

4755

Connecticut Department of Public Health

EHS-109 Rev 2/16/23

Risk Category: 3	Food Establishment Inspection Report						Page 1 of 2					
Establishment type: Permanent Temporary Mobile Other _____	Date: 6/8/25											
Establishment FOCACCIA'S Cafe Address 702 Bridgeport Ave Town/City Sherman Permit Holder New Renaissance Grp LLC - Bladie M. Jollani	Time In 12:05 AM/PM	Time Out AM/PM										
DPH Division of Environmental Health Connecticut Department of Public Health						LHD NVHD						
Purpose of Inspection: Routine Pre-op Reinspection Other _____												
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS												
<small>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.</small>												
<small>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.</small>												
P=Priority Item	Pf=Priority foundation item	C=Core item	V=Violation type	Mark in appropriate box for COS and/or R								
IN	OUT	N/A	N/O	COS	R	COS=corrected on-site during inspection R=repeat violation						
Supervision												
1 <input checked="" type="checkbox"/>	Person/Alternate Person in charge present, demonstrates knowledge and performs duties			Pf	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Protection from Contamination						
2 <input checked="" type="checkbox"/>	Certified Food Protection Manager for Classes 2, 3, & 4			C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	IN	OUT	N/A	N/O	V	COS	R
Employee Health												
3 <input checked="" type="checkbox"/>	Management, food employee and conditional employee, knowledge, responsibilities and reporting			P/Pf	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	15 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Food separated and protected	P/C	<input type="checkbox"/>		
4 <input checked="" type="checkbox"/>	Proper use of restriction and exclusion			P	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	16 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Food-contact surfaces: cleaned & sanitized	P/Pf	<input type="checkbox"/>		
5 <input checked="" type="checkbox"/>	Written procedures for responding to vomiting and diarrheal events			Pf	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	17 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, and unsafe food	P	<input type="checkbox"/>		
Good Hygienic Practices												
6 <input checked="" type="checkbox"/>	Proper eating, tasting, drinking, or tobacco products use			P/C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	18 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Proper cooking time and temperatures	P/Pf/C	<input type="checkbox"/>		
7 <input checked="" type="checkbox"/>	No discharge from eyes, nose, and mouth			C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	19 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Proper reheating procedures for hot holding	P	<input type="checkbox"/>		
Preventing Contamination by Hands												
8 <input checked="" type="checkbox"/>	Hands clean and properly washed			P/Pf	<input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Proper cooling time and temperatures	P	<input type="checkbox"/>		
9 <input checked="" type="checkbox"/>	No bare hand contact with RTE food or a pre-approved alternative procedure properly followed			P/Pf/C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	21 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Proper hot holding temperatures	P	<input type="checkbox"/>		
10 <input checked="" type="checkbox"/>	Adequate handwashing sinks, properly supplied/accessible			P/Pf	<input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Proper cold holding temperatures	P	<input type="checkbox"/>		
Approved Source												
11 <input checked="" type="checkbox"/>	Food obtained from approved source			P/Pf/C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	23 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Proper date marking and disposition	P	<input type="checkbox"/>		
12 <input checked="" type="checkbox"/>	Food received at proper temperature			P/Pf	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	24 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Time as a public health control: procedures and records	P/Pf/C	<input type="checkbox"/>		
13 <input checked="" type="checkbox"/>	Food in good condition, safe, and unadulterated			P/Pf	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Consumer Advisory						
14 <input checked="" type="checkbox"/>	Required records available: molluscan shellfish identification, parasite destruction			P/Pf/C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	25 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Consumer advisory provided: raw/undercooked food	Pf	<input type="checkbox"/>		
GOOD RETAIL PRACTICES												
<small>Mark OUT if numbered item is not in compliance V=violation type Mark in appropriate box for COS and/or R</small>												
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	OUT	V	COS	R						
Safe Food and Water												
30 <input type="checkbox"/>	Pasteurized eggs used where required			P	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	43 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	In-use utensils: properly stored	P	<input type="checkbox"/>		
31 <input type="checkbox"/>	Water and ice from approved source			P/Pf/C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	44 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Utensils/equipment/linens: properly stored, dried, & handled	Pf/C	<input type="checkbox"/>		
32 <input type="checkbox"/>	Variance obtained for specialized processing methods			Pf	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	45 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Single-use/single-service articles: properly stored & used	P	<input type="checkbox"/>		
Food Temperature Control												
33 <input checked="" type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control			P	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	46 <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Gloves used properly	C	<input type="checkbox"/>		
34 <input type="checkbox"/>	Plant food properly cooked for hot holding			Pf	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Utensils and Equipment						
35 <input type="checkbox"/>	Approved thawing methods used			P/I/C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	47 <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Food and non-food contact surfaces cleanable, properly designed, constructed, and used	P/Pf	<input type="checkbox"/>		
36 <input type="checkbox"/>	Thermometers provided and accurate			P/I/C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	48 <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available	Pf/C	<input type="checkbox"/>		
Food Identification												
37 <input checked="" type="checkbox"/>	Food properly labeled; original container			Pf	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	49 <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Non-food contact surfaces clean	C	<input type="checkbox"/>		
Prevention of Food Contamination												
38 <input type="checkbox"/>	Insects, rodents, and animals not present			Pf/C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Physical Facilities						
39 <input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage & display			P/Pf	<input checked="" type="checkbox"/>	50 <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Hot and cold water available; adequate pressure	Pf	<input type="checkbox"/>		
40 <input type="checkbox"/>	Personal cleanliness			P/I/C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	51 <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Plumbing installed; proper backflow devices	P/Pf/C	<input type="checkbox"/>		
41 <input type="checkbox"/>	Wiping cloths: properly used and stored			C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	52 <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Sewage and waste water properly disposed	P/Pf/C	<input type="checkbox"/>		
42 <input type="checkbox"/>	Washing fruits and vegetables			P/Pf/C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	53 <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Toilet facilities: properly constructed, supplied, & clean	Pf/C	<input type="checkbox"/>		
Permit Holder shall notify customers that a copy of the most recent inspection report is available.												
Violations documented							Date corrections due			#		
Priority Item Violations							COS			<input type="checkbox"/>		
Priority Foundation Item Violations							6/8/25			<input type="checkbox"/>		
Core Item Violations							9/8/25			<input type="checkbox"/>		
Risk Factor/Public Health Intervention Violations										<input type="checkbox"/>		
Repeat Risk Factor/Public Health Intervention Violations										<input type="checkbox"/>		
Good Retail Practices Violations										<input type="checkbox"/>		
Requires Reinspection - check box if you intend to reinspect										<input type="checkbox"/>		

