Connecticut Department of Public Health

(e) 17												
Risk Category: 3 Food Estable	spe	ctic	on Re	port	Page 1	of						
Establishment type: ermanent Temporary Mobile Other					_	Date:	7/14/2	5				
Establishment Friendly'S		sections connecticus Healing			Time In	1215	AM/PM Time Out	AM/PM				
Address 130 Rubber Avenue		DPH)		1	LHD \	UHD						
Town/City DQUQQHUCK					Purpos	e of Inspection	: Routine F	re-op				
Permit Holder Stephen ndemba Connecticut of Publi				alth		Reinspe		Other				
FOODBORNE ILLNESS RISK F. Risk factors are important practices or procedures identified as the most prevalent cont									ness or injury.			
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				omplia			not in compliance		N/O=not observed			
P=Priority item Pf=Priority foundation item C=Core item V=violation type	CONTRACTOR CONTRACTOR	A STATE OF THE STA		Carlo				ted on-site during inspection	R=repeat violation			
IN QUT N/A N/O Supervision	V		R			N/A N/O		ion from Contamination	V COS R			
Person/Alternate Person in charge present						_	Food separated		P/C 0 0			
demonstrates knowledge and performs duties	Pf	0	\sim	16 👁	_	Y ()		urfaces: cleaned & sanitize	d P/Pf/C O O			
Certified Food Protection Manager for Classes 2,				47 0	50		Proper disposit	ion of returned, previously	POO			
2 8 0 0 3, & 4	С	0		17 🥏			served, recond	itioned, and unsafe food	POO			
Employee Health								ture Control for Safety				
Management, food employee and conditional employee;	P/Pf	0		18 🤇				time and temperatures	P/Pf/C O			
knowledge, responsibilities and reporting	F/FI			19 🤇				ng procedures for hot holding				
4 Proper use of restriction and exclusion	P	0			0/2			time and temperatures	POO			
Written procedures for responding to vomiting and	Pf	0			10			ling temperatures	POO			
diarrheal events	1			22 @				ding temperatures	POO			
Good Hygienic Practices	D/0			23 🛎	2	00		arking and disposition	P/Pf O O			
Proper eating, tasting, drinking, or tobacco products us No discharge from eyes, nose, and mouth		0	읙	24	5 0		21	ic health control: procedure	P/Pf/C			
7 No discharge from eyes, nose, and mouth Preventing Contamination by Hands	С	101	4	025000			and records	umer Advisory				
8 Hands clean and properly washed	P/Pf	101		25 💌	10			y provided: raw/undercooked for	od Pf OO			
No bare hand contact with RTE food or a	F/FI	1	쒸	25	10			ceptible Population				
pre-approved alternative procedure properly followed	P/Pf/C	0		26	10			used; prohibited foods not offere	d P/C			
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0		20	1	E		ves and Toxic Substance				
Approved Source	FIIC			27	1			approved and properly us				
11/O Food obtained from approved source	P/Pf/C	0	5		/		NAME AND ADDRESS OF TAXABLE PARTY.	es properly identified,				
Food received at proper temperature	P/Pf		3	28 2			stored & used	es property identified,	P/Pf/C			
Food in good condition, safe, and unadulterated	P/Pf	-	5	1800				ith Approved Procedures				
Required records available: molluscan shellfish	P/Pf/C	0		29 🤇		1		th variance/specialized	P/Pf/C O O			
identification, parasite destruction			$ \parallel$				process/ROP o	riteria/HACCP Plan	P/PI/C			
	OD RE											
Good Retail Practices are preventative measures to												
	n appro				_	or R		on-site during inspection	R=repeat violation			
OUT N/A N/O Safe Food and Water	V		R	OU				se of Utensils	V COS R			
30 Pasteurized eggs used where required	Р						sils: properly stor		C 0 0			
