

5318

Connecticut Department of Public Health

EHS-108 Rev. 2/16/23

Risk Category:	Food Establishment Inspection Report										Page 1 of <u>2</u>				
Establishment type	Permanent	Temporary	Mobile	Other											
Establishment	New China Sea						Date: <u>11/18/25</u>								
Address	25 Maple St						Time In <u>10:40</u> AM/PM		Time Out <u>11:30</u> AM/PM						
Town/City	Ansonia						LHD <u>NVHD</u>		Purpose of Inspection: <u>Routine</u>				Pre-op		
Permit Holder	Qiu Yang						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				V	COS	R	Protection from Contamination				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"/>	Food separated and protected	P/C	<input type="checkbox"/>	<input type="checkbox"/>	
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"/>	Food-contact surfaces: cleaned & sanitized	P/Pf/C	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Employee Health				Proper disposition of returned, previously served, reconditioned, and unsafe food									P	<input type="checkbox"/>	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Management, food employee and conditional employee; knowledge, responsibilities and reporting			P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooking time and temperatures	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper use of restriction and exclusion			P	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper reheating procedures for hot holding	P	<input type="checkbox"/>	<input type="checkbox"/>	
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written procedures for responding to vomiting and diarrheal events			Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cooling time and temperatures	P	<input type="checkbox"/>	<input type="checkbox"/>	
Good Hygienic Practices				Proper hot holding temperatures									P	<input type="checkbox"/>	<input type="checkbox"/>
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking, or tobacco products use			P/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper cold holding temperatures	P	<input type="checkbox"/>	<input type="checkbox"/>	
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose, and mouth			C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper date marking and disposition	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	
Preventing Contamination by Hands				Time as a public health control: procedures and records									P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hands clean and properly washed			P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer advisory provided: raw/undercooked food	Pf	<input type="checkbox"/>	<input type="checkbox"/>	
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	Highly Susceptible Population	P/C	<input type="checkbox"/>	<input type="checkbox"/>	
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Adequate handwashing sinks, properly supplied/accessible			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food/Color Additives and Toxic Substances	P	<input type="checkbox"/>	<input type="checkbox"/>	
Approved Source				Food additives: approved and properly used									P	<input type="checkbox"/>	<input type="checkbox"/>
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toxic substances properly identified, stored & used	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	
12	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food received at proper temperature			P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Conformance with Approved Procedures	P	<input type="checkbox"/>	<input type="checkbox"/>	
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe, and unadulterated			P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compliance with variance/specialized process/ROP criteria/HACCP Plan	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	
14	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Required records available: molluscan shellfish identification, parasite destruction			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GOOD RETAIL PRACTICES	P	<input type="checkbox"/>	<input type="checkbox"/>	
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.															
Safe Food and Water				V	COS	R	Proper Use of Utensils				V	COS	R		
30	<input type="checkbox"/>	Pasteurized eggs used where required			P	<input type="checkbox"/>	<input type="checkbox"/>	43	<input type="checkbox"/>	In-use utensils: properly stored			C	<input type="checkbox"/>	<input type="checkbox"/>
31	<input type="checkbox"/>	Water and ice from approved source			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	44	<input type="checkbox"/>	Utensils/equipment/linens: properly stored, dried, & handled			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
32	<input type="checkbox"/>	<input type="checkbox"/>	Variance obtained for specialized processing methods		Pf	<input type="checkbox"/>	<input type="checkbox"/>	45	<input type="checkbox"/>	Single-use/single-service articles: properly stored & used			P/C	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control				Gloves used properly									C	<input type="checkbox"/>	<input type="checkbox"/>
33	<input type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	Utensils and Equipment							
34	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	47	<input checked="" type="checkbox"/>	Food and non-food contact surfaces cleanable, properly designed, constructed, and used			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
35	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	48	<input type="checkbox"/>	Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
36	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	49	<input checked="" type="checkbox"/>	Non-food contact surfaces clean			C	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification				Physical Facilities											
37	<input type="checkbox"/>	Food properly labeled; original container			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	50	<input type="checkbox"/>	Hot and cold water available; adequate pressure			Pf	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination				Plumbing installed; proper backflow devices									P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
38	<input checked="" type="checkbox"/>	Insects, rodents, and animals not present			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	51	<input type="checkbox"/>	Sewage and waste water properly disposed			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
39	<input type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage & display		P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	52	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied, & clean			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
40	<input type="checkbox"/>	Personal cleanliness			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	53	<input type="checkbox"/>	Garbage and refuse properly disposed; facilities maintained			C	<input type="checkbox"/>	<input type="checkbox"/>
41	<input type="checkbox"/>	Wiping cloths: properly used and stored			C	<input type="checkbox"/>	<input type="checkbox"/>	54	<input type="checkbox"/>	Physical facilities installed, maintained, and clean			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
42	<input type="checkbox"/>	Washing fruits and vegetables			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	55	<input type="checkbox"/>	Adequate ventilation and lighting; designated areas used			C	<input type="checkbox"/>	<input type="checkbox"/>
Natural rubber latex gloves not used per CGS § 19a-36f															
Violations documented Date corrections due #															
Priority Item Violations <u>1/20/25</u> 1															
Priority Foundation Item Violations <u>1/20/25</u> 3															
Core Item Violations <u>1/20/25</u> 10															
Risk Factor/Public Health Intervention Violations <u>1/20/25</u> 2															
Repeat Risk Factor/Public Health Intervention Violations <u>1/20/25</u> 2															
Good Retail Practices Violations <u>1/20/25</u> 5															
Requires Reinspection - check box if you intend to reinspect <u>NO</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.															

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Food Establishment Inspection Report

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Inspection Report Continuation Sheet

Date 11/18/25Establishment New China SeaTown Ansonia

TEMPERATURE OBSERVATIONS

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Wanton / Steam table	133°F				
Raw chicken / Bin - marin	41°F				
Shrimp / Walk-in	41°F				
Chicken wings / Walk-in	42°F				
Egg rolls / Walk-in	42°F				
Chicken caesar / walk-in	42°F				
Rice / rice warmer	155°F				
Beef cubes / walk-in	42°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 - ON-SITE - Q14 y/mo

P 28 - cleaner spray next to chicken cooling - COS - move sprayer

PF 28 - unlabeled spray storing cleaning chemical

C 47 - using cardboard as shelf liner

C 47 - home style cooler storing food - non-commercial

PF 36 - No thermometer in cooler

C 49 - Hood unclean

PF16/47C unclean and gouge cutting boards - COS removed gouge boards

C 38 - under door, Exit door opening on the bottom

C 51 - No mop sink

C 38 - Bug strips in food prep area - COS - removed bug strip

C 38 - mouse droppings near rice bugs -

C 47 - using soda crate as shelving

C 47 - bare wood shelving for dry storage

OH - observed bathroom

OH - observed dumpster

OH - observed pest control last treated 10/24/25

OH - observed clean floors in cooking

Person in Charge (Signature)

Reiniger

Date

11/18/25

Inspector (Signature)

Mark

Date

11/18/25