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

LHD NVHD

Inspection Report Continuation Sheet

Page 2 of 2Date 6/8/25Establishment Focaccia's CafeTown Shelton

TEMPERATURE OBSERVATIONS					
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Salad Station	45°F	2nd Bm	38°F	Coffee unit	
- lettuce	44°F	- grilled chx	40°F	- Almond milk, Strawberries 41°F	
- grilled chicken	42°F	- mozz balls	36°F	Milk unit/milk	30°F
- breaded chicken	44°F	- Sliced tom	38°F	Ht - French on 156°F Broccoli 160°F	
Bm /reach-in	(48°F)	- Sliced Apple	40°F	Clam chowder 156°F	
Cheeses 39°F Tuna 48°F (long 50°F) in 10 min dropped 2°F more °F				Sliding unit	
grilled chx 48°F Ham 48°F (long 61°F)				- Eggs 36°F Turkey 36°F	
Pickles 60°F onions/peppers 64°F				- Cheese 38°F	

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.
	6/20/29
CFP#	6/20/29
	- Bledi Mujollarri, Adriana Bekiri Mujollarri
	Handsink - Signage✓, Hot H2O✓
	Sanitizer - Chlorine 3 Bay 80-100ppm✓, Bucket 50-100ppm✓
	Nitrile gloves✓, ice machine✓, probe thermometer✓, microwave✓
	Allergen Statement✓

- * C 43 Coffee spoons stored in stagnant water
- * C 45 Forks, knives, spoons (to go) should be inverted
- * C 33/41 Interior 2 dr reach-in (Salad Station) unclean | pooled water @ btm + coffee unit small amt of water @ btm + coffee unit ↳ have drain lines cleaned
- + C 16 Self serve Soda machine unclean
- pt 10 ✓ Handsink used for other purposes - ladel in sink - COS, PIC removed ✓
- pt 10/8 No handsoap @ handwashing sink @ Salad station / prep area - COS ✓
 - ↳ dispenser is broken, employees need to make sure they are using soap + washing between tasks (register) prep
- * C 37 Squeeze bottles @ cookline not labeled
- C 39 Knives stored in Salad @ Salad Station (Bm) - COS, removed ✓
- + C 47 Very dusty wire shelving over Soup Area
- * C 39, ~~Breakfast~~ Crutons + Cranberries not protected @ Salad area
- + P 22/pt Items in Bm/reach in across from cookline reading 39°F - 54°F → COS, PIC discarded
 - 33 pt ↳ make sure lids remain shut if items don't drop temp → remove
 - ↳ if this continues, have serviced ASAP, Food items should be 41°F or ↓ at all times, will be back w/ to check unit → * Service*
 - Food items @ main temp = moved other items to diff unit

Person in Charge (Signature)

Amanda RichterDate 6/8/25Date 6/8/25