	S						
Good Retail Practices are preventative measures t	o contro	ol the addi	tion of patho	gens, chem	nicals, and physical	objects into foods.				
Mark OUT if numbered item is not in compliance V=violation type Mark i	n appro	priate box	for COS and	id/or R	COS=corrected of	on-site during inspection	R=repeat violation			
OUT N/A N/O Safe Food and Water	V	COS R	OUT		Proper Us	e of Utensils	V COS R			
30 Pasteurized eggs used where required	Р	00	43 O In	n-use utens	sils: properly store	ed	c 0 0			
31 Water and ice from approved source	P/Pf/C	00	44 O U	Itensils/equi	pment/linens: prop	erly stored, dried, & handled	Pf/C O O			
32 Variance obtained for specialized processing methods	Pf	00	45 O Si	ingle-use/si	ngle-service article	s: properly stored & used	P/C 0 0			
Food Temperature Control	La Plan		46 O G	Sloves used	d properly		C 0 0			
Proper cooling methods used; adequate equipment for	Delo				Utensils	and Equipment				
temperature control	Pf/C	00	(F)	ood and no	on-food contact s	urfaces cleanable,	P/PfC O			
34 O Plant food properly cooked for hot holding	Pf	00	(47) Ø pi	roperly des	signed, constructe	ed, and used	P/PICOO			
35 O Approved thawing methods used	Pf/C	00	I IV			led, maintained and used;	Pf/C O O			
36 C Thermometers provided and accurate	Pf/C	00				and test strips available	Pf/C			
Food Identification			49 O N	lon-food co	ontact surfaces cl	ean	c 00			
37 C Food properly labeled; original container	Pf/C	00			Physi	cal Facilities				
Prevention of Food Contamination			50 O H	lot and cold	d water available;	adequate pressure	Pf O O			
38 Insects, rodents, and animals not present	PfC	00	51 O P	lumbing in	stalled; proper ba	ackflow devices	P/Pf/C O O			
39 Contamination prevented during food preparation, storage & display		00			d waste water pro		P/Pf/C O O			
40 Personal cleanliness	Pf/C	00				tructed, supplied, & clean	Pf/C O O			
41 Wiping cloths: properly used and stored	С	00				sposed; facilities maintained	C 0 0			
42 Washing fruits and vegetables	P/Pf/C	00	55 O P	hysical fac	cilities installed, m	aintained, and clean	P/Pf/C O O			
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is av	ailable	56 O A	dequate ve	entilation and ligh	ting; designated areas used	c 0 0			
r entitle rolling shall notify customers that a copy of the most recent hispection rep	ort is av	anabie.	The state of the s			ot used per CGS §19a-36f				
	, _			s docume		Date corrections due	#			
Person in Charge (Signature) Date 2 -	-2	5	-	em Violatio		~	_			
					Item Violations	6111=	_			
Person in Charge (Printed) Core Item Violations Size Factor/Public Health Intervention Violations										
Land William Dh Hucho - 2/c	1/2	5					_			
Inspector (Signature) /////////////// Date 2/9		Repeat Risk Factor/Public Health Intervention Violations								
Inspector (Printed) To ha Mucha R.S. Good Retail Practices Violations Requires Reinspection - check box if you intend to reinspect							4			
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 upsafe food, may appeal such order to the Director of Health, not later than forty-eight hours after issuance of such order.										

1st - White: Health Department

Food Establishment Inspection Report

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LHD	VVHD		Inspection Report Continuation Sh	neet	Date 2/4	125				
Establishr	ment Chifci	jo, LL	C Town Anso	onia						
		, ,	TEMPERATURE OBSER	RVATIONS						
Item	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp				
Em	panada	37°F								
Rah	chicken	36°F								
	ed tomato	36° F								
	w beef	41.5								
No. of the last	+ dog	39°F								
	ice	172°F								
	uce	174°F								
	eezers	Frozen								
	202015		SERVATIONS AND CORRE	CTIVE ACTION	vs.					
Item	Violations cited in this				sections 8-405.11 & 8-406.11 of the	e food code.				
Number										
		, I								
	CFPM: A	strid	Clark Exp.	2/13/28	·					
47C	Non-com	merci	al fridge u	ised in	n kitchen >					
	Correct	by 5	5/4/25							
38C	Same di	cain f	ilies in bar ked Hot/Co	area -	Correct by	5/11/25				
			1 1 1/6	1 1 11 0	correct og	1/4/25				
	Handsink	Stoc	Ked Hot/Co	1d H20						
-	Sonifizer	· Qual	t - Bucket:	200ppm)					
				1 /						
_	- Dish Machine: Chemical-Chlorine: 50ppm									
<u></u>	Thermor	neters	-Tes	st Str	ips/					
		•			1					
_	Allergen	Not	ice -D	ry 600	ds/Cans ~					
	J			<i>J</i>	,					
-	Restroom	~								
		1			2 61	2 -				
	Charge (Signature)	1 /			Date 2-4	125				
Inspector	(Signature)	MA C	Well R.S		Date 2/4	125				