


Risk Category: <u>3</u>		<b>Food Establishment Inspection Report</b>		Page 1 of <u>2</u>	
Establishment type: <u>Permanent</u> Temporary Mobile Other			Date: <u>1/8/25</u>		
Establishment <u>Legends Pizzeria</u>			Time In <u>11:05</u> AM/PM Time Out <u>AM/PM</u>		
Address <u>888 Bridgeport Ave</u>			LHD <u>NVHD</u>		
Town/City <u>Shelton</u>			Purpose of Inspection: <u>Routine</u> Pre-op		
Permit Holder <u>Nikolai Kola</u>			Reinspection 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 appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation														
Supervision				Protection from Contamination				Time/Temperature Control for Safety						
IN	OUT	N/A	N/O	V	COS	R	IN	OUT	N/A	N/O	V	COS	R	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
1 Person/Alternate Person in charge present, demonstrates knowledge and performs duties							15 Food separated and protected					P/C	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 Certified Food Protection Manager for Classes 2, 3, & 4							16 Food-contact surfaces: cleaned & sanitized				<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
							<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
							17 Proper disposition of returned, previously served, reconditioned, and unsafe food				<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health														
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Management, food employee and conditional employee; knowledge, responsibilities and reporting							18 Proper cooking time and temperatures				<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 Proper use of restriction and exclusion							19 Proper reheating procedures for hot holding				<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5 Written procedures for responding to vomiting and diarrheal events							20 Proper cooling time and temperatures				<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices														
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6 Proper eating, tasting, drinking, or tobacco products use							21 Proper hot holding temperatures				<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7 No discharge from eyes, nose, and mouth							22 Proper cold holding temperatures				<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
Preventing Contamination by Hands														
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8 Hands clean and properly washed							23 Proper date marking and disposition				<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9 No bare hand contact with RTE food or a pre-approved alternative procedure properly followed							24 Time as a public health control: procedures and records				<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>								
10 Adequate handwashing sinks, properly supplied/accessible							Consumer Advisory							
Approved Source														
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11 Food obtained from approved source							25 Consumer advisory provided: raw/undercooked food				<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12 Food received at proper temperature							Highly Susceptible Population							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13 Food in good condition, safe, and unadulterated							26 Pasteurized foods used; prohibited foods not offered				<input type="checkbox"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>								
14 Required records available: molluscan shellfish identification, parasite destruction							Food/Color Additives and Toxic Substances							
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				Utensils and Equipment						
OUT	N/A	N/O	V	COS	R	OUT	V	COS	R	OUT	V	COS	R	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30 Pasteurized eggs used where required						43 In-use utensils: properly stored			<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31 Water and ice from approved source						44 Utensils/equipment/linens: properly stored, dried, & handled			<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32 Variance obtained for specialized processing methods						45 Single-use/single-service articles: properly stored & used			<input type="checkbox"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>		
Food Temperature Control								46 Gloves used properly			<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>									
33 Proper cooling methods used; adequate equipment for temperature control						Physical Facilities								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34 Plant food properly cooked for hot holding						47 Food and non-food contact surfaces cleanable, properly designed, constructed, and used			<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35 Approved thawing methods used						48 Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available			<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36 Thermometers provided and accurate						49 Non-food contact surfaces clean			<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>		
Food Identification														
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>									
37 Food properly labeled; original container						Prevention of Food Contamination								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>									
38 Insects, rodents, and animals not present						50 Hot and cold water available; adequate pressure			<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	51 Plumbing installed; proper backflow devices			<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>		
39 Contamination prevented during food preparation, storage & display						52 Sewage and waste water properly disposed			<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	53 Toilet facilities: properly constructed, supplied, & clean			<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>		
40 Personal cleanliness						54 Garbage and refuse properly disposed; facilities maintained			<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>	55 Physical facilities installed, maintained, and clean			<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>		
41 Wiping cloths: properly used and stored						56 Adequate ventilation and lighting; designated areas used			<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	Natural rubber latex gloves not used per CGS §19a-36f			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		
42 Washing fruits and vegetables						Violations documented				Date corrections due				
Permit Holder shall notify customers that a copy of the most recent inspection report is available.						Priority Item Violations <u>0</u>				# <u>0</u>				
Person in Charge (Signature) <u>[Signature]</u> Date <u>1/8/25</u>						Priority Foundation Item Violations <u>0</u>				# <u>0</u>				
Person in Charge (Printed) _____						Core Item Violations <u>4</u>				# <u>4</u>				
Inspector (Signature) <u>[Signature]</u> Date <u>1/8/25</u>						Risk Factor/Public Health Intervention Violations <u>1</u>				# <u>1</u>				
Inspector (Printed) <u>Amanda Richin</u>						Repeat Risk Factor/Public Health Intervention Violations <u>2</u>				# <u>2</u>				
						Good Retail Practices Violations <u>5</u>				# <u>5</u>				
						Requires Reinspection - check box if you intend to reinspect <u>  </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.



# Food Establishment Inspection Report

Page 2 of 2

LHD NVHD

Inspection Report Continuation Sheet

Date 1/8/25

Establishment Legends Pizzeria

Town Shelton

## TEMPERATURE OBSERVATIONS

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
ldr unit	38°F	Bm/reach-in	38°F	WIC	41°F
- Breaded raw cutlet <sup>chx</sup>	40°F	- Feta/Blue cheese crum	40°F	- ranch/BC dressing	39°F
- Chopped bacon	38°F	- Cucumbers	42°F	- milk	38°F
- mozz cheese	38°F	Sauce/dressing cooler	38°F	BOH coca cola unit	
Bm/reach-in		HH - sauce	142°F	- Savr oream/pepperoni	41°F
- Tomatoes (Sliced)/Chop	38°F	- Sausage/meatball	163°F		
- Cheese (Sliced)	39°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.
CFPM	- Nikoll Kolaj 9/30/25
	Handsink - Stocked ✓, Signage ✓, Hgt H2O 96°F
	Sanitizer - Chlorine Bucket 100 ppm ✓
	Consumer Advisory ✓, microware ✓, Deli Slicer ✓, Vinyl gloves ✓
	dry Storage ✓, can blade ✓
	* make sure everything is being labeled
	Very Clean Floors/walls ✓ 😊
	Allergen Statement on menu! ✓ 😊
37 ✓	<del>No Allergen Statement posted - Provided NVHD example</del>
C 49	hoods + baffles unclean / lots of buildup
C 47 ✓	Interior of white Kenmore freezer unclean
C 47	Bain Marie lid handle disrepair/missing
C 47 ✓	Defective chest freezer BOH
	* Provided <del>poster</del> Allergen Poster for Kitchen Staff

Person in Charge (Signature) [Signature]

Date 1/8/25

Inspector (Signature) Amanda Richin

Date 1/8/25