

Enaida Cipriano

Connecticut Department of Public Health

EHS-108 Rev. 2/16/23

| | | | | | |
|---|--|---|--|--------------------|--|
| Risk Category: <u>3</u> | | Food Establishment Inspection Report | | Page 1 of <u>2</u> | |
| Establishment type: <u>Permanent</u> Temporary Mobile Other | | | Date: <u>6/27/25</u> | | |
| Establishment: <u>Fatty Patty</u> | | | Time In: <u>1100</u> AM/PM Time Out: <u>1135</u> AM/PM | | |
| Address: <u>702 Linden</u> | | | LHD: <u>NVH</u> | | |
| Town/City: <u>Shelton #5780</u> | | | Purpose of Inspection: <u>Routine</u> Pre-op | | |
| Permit Holder | | | 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 |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1 Person/Alternate Person in charge present, demonstrates knowledge and performs duties | | | | 15 Food separated and protected P/C | | | | | | | | | |
| 2 Certified Food Protection Manager for Classes 2, 3, & 4 | | | | 16 Food-contact surfaces: cleaned & sanitized P/Pf/C | | | | | | | | | |
| | | | | 17 Proper disposition of returned, previously served, reconditioned, and unsafe food P | | | | | | | | | |
| Employee Health | | | | Time/Temperature Control for Safety | | | | | | | | | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3 Management, food employee and conditional employee; knowledge, responsibilities and reporting | | | | 18 Proper cooking time and temperatures P/Pf/C | | | | | | | | | |
| 4 Proper use of restriction and exclusion | | | | 19 Proper reheating procedures for hot holding P | | | | | | | | | |
| 5 Written procedures for responding to vomiting and diarrheal events | | | | 20 Proper cooling time and temperatures P | | | | | | | | | |
| | | | | 21 Proper hot holding temperatures P | | | | | | | | | |
| | | | | 22 Proper cold holding temperatures P | | | | | | | | | |
| Good Hygienic Practices | | | | Consumer Advisory | | | | | | | | | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6 Proper eating, tasting, drinking, or tobacco products use | | | | 23 Proper date marking and disposition P/Pf | | | | | | | | | |
| 7 No discharge from eyes, nose, and mouth | | | | 24 Time as a public health control: procedures and records P/Pf/C | | | | | | | | | |
| Preventing Contamination by Hands | | | | Highly Susceptible Population | | | | | | | | | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8 Hands clean and properly washed | | | | 25 Consumer advisory provided: raw/undercooked food Pf | | | | | | | | | |
| 9 No bare hand contact with RTE food or a pre-approved alternative procedure properly followed | | | | 26 Pasteurized foods used; prohibited foods not offered P/C | | | | | | | | | |
| 10 Adequate handwashing sinks, properly supplied/accessible | | | | Food/Color Additives and Toxic Substances | | | | | | | | | |
| Approved Source | | | | Conformance with Approved Procedures | | | | | | | | | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 11 Food obtained from approved source | | | | 27 Food additives: approved and properly used P | | | | | | | | | |
| 12 Food received at proper temperature | | | | 28 Toxic substances properly identified, stored & used P/Pf/C | | | | | | | | | |
| 13 Food in good condition, safe, and unadulterated | | | | 29 Compliance with variance/specialized process/ROP criteria/HACCP Plan P/Pf/C | | | | | | | | | |
| 14 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 | | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| 30 Pasteurized eggs used where required | | | P | | | 43 In-use utensils: properly stored | | | C | | |
| 31 Water and ice from approved source | | | P/Pf/C | | | 44 Utensils/equipment/linens: properly stored, dried, & handled | | | Pf/C | | |
| 32 Variance obtained for specialized processing methods | | | Pf | | | 45 Single-use/single-service articles: properly stored & used | | | P/C | | |
| | | | | | | 46 Gloves used properly | | | C | | |
| Food Temperature Control | | | | | | Utensils and Equipment | | | | | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| 33 Proper cooling methods used; adequate equipment for temperature control | | | Pf/C | | | 47 Food and non-food contact surfaces cleanable, properly designed, constructed, and used | | | P/Pf/C | | |
| 34 Plant food properly cooked for hot holding | | | Pf | | | 48 Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available | | | Pf/C | | |
| 35 Approved thawing methods used | | | Pf/C | | | 49 Non-food contact surfaces clean | | | C | | |
| 36 Thermometers provided and accurate | | | Pf/C | | | Physical Facilities | | | | | |
| Food Identification | | | | | | 50 Hot and cold water available; adequate pressure | | | Pf | | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 51 Plumbing installed; proper backflow devices | | | P/Pf/C | | |
| 37 Food properly labeled; original container | | | Pf/C | | | 52 Sewage and waste water properly disposed | | | P/Pf/C | | |
| Prevention of Food Contamination | | | | | | 53 Toilet facilities: properly constructed, supplied, & clean | | | Pf/C | | |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 54 Garbage and refuse properly disposed; facilities maintained | | | C | | |
| 38 Insects, rodents, and animals not present | | | Pf/C | | | 55 Physical facilities installed, maintained, and clean | | | P/Pf/C | | |
| 39 Contamination prevented during food preparation, storage & display | | | P/Pf/C | | | 56 Adequate ventilation and lighting; designated areas used | | | C | | |
| 40 Personal cleanliness | | | Pf/C | | | Natural rubber latex gloves not used per CGS §19a-36f | | | | | |
| 41 Wiping cloths: properly used and stored | | | C | | | Violations documented | | | | | |
| 42 Washing fruits and vegetables | | | P/Pf/C | | | Date corrections due | | | # | | |
| Permit Holder shall notify customers that a copy of the most recent inspection report is available. | | | | | | | | | | | |
| Person in Charge (Signature) <u>[Signature]</u> | | | | | Date <u>6/26/25</u> | | | | | | |
| Person in Charge (Printed) <u>[Signature]</u> | | | | | | | | | | | |
| Inspector (Signature) <u>[Signature]</u> | | | | | Date <u>6/27/25</u> | | | | | | |
| Inspector (Printed) <u>Gloria Brunner</u> | | | | | | | | | | | |
| | | | | | Priority Item Violations | | | | | | |
| | | | | | Priority Foundation Item Violations | | | | | <u>3</u> | |
| | | | | | Core Item Violations | | | | | <u>0</u> | |
| | | | | | Risk Factor/Public Health Intervention Violations | | | | | <u>2</u> | |
| | | | | | Repeat Risk Factor/Public Health Intervention Violations | | | | | <u>0</u> | |
| | | | | | Good Retail Practices Violations | | | | | <u>0</u> | |
| | | | | | 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.

