

5776

Connecticut Department of Public Health

EHS-108 Rev. 2/16/23

Risk Category: 3		Food Establishment Inspection Report		Page 1 of 2	
Establishment type: Permanent Temporary Mobile Other		Date: 6/10/25		Time In 1:00 AM/PM Time Out 1:30 AM/PM	
Establishment Breeze Latin Fusion Cuisine		LHD NUHD		Purpose of Inspection: Routine Pre-op	
Address 470 Howe ave		Reinspection		Other	
Town/City Shelton		Permit Holder		Kuatro Brothers Enterprise LLC - Robert James	
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					
IN OUT N/A N/O		Supervision		V COS R	
1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	<input type="checkbox"/>
2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Certified Food Protection Manager for Classes 2, 3, & 4	C	<input type="checkbox"/>
IN OUT N/A N/O		Employee Health		V COS R	
3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	<input type="checkbox"/>
4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Proper use of restriction and exclusion	P	<input type="checkbox"/>
5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Written procedures for responding to vomiting and diarrheal events	Pf	<input type="checkbox"/>
IN OUT N/A N/O		Good Hygienic Practices		V COS R	
6	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Proper eating, tasting, drinking, or tobacco products use	P/C	<input type="checkbox"/>
7	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	No discharge from eyes, nose, and mouth	C	<input type="checkbox"/>
IN OUT N/A N/O		Preventing Contamination by Hands		V COS R	
8	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Hands clean and properly washed	P/Pf	<input type="checkbox"/>
9	<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 type="checkbox"/>
10	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Adequate handwashing sinks, properly supplied/accessible	Pf/C	<input type="checkbox"/>
IN OUT N/A N/O		Approved Source		V COS R	
11	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Food obtained from approved source	P/Pf/C	<input type="checkbox"/>
12	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Food received at proper temperature	P/Pf	<input type="checkbox"/>
13	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Food in good condition, safe, and unadulterated	P/Pf	<input type="checkbox"/>
14	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	<input type="checkbox"/>
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	
30	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized eggs used where required	P	<input type="checkbox"/>
31	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Water and ice from approved source	P/Pf/C	<input type="checkbox"/>
32	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Variance obtained for specialized processing methods	Pf	<input type="checkbox"/>
IN OUT N/A N/O		Food Temperature Control		V COS R	
33	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling methods used; adequate equipment for temperature control	Pf/C	<input type="checkbox"/>
34	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Plant food properly cooked for hot holding	Pf	<input type="checkbox"/>
35	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Approved thawing methods used	Pf/C	<input type="checkbox"/>
36	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Thermometers provided and accurate	Pf/C	<input type="checkbox"/>
IN OUT N/A N/O		Food Identification		V COS R	
37	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Food properly labeled; original container	Pf/C	<input type="checkbox"/>
IN OUT N/A N/O		Prevention of Food Contamination		V COS R	
38	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Insects, rodents, and animals not present	Pf/C	<input type="checkbox"/>
39	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Contamination prevented during food preparation, storage & display	P/Pf/C	<input type="checkbox"/>
40	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Personal cleanliness	Pf/C	<input type="checkbox"/>
41	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Wiping cloths: properly used and stored	C	<input type="checkbox"/>
42	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Washing fruits and vegetables	P/Pf/C	<input type="checkbox"/>
Permit Holder shall notify customers that a copy of the most recent inspection report is available.					
Person in Charge (Signature)		Date June 10, 2025			
Person in Charge (Printed)					
Inspector (Signature) Amanda Ruchin		Date 6/10/25			
Inspector (Printed) Amanda Ruchin					
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.					

Protection from Contamination		V COS R			
15	Food separated and protected	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
16	Food-contact surfaces: cleaned & sanitized	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
17	Proper disposition of returned, previously served, reconditioned, and unsafe food	<input type="checkbox"/>	<input type="checkbox"/>		
IN OUT N/A N/O		Time/Temperature Control for Safety		V COS R	
18	Proper cooking time and temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
19	Proper reheating procedures for hot holding	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
20	Proper cooling time and temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
21	Proper hot holding temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
22	Proper cold holding temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
23	Proper date marking and disposition	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
24	Time as a public health control: procedures and records	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
IN OUT N/A N/O		Consumer Advisory		V COS R	
25	Consumer advisory provided: raw/undercooked food	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
IN OUT N/A N/O		Highly Susceptible Population		V COS R	
26	Pasteurized foods used; prohibited foods not offered	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
IN OUT N/A N/O		Food/Color Additives and Toxic Substances		V COS R	
27	Food additives: approved and properly used	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
28	Toxic substances properly identified, stored & used	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
IN OUT N/A N/O		Conformance with Approved Procedures		V COS R	
29	Compliance with variance/specialized process/ROP criteria/HACCP Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>		

Proper Use of Utensils		V COS R			
43	In-use utensils: properly stored	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
44	Utensils/equipment/linens: properly stored, dried, & handled	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
45	Single-use/single-service articles: properly stored & used	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
46	Gloves used properly	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
IN OUT N/A N/O		Utensils and Equipment		V COS R	
47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
48	Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
49	Non-food contact surfaces clean	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
IN OUT N/A N/O		Physical Facilities		V COS R	
50	Hot and cold water available; adequate pressure	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
51	Plumbing installed; proper backflow devices	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
52	Sewage and waste water properly disposed	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
53	Toilet facilities: properly constructed, supplied, & clean	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
54	Garbage and refuse properly disposed; facilities maintained	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
55	Physical facilities installed, maintained, and clean	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
56	Adequate ventilation and lighting; designated areas used	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
	Natural rubber latex gloves not used per CGS §19a-36f	<input checked="" type="checkbox"/>	<input type="checkbox"/>		

Violations documented	Date corrections due	#
Priority Item Violations	COS	1
Priority Foundation Item Violations	9/10/25	2
Core Item Violations		1
Risk Factor/Public Health Intervention Violations		1
Repeat Risk Factor/Public Health Intervention Violations		1
Good Retail Practices Violations		2
Requires Reinspection - check box if you intend to reinspect		

Food Establishment Inspection Report

Page 2 of 2

LHD NVHD

Inspection Report Continuation Sheet

Date 6/10/25

Establishment Breeze Latin Fusion Town Shelton

TEMPERATURE OBSERVATIONS

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
HH - Brown/Black Beans	179°F	2 dr unit	33°F	Bm/reach in	31°F
white rice (in cooker)	211°F	- rice, sourcream, mozz	41°F	- pico	38°F
WIC	37°F	WIF	25°F	- pineapple	38°F
- pico	38°F			- Sliced/diced tom	38°F
- marinara	35°F			Bm/reach @ cookline	
- garlic	38°F			potatoes 38°F	Cheese 38°F
				and - Shrimp 38°F	
				- raw meat 38°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.
	11/21/27 11/21/27
C 49	CFPM - maria Pinillos Vilela, Ingrid James
	Handsink - Hot H2O, Stocked, signage ✓
	Sanitizer - Quat 3 Bay 300ppm ✓, Dishmachine Chlorine 50-100ppm ✓
	Bar Area ✓, HW Signage ✓, Allergen poster ✓, vinyl gloves ✓
	Ice machine ✓, date marking ✓
	Sanitizer Test Strips ✓, Shellfish tags ✓, Deli slicer ✓
	BSMT Dry Storage OK ✓

- C 49 Handle on chest freezer in disrepair
 C 55 mop stored in bucket → hang to dry
 P 15 Eggs stored over RTE churros - COS ✓

Person in Charge (Signature)

Jun 10, 2025

Date

Inspector (Signature)

Amanda Perkin

Date

6/10/25