31 Water and ice from approved source	P/Pf/C				_			perly stored, dried, & handled				
32 Variance obtained for specialized processing methods	Pf	0	2		-			es: properly stored & used	P/C O O			
Food Temperature Control Proper cooling methods used; adequate equipment for		Т		40	GIC	ves use	d properly	s and Equipment	C O O			
temperature control	Pf/C	0			For	nd and n		surfaces cleanable,				
34 O Plant food properly cooked for hot holding	Pf	0	5	47 C			signed, construct		P/Pf/C			
35 O Approved thawing methods used	Pf/C		31					alled, maintained and used;				
36 Thermometers provided and accurate	Pf/C	-	511	48				and test strips available	Pf/C			
Food Identification	1			49 🤇			ontact surfaces of		C 00			
37 Food properly labeled; original container	Pf/C	0	5		TEL		Phys	sical Facilities				
Prevention of Food Contamination				50 🔾	Ho	t and col		; adequate pressure	Pf O O			
38 Insects, rodents, and animals not present	Pf/C	0	5	51 🤇	Plu	mbing ir	nstalled; proper b	ackflow devices	P/Pf/C O			
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0		52 ⊂	Se	wage an	d waste water pro	operly disposed	P/Pf/C O			
40 Personal cleanliness	Pf/C	0		53 ⊂				structed, supplied, & clean	Pf/C O			
41 Wiping cloths: properly used and stored	С		$\supseteq $	54 \subset				isposed; facilities maintained				
42 Washing fruits and vegetables	P/Pf/C	0	\supseteq					maintained, and clean	P/Pf/C O			
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable.						hting; designated areas us				
						docum		not used per CGS §19a-36 Date corrections du				
Person in Charge (Signature) Date	411 =	25				n Violatio		Date corrections du	#			
reison in charge (Signature)	-110	~/					Item Violations	LW -				
Person in Charge (Printed) Nicole Sheldon	200					Violation		_	_			
	1/2	5					Health Intervention	on Violations				
Inspector (Signature) A March Date / 14/29				Repeat Risk Factor/Public Health Intervention Violations								
Inspector (Printed) HMU DUYAW				Good Retail Practices Violations 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 Esta	ablishment Inspec	ction Repor	Page of	_				
LHD NV HD	Inspection Report Continuation Shee		Date 7/14/25)				
Establishment Priendlys Town Navatuck								
TEMPERATURE OBSERVATIONS								
Item/Location/Process Temp	Item/Location/Process		/Location/Process	Temp				
Hardsiny FOH 987	WIC amplent	43 F - Openin	1	Temp				
1000x +vidge, 381	Ve le di notore	Орени	9100009(1.01)					
marinara souce Ht 2015								
ChickensoupHIT 1887								
1 agor freezev IF								
1000 TYPETEN 4F								
simpodicionetal 431								
0	BSERVATIONS AND CORRECT	IVE ACTIONS						
	be corrected within the time frames below		-405.11 & 8-406.11 of the food	code.				
Number CFPM: M(OHC)	heldon (0/18/20	0						
1	110.0 3 1 0 10 30							
Hardery Hacker	V Clause V LA	lasar	2					
FUNDING STOCK	1 signage not		1 10 000					
Sanitzer qua	test s	trips 0	UCIVES 200 pp	m				
aines Doin	aloves	dishwo	isher in tem)				
Uthermomesen	Drobe in un	ite						
		Chimas						
I Ideally Card		Stamps						
* Produce midd	tof prep							
•								
ILLE CLEAM bay -	- POLY GLOVES I	abeling of	ate					
MENGER SHOPPIN	PhAL DIDDEN WI	PIO	- 10					
Mingons later	10111 DAPOTO							
12 - 12 00 1 20 000 12	du Oloman		dicco dod					
130 Der Hear Carr In	dry Storage (07 bic c	iscavato					
	. 0							
			2/11/	25				
Person in Charge (Signature)	(Mm		Date 7	0)				
Inspector (Signature) (MM)	ITOMO		Date ///4/7	5				