hamb. 39.4
 hotdy 39.0
 am. ghw 39.0
 Pileatum. 39.5

baum 36.5



INSPECTION REPORT
 FOOD SERVICE ESTABLISHMENTS
 CONTINUATION SHEET

STATE OF CONNECTICUT
 DEPARTMENT OF PUBLIC HEALTH

| | | | |
|---|---|------------------------|--------------------------------------|
| NAME OF ESTABLISHMENT <u>Fatty Patty</u> | | TOWN <u>Shelton</u> | DATE OF INSPECTION <u>6/27/07</u> |
| INSPECTION FORM # | REMARKS | | |
| <u>IPf</u> | <u>State DPH allergen poster not posted / no</u> | | |
| | <u>training log avail. CUS - gave CERN poster and</u> | | |
| | <u>training log -</u> | | |
| <u>10Pt</u> | <u>missing soap at front hand sink (cus)</u> | | |
| <u>10Pt</u> | <u>utensils stored in hand sink (cus)</u> | | |
| <u>37C</u> | <u>spices out of original container not labeled (cus)</u> | | |
| 10Pt | allergen poster not posted | | |
| <u>37C</u> | <u>missing allergen notification sign (cus)</u> | | |
| <u>57C</u> | <u>dusty ceiling</u> | | |
| | | | |
| | <u>4 sanitizer good</u> | | |
| | <u>hand sink good</u> | | |
| | <u>* allergen posters <u>MUST</u> be posted - both</u> | | |
| | <u>customer and employee</u> | | |
| | | | |
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| | | | |
| INITIAL (INSPECTOR) | INITIAL (PERSON IN CHARGE) | | |
| <u>js</u> | <u>2C</u> | | |

Distribution: 1st - White - Health Department 2nd - Yellow - Owner/Manager