

2492

## Connecticut Department of Public Health

EHS-108 Rev. 2/16/23

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>9/4/25</u>			
Establishment: <u>Pancho Mexican Grill</u>		Time In: <u>10:55</u> AM/PM Time Out: <u>11:48</u> AM/PM			
Address: <u>704 Bridgeport</u>		LHD: <u>NAHS</u>			
Town/City: <u>Shelton</u>		Purpose of Inspection: <u>Routine</u> Pre-op			
Permit Holder: <u>Lou Kuthrakis</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						
IN	OUT	N/A	N/O	V	COS	R	IN	OUT	N/A	N/O	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"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>	
Person/Alternate Person in charge present, demonstrates knowledge and performs duties								Food separated and protected						
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"/>	P/P/C	<input type="checkbox"/>	<input type="checkbox"/>	
Certified Food Protection Manager for Classes 2, 3, & 4								Food-contact surfaces: cleaned & sanitized						
								Proper disposition of returned, previously served, reconditioned, and unsafe food						
				Employee Health				Time/Temperature Control for Safety						
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	
Management, food employee and conditional employee; knowledge, responsibilities and reporting								Proper cooking time and temperatures						
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>	19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>	
Proper use of restriction and exclusion								Proper reheating procedures for hot holding						
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>	
Written procedures for responding to vomiting and diarrheal events								Proper cooling time and temperatures						
								Proper hot holding temperatures						
				Good Hygienic Practices				Consumer Advisory						
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>	23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	
Proper eating, tasting, drinking, or tobacco products use								Proper date marking and disposition						
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>	24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	
No discharge from eyes, nose, and mouth								Time as a public health control: procedures and records						
				Preventing Contamination by Hands				Highly Susceptible Population						
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	
Hands clean and properly washed								Consumer advisory provided: raw/undercooked food						
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>	
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed								Pasteurized foods used; prohibited foods not offered						
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	Food/Color Additives and Toxic Substances							
Adequate handwashing sinks, properly supplied/accessible								27	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
				Approved Source				Food additives: approved and properly used						
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	28	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	
Food obtained from approved source								Toxic substances properly identified, stored & used						
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	Conformance with Approved Procedures							
Food received at proper temperature								29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	Compliance with variance/specialized process/ROP criteria/HACCP Plan							
Food in good condition, safe, and unadulterated														
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>								
Required records available: molluscan shellfish identification, parasite destruction														

  

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			
OUT	N/A	N/O	V	COS	R	OUT	V	COS	R		
30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>	43	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Pasteurized eggs used where required						In-use utensils: properly stored			C		
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	44	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Water and ice from approved source						Utensils/equipment/linens: properly stored, dried, & handled			P/C		
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	45	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Variance obtained for specialized processing methods						Single-use/single-service articles: properly stored & used			P/C		
				Food Temperature Control				Utensils and Equipment			
33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	46	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Proper cooling methods used; adequate equipment for temperature control						Gloves used properly			C		
34	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	47	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Plant food properly cooked for hot holding						Food and non-food contact surfaces cleanable, properly designed, constructed, and used			P/Pf/C		
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	48	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Approved thawing methods used						Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available			P/C		
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	49	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Thermometers provided and accurate						Non-food contact surfaces clean			C		
				Food Identification				Physical Facilities			
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Food properly labeled; original container						Hot and cold water available; adequate pressure			Pf		
				Prevention of Food Contamination				Plumbing installed; proper backflow devices			
38	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	51	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Insects, rodents, and animals not present						Sewage and waste water properly disposed			P/Pf/C		
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	52	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Contamination prevented during food preparation, storage & display						Toilet facilities: properly constructed, supplied, & clean			Pf/C		
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	53	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Personal cleanliness						Garbage and refuse properly disposed; facilities maintained			C		
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	54	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Wiping cloths: properly used and stored						Physical facilities installed, maintained, and clean			P/Pf/C		
42	<input checked="" type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	55	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Washing fruits and vegetables						Adequate ventilation and lighting; designated areas used			C		
								Natural rubber latex gloves not used per CGS §19a-36f			

  

Permit Holder shall notify customers that a copy of the most recent inspection report is available.		
Person in Charge (Signature): <u>Meryl Lucas</u>	Date: <u>9/4/25</u>	
Person in Charge (Printed): <u>MERYL LUCAS</u>		
Inspector (Signature): <u>Michael Delosantos</u>	Date: <u>9/4/25</u>	
Inspector (Printed): <u>Michael Delosantos</u>		

  

Violations documented	Date corrections due	#
Priority Item Violations		2
Priority Foundation Item Violations	<u>9/18/25</u>	2
Core Item Violations	<u>12/4/25</u>	3
Risk Factor/Public Health Intervention Violations		2
Repeat Risk Factor/Public Health Intervention Violations		1
Good Retail Practices Violations		4
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.



# Food Establishment Inspection Report

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LHD NVHD

Inspection Report Continuation Sheet

Date 9/4/25

Establishment Punchero Grill

Town Shelton

## TEMPERATURE OBSERVATIONS

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Beans/Steamtable	148°F				
steak/ " "	140°F				
Pork/ " "	145°F				
Pico de gallo/salad bar	42°F				
Raw chicken/walk-in	43°F				
Tomatoes/salad bar	42°F				

## OBSERVATIONS AND CORRECTIVE ACTIONS

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.

Item Number

CFPM - ON-site merlyn lucas

OK - 3 bay Sanitizer at 200ppm quat

P 21 - Rice in steam table at 115°F - COS CFPM discard Rice and replace rice at 148°F

P 22 - Salad bar at service line temp of cheese at 45°F - COS CFPM removed cheese and replace cheese with 41°F

PF 33 - Walk-in cooler ambient temp at 45°F

PF 48 - Bleach store in spray bottle concentration High - COS - CFPM change sanitizer bleach to 100ppm

C 41 - using wet cloth underneath cutting board

C 47 - using milk crates as shelving

C 49 - Soda dispenser nozzle holder unclean

OK - observed handwashing

OK - bathroom, Trash bin OKay

Person in Charge (Signature)

merlyn lucas

Date

9/4/25

Inspector (Signature)

Date

9/4/25