Connecticut Department of Public Health

5790 Connecticut Department of Public Health												
Risk Category: Food Establ	nspection	ion Report Page 1 of										
Establishment type: Permanent Temporary Mobile Other					Date:	9/2/2	5					
Establishment Valley BUVOLY Shack			section Connecticut Health			In 1055	AM	PM Time Out		_AM	/PM	
Address 039 SOLYN MOIN STYPET			DPH)			MAT	P					
Town/City FIIMOV						Purpose of Inspection: Routine Pre-op						
Permit Holder Tong Tev			Connecticut Department of Public Health			Reinspection Other						
FOODBORNE ILLNESS RISK FA												
Risk factors are important practices or procedures identified as the most prevalent cont. Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				compliance		Interventions are T=not in compli			ss or injury D=not ob		ed	
P=Priority item Pf=Priority foundation item C=Core item V=violation type									R=repea			
IN OUT N/A N/O Supervision	V	cos		IN QU	-			from Contamination	V		R	
Person/Alternate Person in charge present.	D(15		○ Food sep			P/C	0	0	
demonstrates knowledge and performs duties	Pf			16	/0			aces: cleaned & sanitized	P/Pf/C		0	
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 8 0		The state of the s		of returned, previously	P	0	0	
Employee Health Time/Temperature Control for Safety										128		
Management, food employee and conditional employee;	P/Pf	0		18 🔾 🤇				ne and temperatures	P/Pf/C	_	-	
knowledge, responsibilities and reporting				19 0 0				procedures for hot holding	P	_	-	
Proper use of restriction and exclusion Written procedures for responding to vomiting and	Р	0	0	20 0 0				e and temperatures temperatures	P	-	00	
diarrheal events	Pf	0	0	22				g temperatures	P	-	0	
Good Hygienic Practices				23				ng and disposition	P/Pf	_	_	
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0	24 0 0				nealth control: procedures	P/Pf/C		0	
7 No discharge from eyes, nose, and mouth	С	0	0	24		and recor			171110		\square	
Preventing Contamination by Hands	1000			0.0		The second secon		er Advisory	- Dr	10	10	
8 Hands clean and properly washed	P/Pf	0	9	25		The state of the s		rovided: raw/undercooked food	Pf	10	0	
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0 0		THE REAL PROPERTY.	-	ptible Population ed; prohibited foods not offered	P/C	10	0	
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0		20 0 0		Interest /		s and Toxic Substances	1170			
Approved Source	1	8		27 0 0	1 1 0	_		proved and properly used	P	0	10	
11 Food obtained from approved source	P/Pf/C	0	0	28		VACANT.		properly identified,	P/Pf/C			
12 C Food received at proper temperature	P/Pf	-	0	20		stored & u			F/FI/C	1	10	
Food in good condition, safe, and unadulterated	P/Pf	0	0					Approved Procedures		_	1	
14 C Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29 🔾 🤇	9			rariance/specialized eria/HACCP Plan	P/Pf/C		0	
	OD RE	TAIL	PR	RACTICES		processi	tor onto	Michigan Control			200	
Good Retail Practices are preventative measures to	o contro	I the a	additi	ion of pathog	ens, ch	nemicals, and p	hysical ob	bjects into foods.				
