


5489

Connecticut Department of Public Health

EHS-108 Rev. 2/16/23

Risk Category: <u>3</u>		Food Establishment Inspection Report		Page 1 of <u>2</u>	
Establishment type: <u>Permanent</u> Temporary Mobile Other		Date: <u>7/25/25</u>		Time In <u>1246</u> AM/PM Time Out _____ AM/PM	
Establishment: <u>Dragon Kitchen</u>				LHD <u>NVHD</u>	
Address: <u>5 first street</u>				Purpose of Inspection: <u>Routine</u> Pre-op	
Town/City: <u>Seymour</u>				Reinspection _____ Other _____	
Permit Holder: <u>Nian kui lin</u>					

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

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

Person in Charge (Signature) <u>Nian kui Lin</u> Date <u>7-15-25</u> Person in Charge (Printed) <u>Nian kui Lin</u> Inspector (Signature) <u>Amy Durand</u> Date <u>7/15/25</u> Inspector (Printed) <u>Amy Durand</u>			Violations documented Priority Item Violations <u>05</u> Priority Foundation Item Violations <u>10/15/25</u> Core Item Violations <u>3</u> Risk Factor/Public Health Intervention Violations <u>2</u> Repeat Risk Factor/Public Health Intervention Violations <u>3</u> Good Retail Practices Violations <u>3</u> Requires Reinspection - check box if you intend to reinspect <u>3</u>		
--	--	--	---	--	--

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.

Page 2 of 2

Date 7/15/25

Town NVHD

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Soup HH	183 F	WIC Ambient	40 F		
rice HH	160 F	Sliced onion wic.	40 F		
2 door fridge	40 F				
egg roll CH	40 F				
raw chicken	37 F				
raw shrimp	37 F				
garlic n oil	43 F				

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: nian kui lin 11/14/2020. hand sink stocked ✓ signage ✓ hot h ₂ O ✓ Nitrile gloves probe thermometer. sanitizer bleach ✓ test strips ✓ buckets 50 ppm ✓ dry storage ok allergen statement ✓ labeling in walk in good
49C	Hoods / Baffles unclean / grease build up
50C	phone stored @ prep table
28P	Medication Prescriptions stored @ prep table cos removed
15P	raw chicken stored over produce in walk in cos rearranged
39C	food uncovered in walk in cooler & in 2 door lowboy

Date 7-15-25

Date 7/15/25