## **Connecticut Department of Public Health**

EHS-108 Rev. 2/16/23

									-	<u> </u>
Risk Category: 3 Food Establishment Inspection Report Page 1 of										-
Establishment type Permanent Temporary Mobile Other					_	Date:	3/1	0/25		
Establishmen Port (rasy #53/2		4eerin	g connec	cticut Heal	th.	Time In_	241 A	M/PM Time Out	<u> </u>	_AM/PM
Address Hun pl	900		P	H		LHD	NHA	0		
Town/City Shelfan	,					Purpose	of Inspection:	Routine Pre	-ор	
Permit Holder	C	onnection of Pu	ut Dep	partmer ealth	nt	Reinspe	ction	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	appr	opriat	te box	for C	OS and/or I	R COS=correct	ed on-site during inspection	R=repea	at violation
IN OUT N/A N/O Supervision	V	cos	R		IN O	N/A N/O		on from Contamination	V	cos R
Person/Alternate Person in charge present,	Pf			15	35	00	Food separated		P/C	
demonstrates knowledge and performs duties				16	90			urfaces: cleaned & sanitized	P/Pf/	$c \circ \circ$
2 Certified Food Protection Manager for Classes 2,	С	0	0	17	00			on of returned, previously	F	POO
3, & 4								tioned, and unsafe food		
Employee Health					_			ture Control for Safety	DIDE	
Management, food employee and conditional employee;	P/Pf	0		18				time and temperatures		COO
knowledge, responsibilities and reporting	18880 0			19 (	00			g procedures for hot holding		00
4 Proper use of restriction and exclusion	Р	0	0	-	99			time and temperatures		00
Written procedures for responding to vomiting and	Pf	0	0	21				ing temperatures		00
diarrheal events  Good Hygienic Practices				22 0				rking and disposition	P/Pf	
	e P/C	0	0	23				c health control: procedures	F/FI	
7 Proper eating, tasting, drinking, or tobacco products us	C		3	24	00	00	and records	c nealth control, procedures	P/Pf/C	
Preventing Contamination by Hands								ımer Advisory		
8 Hands clean and properly washed	D/Df	0		25	1			y provided: raw/undercooked food	Pf	100
No bare hand contact with RTE food or a			$\subseteq$	23				ceptible Population	1	1010
pre-approved alternative procedure properly followed	P/Pf/C		9	26				used; prohibited foods not offered	P/C	
Adequate handwashing sinks, properly supplied/accessible	EHC	0		20	-	Fo		ves and Toxic Substances	170	100
	I C			27	1			approved and properly used	1	PIOIO
Approved Source	P/Pf/C		0	21				es properly identified,		
12  Food obtained from approved source	P/Pf	-	0	28	0		stored & used	es property identified,	P/Pf/	
13 Food in good condition, safe, and unadulterated	P/Pf	-	0			C		th Approved Procedures	No.	
Required records available: molluscan shellfish			$\overline{}$					h variance/specialized	T	
identification, parasite destruction	P/Pf/C	0	0	29	0			riteria/HACCP Plan	P/Pf/	
	OD RE	TAIL	PR	ACT	ICES					
Good Retail Practices are preventative measures t	o contro	of the a	additio	on of I	pathod	ens, chemi	icals, and physical	l objects into foods.		
	in appro								R=repe	at violation
OUT N/A N/O Safe Food and Water	V	cos		_	UT			e of Utensils	V	COS R
30 Pasteurized eggs used where required	P	0	0	-		use utens	ils: properly stor		С	00
31 Water and ice from approved source	P/Pf/C	-	0					perly stored, dried, & handled	Pf/0	000
32 O Variance obtained for specialized processing methods	Pf	0	0					es: properly stored & used	P/C	00
Food Temperature Control				-		oves used			С	00
Proper cooling methods used: adequate equipment for	200							and Equipment		
temperature control	Pf/C	0	0		Fo	ood and no		surfaces cleanable,	P/Pf/C	
34 O Plant food properly cooked for hot holding	Pf	0	0	47	pr	operly des	igned, construct	ed, and used	P/PI/C	
35 O Approved thawing methods used	Pf/C	0	0	40	W	arewashin	g facilities: insta	lled, maintained and used;	Pf/C	
36 Thermometers provided and accurate	_	0	0	48				and test strips available	PI/C	, 00
Food Identification	1	Λ		49			ntact surfaces cl		С	00
37 Food properly labeled; original container	PTC	10	0				Phys	ical Facilities		
Prevention of Food Contamination				50	OH	ot and cold	water available	; adequate pressure	Pf	00
38 Insects, rodents, and animals not present	Pf/C		0	51	O PI	umbing ins	stalled; proper ba	ackflow devices	P/Pf/C	00
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	0	52	O Se	ewage and	waste water pro	perly disposed	P/Pf/C	00
40 Personal cleanliness	Pf/C	0	0	53	O To	oilet facilitie	es: properly cons	structed, supplied, & clean	Pf/C	
41 Wiping cloths: properly used and stored	С	0	0	54	O G	arbage and	refuse properly di	isposed; facilities maintained	C	
42 Washing fruits and vegetables	P/Pf/C	0	0	55	O PI	nysical fac	ilities installed, n	naintained, and clean	P/Pf/C	
Parmit Helder shall notify systemacy that a convert the most recent inspection rep	ort is av	ailable		56	O A	dequate ve	entilation and ligh	nting; designated areas used	C	00
Permit Holder shall notify customers that a copy of the most recent inspection report is available.  Natural rubber latex gloves not used per CGS §19a-36f										
Person in Charge (Signature) Said Boate 3 - (		5				s docume		Date corrections due		. #
Person in Charge (Signature) Date	0 0	-		Prio	rity Ite	m Violatio	ns			
TO 12 FORE							tem Violations	US	-	
Person in Charge (Printed)	-					Violations	lealth Intervention	on Violations	-	
								tervention Violations		
4 1 2							es Violations	torronder violations		1_
Inspector (Printed) 611 hold Bully N	Inspector (Printed) 64 Notal Bullium Requires Reinspection - check box if you intend to reinspect 100							no		
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, destr										
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.										



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INSPECTION REPORT FOOD SERVICE ESTABLISHMENTS CONTINUATION SHEET

## STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

NAME OF E	STABLISHMENT	TOWN		DATE OF INSPECTION							
	it Cruzy	Shelter	<u> </u>	3/0/25							
INSPECTION FORM #			REMARKS								
100	missing signage at hundsink ( COS)										
109+	Missing signage at handsink (cos) Utensils struct in hundsink (cos)										
3)C	no unten n	orpication	ugading .	fred allegens is							
	Gwd menu It	ens (cos)		U O							
	0										
	& sunstate DPH food cellecting 101 to CFRU										
	& sunstate DPH fud allegen & los & CFRU  & Samazu-goal										
	& handsmy-soup, paper tane										
	& kitchin	closedas	timed into	uchin - no acking a							
	Godpag	being din	e Fy	<u> </u>							
	0 ,										
INITIAL (IN	SPECTOR)		INITIAL (PERSON IN C	CHARGE) Ene 3 Epp2							