

4777

## Connecticut Department of Public Health

EHS-108 Rev. 2/16/23

Risk Category: <b>4</b>		<b>Food Establishment Inspection Report</b>		Page 1 of <b>2</b>	
Establishment type: Permanent Temporary Mobile Other _____			Date: <b>5/14/25</b>		
Establishment <b>Sushi &amp; Wok</b>			Time In <b>11:15</b> AM/PM Time Out _____ AM/PM		
Address <b>172 North Street #4</b>			LHD <b>NVHD</b>		
Town/City <b>Seymour</b>			Purpose of Inspection: Routine Pre-op		
Permit Holder <b>Ju Zheng</b>			Reinspection _____ Other _____		
<b>FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS</b>					
<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>					
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					
IN OUT N/A N/O		Supervision		IN OUT N/A N/O Protection from Contamination	
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Person/Alternate Person in charge present, demonstrates knowledge and performs duties	15	<input checked="" type="checkbox"/>
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Certified Food Protection Manager for Classes 2, 3, & 4	16	<input checked="" type="checkbox"/>
				17	<input checked="" type="checkbox"/>
				Time/Temperature Control for Safety	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Management, food employee and conditional employee; knowledge, responsibilities and reporting	18	<input checked="" type="checkbox"/>
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper use of restriction and exclusion	19	<input checked="" type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Written procedures for responding to vomiting and diarrheal events	20	<input checked="" type="checkbox"/>
				21	<input checked="" type="checkbox"/>
				22	<input checked="" type="checkbox"/>
				23	<input checked="" type="checkbox"/>
				24	<input checked="" type="checkbox"/>
				Consumer Advisory	
				25	<input checked="" type="checkbox"/>
				Highly Susceptible Population	
				26	<input checked="" type="checkbox"/>
				Food/Color Additives and Toxic Substances	
				27	<input checked="" type="checkbox"/>
				28	<input checked="" type="checkbox"/>
				Conformance with Approved Procedures	
				29	<input checked="" type="checkbox"/>
<b>GOOD RETAIL PRACTICES</b>					
<small>Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.</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		Safe Food and Water		OUT Proper Use of Utensils	
30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required	43	<input checked="" type="checkbox"/>
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source	44	<input checked="" type="checkbox"/>
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Variance obtained for specialized processing methods	45	<input checked="" type="checkbox"/>
				46	<input checked="" type="checkbox"/>
				Utensils and Equipment	
				47	<input checked="" type="checkbox"/>
				48	<input checked="" type="checkbox"/>
				49	<input checked="" type="checkbox"/>
				Physical Facilities	
				50	<input checked="" type="checkbox"/>
				51	<input checked="" type="checkbox"/>
				52	<input checked="" type="checkbox"/>
				53	<input checked="" type="checkbox"/>
				54	<input checked="" type="checkbox"/>
				55	<input checked="" type="checkbox"/>
				56	<input checked="" type="checkbox"/>
				Violations documented	
				Date corrections due	
				#	
				COS	
				8/14/25	
				1	
				22	
				-	
Permit Holder shall notify customers that a copy of the most recent inspection report is available.					
Person in Charge (Signature) <b>Ju Zheng</b>			Date <b>5/14/25</b>		
Person in Charge (Printed) <b>Ju Zheng</b>					
Inspector (Signature) <b>Amy Durand</b>			Date <b>5/14/25</b>		
Inspector (Printed) <b>Amy Durand</b>					
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 5/14/25

Establishment Sushi + Wok

Town Seymour

## TEMPERATURE OBSERVATIONS

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
BoH Handsink	90°F	wic ambient	39°F		
White rice #H	153°F	raw chx wic	38°F		
Sweetn sour Sauce	135°F	1 door freezer	7°F		
raw beef ch	39°F	1 door freezer	6°F		
cooked chx ch	39°F				
cooked Shrimp	38°F				
Diced mushrooms	38°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	Observations and Corrective Actions
	CFPM: JV Zheng 2/28/28
	Handsink stocked ✓ signage ✓ not h2o ✓
	nitrile gloves ✓ hoods good ✓
	Spices labeled ✓ thermometers ✓
	Sanitizer bleach test strips ✓ DPH allergen poster ✓
	Allergen Statements on menus ✓
	Dry Storage good cans ok
rv 28p	Sanitizer bucket reading 0 ppm cos remake 50ppm
rv 15p	chx stored over seafood in wic cos pic rearranged
rv 37c	food out of original containers not labeled
*	no longer doing Sushi
*	rv = repeat violations

Person in Charge (Signature)   
 Inspector (Signature) Amy Duvon

Date 5/14/25  
 Date 5/14/25