

4335

Risk Category: 3	Food Establishment Inspection Report	Page 1 of 2
Establishment type: Permanent Temporary Mobile Other	Date: 4/2/20 Time In: 11:15 AM/PM Time Out: 11:55 AM/PM LHD: NVHD Purpose of Inspection: Routine Pre-op Reinspection Other	
Establishment: Zin-fandeli's		
Address: 6 Corporate Drive		
Town/City: Shelton		
Permit Holder: Sandra Romero-Paez		

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

P	IN	OUT	N/A	N/O	Supervision	V	COS	R	IN	OUT	N/A	N/O	Protection from Contamination	V	COS	R
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Food separated and protected	P/C		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Certified Food Protection Manager for Classes 2, 3, & 4	C			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Food-contact surfaces: cleaned & sanitized	P/Pf/C		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Proper disposition of returned, previously served, reconditioned, and unsafe food	P		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Proper use of restriction and exclusion	P			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Proper cooking time and temperatures	P/Pf/C		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Written procedures for responding to vomiting and diarrheal events	Pf			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Proper reheating procedures for hot holding	P		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Proper eating, tasting, drinking, or tobacco products use	P/C			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Proper cooling time and temperatures	P		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			No discharge from eyes, nose, and mouth	C			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Proper hot holding temperatures	P		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Hands clean and properly washed	P/Pf			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Proper cold holding temperatures	P		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Proper date marking and disposition	P/Pf		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Adequate handwashing sinks, properly supplied/accessible	Pf/C			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Time as a public health control: procedures and records	P/Pf/C		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Food obtained from approved source	P/Pf/C			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Consumer advisory provided: raw/undercooked food	Pf		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Food received at proper temperature	P/Pf			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Highly Susceptible Population			
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Food in good condition, safe, and unadulterated	P/Pf			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Pasteurized foods used; prohibited foods not offered	P/C		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Food/Color Additives and Toxic Substances			
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Food additives: approved and properly used	P		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Toxic substances properly identified, stored & used	P/Pf/C		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Conformance with Approved Procedures			
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			Compliance with variance/specialized process/ROP criteria/HACCP Plan	P/Pf/C		

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

OUT	N/A	N/O	Safe Food and Water	V	COS	R	OUT	Proper Use of Utensils	V	COS	R
<input checked="" type="checkbox"/>			Pasteurized eggs used where required	P			<input checked="" type="checkbox"/>	In-use utensils: properly stored	C		
<input checked="" type="checkbox"/>			Water and ice from approved source	P/Pf/C			<input checked="" type="checkbox"/>	Utensils/equipment/linens: properly stored, dried, & handled	Pf/C		
<input checked="" type="checkbox"/>			Variance obtained for specialized processing methods	Pf			<input checked="" type="checkbox"/>	Single-use/single-service articles: properly stored & used	P/C		
			Proper cooling methods used; adequate equipment for temperature control	Pf/C			<input checked="" type="checkbox"/>	Gloves used properly	C		
			Plant food properly cooked for hot holding	Pf			<input checked="" type="checkbox"/>	Utensils and Equipment			
			Approved thawing methods used	Pf/C			<input checked="" type="checkbox"/>	Food and non-food contact surfaces cleanable, properly designed, constructed, and used	P/Pf/C		
			Thermometers provided and accurate	Pf/C			<input checked="" type="checkbox"/>	Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available	Pf/C		
			Food properly labeled; original container	Pf/C			<input checked="" type="checkbox"/>	Non-food contact surfaces clean	C		
			Insects, rodents, and animals not present	Pf/C			<input checked="" type="checkbox"/>	Physical Facilities			
			Contamination prevented during food preparation, storage & display	P/Pf/C			<input checked="" type="checkbox"/>	Hot and cold water available; adequate pressure	Pf		
			Personal cleanliness	Pf/C			<input checked="" type="checkbox"/>	Plumbing installed; proper backflow devices	P/Pf/C		
			Wiping cloths: properly used and stored	C			<input checked="" type="checkbox"/>	Sewage and waste water properly disposed	P/Pf/C		
			Washing fruits and vegetables	P/Pf/C			<input checked="" type="checkbox"/>	Toilet facilities: properly constructed, supplied, & clean	Pf/C		
							<input checked="" type="checkbox"/>	Garbage and refuse properly disposed; facilities maintained	C		
							<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean	P/Pf/C		
							<input checked="" type="checkbox"/>	Adequate ventilation and lighting; designated areas used	C		
							<input checked="" type="checkbox"/>	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): <i>Sandra Romero-Paez</i>	Date: 4-2-20
Person in Charge (Printed): SANDRA ROMERO-PAEZ	
Inspector (Signature): <i>Amy Durand</i>	Date: 4/2/20
Inspector (Printed): Amy Durand	

Violations documented	Date corrections due	#
Priority Item Violations		
Priority Foundation Item Violations		
Core Item Violations		
Risk Factor/Public Health Intervention Violations		
Repeat Risk Factor/Public Health Intervention Violations		
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.

