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Risk Category: 3 Food Establishment Inspection Report Page 1 of 2												
Establishment type: (Permanent) Temporary Mobile Other			- Date:	6/3/25								
Establishment Europol Deli & Gifts	Connec	ticut Health	Time Ir	10:05	MPM Time Out 10	40	AM)PM					
Address 354 Main St.					LHD	NVHD						
Town/City Ansonia					Purpos	Purpose of Inspection: Routine Pre-op						
Permit Holder Elzbicto Baran Connecticut Do of Public 1				artment alth	Reinsp	ection	Other					
FOODBORNE ILLNESS RISK FA	ACTO	RS A	NE	PUE	BLIC HEA	LTH INTERV	ENTIONS					
Risk factors are important practices or procedures identified as the most prevalent cont		actors of	foodl	orne illn	ess or injury. In	terventions are contro	ol measures to prevent foodborne illnes	s or injury.				
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	-			omplia		not in compliance		=not obs				
P=Priority item Pf=Priority foundation item C=Core item V=violation type							ted on-site during inspection					
IN OUT N/A N/O Supervision	V	cos	R		OUT N/A N		ion from Contamination		COS R			
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0		15 🕡		Food separate	urfaces: cleaned & sanitized	P/C	00			
2 Certified Food Protection Manager for Classes 2,	С	0		17	/		ion of returned, previously	P	00			
3, & 4				17			itioned, and unsafe food					
Employee Health Management, food employee and conditional employee;				18 🗸	1000		ture Control for Safety time and temperatures	P/Pf/C	00			
knowledge, responsibilities and reporting	P/Pf	100	\supset	19			ng procedures for hot holding	P				
4 Proper use of restriction and exclusion	Р	0	5	20 (time and temperatures		00			
Written procedures for responding to vomiting and	Pf	0		21 🛇			ling temperatures	P	00			
diarrheal events	PI			22 🕥	1		ding temperatures	P				
Good Hygienic Practices				23 🔾	000		arking and disposition	P/Pf	00			
6 Proper eating, tasting, drinking, or tobacco products us			\supseteq	24 0	0000		ic health control: procedures	P/Pf/C	00			
7 No discharge from eyes, nose, and mouth	С	0	2			and records						
Preventing Contamination by Hands	DIDI			25			umer Advisory	Pf	00			
8	P/Pf		2	25 🔾			y provided: raw/undercooked food	PI	00			
pre-approved alternative procedure properly followed	P/Pf/C	0		26			used; prohibited foods not offered	P/C	00			
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	5	20	, F		ves and Toxic Substances	1170				
Approved Source	1 110			27			approved and properly used	P	00			
11 Food obtained from approved source	P/Pf/C	100	5				es properly identified,					
12 O Food received at proper temperature	P/Pf		5	28 🗸		stored & used		P/Pf/C	00			
13 Comparison Food in good condition, safe, and unadulterated	P/Pt				/		ith Approved Procedures					
Required records available: molluscan shellfish	P/Pf/C	0		29 🤇	000		th variance/specialized	P/Pf/C	00			
identification, parasite destruction	OD RE		DD		PEC	process/ROP o	riteria/HACCP Plan					
Good Retail Practices are preventative measures to	_		_			micals and physica	al objects into foods					
			_		and/or R			R=repeat	violation			
OUT N/A N/O Safe Food and Water	V	cos		OUT			se of Utensils		COS R			
30 Pasteurized eggs used where required	Р	0	5	and the local division in the local division	-	sils: properly sto		С	00			
31 Water and ice from approved source	P/Pf/C			44 🤇	Utensils/eq	uipment/linens: pro	perly stored, dried, & handled	Pf/C	00			
32 Variance obtained for specialized processing methods	Pf	0	\supseteq				es: properly stored & used	P/C	00			
Food Temperature Control				46	Gloves use			С	00			
Proper cooling methods used; adequate equipment for	Pf/C	0			Food and		s and Equipment					
temperature control 34	Pf	0	5	47 C)	esigned, construc	surfaces cleanable,	P/Pf/C	00			
35 O Approved thawing methods used	Pf/C		51				alled, maintained and used;	T				
36 Thermometers provided and accurate		_	511	48	21		and test strips available	Pf/C	00			
Food Identification	1,			49 🤇		contact surfaces of		С	00			
37 Food properly labeled; original container	Pf/C	0	5	173.75		Phys	sical Facilities					
Prevention of Food Contamination							e; adequate pressure	Pf	00			
38 Insects, rodents, and animals not present			2			nstalled; proper b		10.00	00			
39 Contamination prevented during food preparation, storage & display	P/Pf/C		2			nd waste water pr			00			
40 Personal cleanliness	Pf/C						structed, supplied, & clean	Pf/C	00			
41 Wiping cloths: properly used and stored 42 Washing fruits and vegetables	P/Pf/C	_					isposed; facilities maintained maintained, and clean	P/Pf/C				
							hting; designated areas used		00			
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is av	ailable.					not used per CGS §19a-36f					
- Shaptio Bru - OG/	13/	175			ions docum		Date corrections due		#			
Person in Charge (Signature) (MANCE LIME Date 00/1	1	-)		Priority Item Violations				-				
Person in Charge (Printed)/					y Foundation tem Violation	ltem Violations	_	-				
- Hush -1-	-				on Violations	-	_					
Inspector (Signature) 10/11/11/10/Date 6/3/25					Risk Factor/Public Health Intervention Violations Repeat Risk Factor/Public Health Intervention Violations				_			
Tobia Marka DC		Good Retail Practices Violations					_					
Inspector (Printed) JONN / UCNO 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 Page 2 of 2

LHD	HD		Inspection Report Continuation Shee	Date 6/3	Date 6/3/2025							
Establishr	ment Europal	Deli & G	ifts Town Ansor	nia								
TEMPERATURE OBSERVATIONS												
_	/Location/Process	Temp 156°F	Item/Location/Process	Frozen	Item/Location/Process	Temp						
	bbage om:	41°F	Freezers	1102011								
	oked ham	41°F										
	eese	410=										
	elbasa	40°F										
	usage	40°F										
	ked ham	40°F										
D/	itter		SERVATIONS AND CORRECT	TIVE ACTION	S							
Item Number	Violations cited in this	report must be	corrected within the time frames below	v, or as stated in s	ections 8-405.11 & 8-406.11 of the	he food code.						
	CFPM. A	nna 7	awadzki Exp:	6/17/28	7							
		41										
į	Handsinl	~	Hot/Cold HaD	✓								
				11101116								
	Sanitize	r. Chl	lorine - 3-bay	1:100p	om ~							
				, ,								
-	Thermor	neter	s - Tes	t Strip	5 🗸							
_	Date-M	larks	-Alle	roen 1	votice v							
		IMI ICS	/ (11.0	yen	, , , , ,							
-	Restroo	m	-Aisles	/								
-	Labels	/	- Dry Go	ods/Co	ins							
			J	,								
		- Tage 102										
Person in	Charge (Signature)	Ehby	Etre Baran	-	Date 06/0	73/2-						
	(Signature)	she!	Teicha RS		Date 6/3	125						