Mark OUT if numbered item is not in compliance V=violation type Mark in	n approp	priate	box	for COS and	or R	COS=corr	rected on-	site during inspection	R=repea	t viol	ation	
OUT N/A N/O Safe Food and Water	٧	cos	R	OUT				of Utensils	V	cos	R	
Pasteurized eggs used where required	P	0	9			ensils: proper		ly stored, dried, & handled	C Pf/C	=	10	
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C Pf	0	0					properly stored & used		0	10	
Food Temperature Control	-,77.57					sed properly	o di tioloo.	properly stored a deed	C	_	0	
Proper cooling methods used: adequate equipment for	DUC						ensils a	nd Equipment				
temperature control	Pf/C		0	47 O Fo	od and	d non-food cor	ntact surf	faces cleanable,	P/Pf/C		0	
34 O Plant food properly cooked for hot holding	Pf	0	0	pro		designed, con			1	_	_	
35 Approved thawing methods used	Pf/C	-	0					d, maintained and used;	Pf/C	0	0	
36 Thermometers provided and accurate Food Identification	Pf/C	10	0			d contact surfa		d test strips available	С		0	
37 Food properly labeled; original container	Pf/C	0	0	43 0 140	11-1000	d contact surre		al Facilities				
Prevention of Food Contamination	1			50 O Ho	t and d	cold water ava	-	dequate pressure	Pf	0	0	
38 Insects, rodents, and animals not present	Pf/C	0	0			g installed; pro			P/Pf/C	_	0	
39 Contamination prevented during food preparation, storage & display	P/Pf/C					and waste wa			P/Pf/C	_	0	
40 Personal cleanliness 41 Wiping cloths: properly used and stored	Pf/C	_	00				-	ucted, supplied, & clean osed; facilities maintained	Pf/C	_	0	
42 Washing fruits and vegetables	P/Pf/C		0					ntained, and clean	P/Pf/C	_	0	
Permit Holder shall notify customers that a copy of the most recent inspection repo	- 416 0	-		56 O Ad	equate	e ventilation a	nd lightin	ng; designated areas used		_	0	
Permit floider small flodily customers that a copy of the most recent inspection repo	JICIS AVE	/	1	The Contract of the Contract o			oves not	used per CGS §19a-36f		-11		
Person in Charge (Signature) Date	121	12)	Violations Priority Iter				Date corrections due		#	1	
reson in charge (digitature)	71	10	5			ations on Item Violat	ions				1	
Person in Charge (Printed)	1/2	10		Core Item	Violati	ions					-	
Risk Factor/Public Health Intervention Violations									1			
Inspector (Signature))	Repeat Risk Factor/Public Health Intervention Violations					_	/				
Inspector (Printed) Good Retail Practices Violations Requires Reinspection - check box if you intend to reinspect								1		_		
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, destablishment aggrieved by this order to correct any inspection violation identified by the food inspector or to hold, destablishment aggreed by this order to correct any inspection violation identified by the food inspector or to hold, destablishment aggreed by this order to correct any inspection violation identified by the food inspector or to hold, destablishment aggreed by this order to correct any inspection violation identified by the food inspector or to hold, destablishment aggreed by this order to correct any inspection violation identified by the food inspector or to hold, destablishment aggreed by the food inspector or to hold, destablishment aggreed by the food inspector or to hold, destablishment aggreed by the food inspector or to hold, destablishment aggreed by the food inspector or to hold, destablishment aggreed by the food inspector or to hold, destablishment aggreed by the food inspector or to hold, destablishment aggreed by the food inspector or to hold, destablishment aggreed by the food inspector or to hold, destablishment aggreed by the food inspector or to hold, aggreed by the food inspector or to hold.										dest	roy,	
or dispose of unsafe food, may appeal such order to the	Directo	or of	Hea	alth, not late	r than	forty-eight he	ours afte	er issuance of such order				

	Foo	od Establis	hment Inspe	ction Re	port Page	of
LHD NV	HD		ction Report Continuation She		Date 92	25
Establish	ment Valley B	urger shock	Town SCYMO	W	_	
		TEI	WPERATURE OBSERV	ATIONS		
. Item	/Location/Process		tem/Location/Process	Temp	Item/Location/Process	Temp
Winds	MAIS		dom handsink	MIL		
- UII	00000	39.1 1011	00111 1191005111V	411		
DICTO	10,110,17	SQT				
YUV	GR DOLLHI	30°F				
TICPO	2-tomother	30.F				
Milt	was meal	UL				
2000	DAUCHILLET	100	Mallandino	21-00-/1	1	
Lywy	NECCU	-9 F 110	HOTTOUT	observe	<u>'O'I</u>	
no (boung al	oring inspe	0+1011			
	Violations sited in th	OBSERVA	TIONS AND CORREC	TIVE ACTIONS	S ections 8-405.11 & 8-406.11 of the	food code
Item	Violations cited in th	A LO CLO DO A D	a C O 111 2 C	w, or as stated in s	ections 6-405.11 & 6-400.11 of the	s lood code.
Number	CHOIN. L	-any per	er cerify			
1	Hamsing	SHOCKEDYSI	amore hot	h202		
	mas (1	can pol	& CIAIRCY			
	Melinar	thern	NAMT-HENS			
	Challhati	OUNCOAL	Mexicon (stateme	nt	
	DILICIANO	ne abody	gridgere	DIMICITIC		
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	Charge (Signature)	MA OLLA	and C		0 -	1/25
Inspector	· (Signature)	ing au		21/	Date 9 2	100