


Yiguan Chen
2/11/30

Connecticut Department of Public Health

EHS-108 Rev. 2/16/23

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|---|--|---|--|--|--|
| Risk Category: <u>4</u> | | Food Establishment Inspection Report | | Page 1 of <u>2</u> | |
| Establishment type: <u>Permanent</u> Temporary Mobile Other | | Date: <u>4/11/25</u> | | Time In <u>2:30</u> AM/PM Time Out <u>3:15</u> AM/PM | |
| Establishment <u>Karaku Restaurant</u> | |  | | LHD <u>NVHD</u> | |
| Address <u>1 Klandis Village Dr.</u> | | | | Purpose of Inspection: <u>Routine</u> Pre-op | |
| Town/City <u>Seymour</u> <u>05797</u> | | | | Reinspection Other | |
| Permit Holder | | | | | |

| 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 | |
| 1 | <input checked="" type="checkbox"/> | | | Pf | | | 15 | <input checked="" type="checkbox"/> | | | | | | |
| Person/Alternate Person in charge present, demonstrates knowledge and performs duties | | | | | | Food separated and protected | | | | | | P/C | | |
| 2 | <input checked="" type="checkbox"/> | | | C | | | 16 | <input checked="" type="checkbox"/> | | | | | | |
| Certified Food Protection Manager for Classes 2, 3, & 4 | | | | | | Food-contact surfaces: cleaned & sanitized | | | | | | P/Pf/C | | |
| | | | | | | Proper disposition of returned, previously served, reconditioned, and unsafe food | | | | | | P | | |
| Employee Health | | | | | | Time/Temperature Control for Safety | | | | | | | | |
| 3 | <input checked="" type="checkbox"/> | | | P/Pf | | | 18 | <input checked="" type="checkbox"/> | | | | | | |
| Management, food employee and conditional employee; knowledge, responsibilities and reporting | | | | | | Proper cooking time and temperatures | | | | | | P/Pf/C | | |
| 4 | <input checked="" type="checkbox"/> | | | P | | | 19 | <input checked="" type="checkbox"/> | | | | | | |
| Proper use of restriction and exclusion | | | | | | Proper reheating procedures for hot holding | | | | | | P | | |
| 5 | <input checked="" type="checkbox"/> | | | Pf | | | 20 | <input checked="" type="checkbox"/> | | | | | | |
| Written procedures for responding to vomiting and diarrheal events | | | | | | Proper cooling time and temperatures | | | | | | P | | |
| Good Hygienic Practices | | | | | | Consumer Advisory | | | | | | | | |
| 6 | <input checked="" type="checkbox"/> | | | P/C | | | 23 | <input checked="" type="checkbox"/> | | | | | | |
| Proper eating, tasting, drinking, or tobacco products use | | | | | | Proper date marking and disposition | | | | | | P/Pf | | |
| 7 | <input checked="" type="checkbox"/> | | | C | | | 24 | <input checked="" type="checkbox"/> | | | | | | |
| No discharge from eyes, nose, and mouth | | | | | | Time as a public health control: procedures and records | | | | | | P/Pf/C | | |
| Preventing Contamination by Hands | | | | | | Highly Susceptible Population | | | | | | | | |
| 8 | <input checked="" type="checkbox"/> | | | P/Pf | | | 25 | <input checked="" type="checkbox"/> | | | | | | |
| Hands clean and properly washed | | | | | | Consumer advisory provided: raw/undercooked food | | | | | | Pf | | |
| 9 | <input checked="" type="checkbox"/> | | | P/Pf/C | | | 26 | <input checked="" type="checkbox"/> | | | | | | |
| No bare hand contact with RTE food or a pre-approved alternative procedure properly followed | | | | | | Pasteurized foods used; prohibited foods not offered | | | | | | P/C | | |
| 10 | <input checked="" type="checkbox"/> | | | Pf/C | | | Food/Color Additives and Toxic Substances | | | | | | | |
| Adequate handwashing sinks, properly supplied/accessible | | | | | | Food additives: approved and properly used | | | | | | P | | |
| Approved Source | | | | | | Toxic substances properly identified, stored & used | | | | | | P/Pf/C | | |
| 11 | <input checked="" type="checkbox"/> | | | P/Pf/C | | | 27 | <input checked="" type="checkbox"/> | | | | | | |
| Food obtained from approved source | | | | | | Compliance with variance/specialized process/ROP criteria/HACCP Plan | | | | | | P/Pf/C | | |
| 12 | <input checked="" type="checkbox"/> | | | P/Pf | | | 28 | <input checked="" type="checkbox"/> | | | | | | |
| Food received at proper temperature | | | | | | | | | | | | | | |
| 13 | <input checked="" type="checkbox"/> | | | P/Pf | | | 29 | <input checked="" type="checkbox"/> | | | | | | |
| Food in good condition, safe, and unadulterated | | | | | | | | | | | | | | |
| 14 | <input checked="" type="checkbox"/> | | | P/Pf/C | | | GOOD RETAIL PRACTICES | | | | | | | |
| Required records available: molluscan shellfish identification, parasite destruction | | | | | | | | | | | | | | |

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|--|-------------------------------------|---------------------|---|--------|---|--|-------------------------------------|-----|---|-----|---|-------------|--|
| 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 | N/A | N/O | V | COS | R | | |
| 30 | <input checked="" type="checkbox"/> | | | P | | 43 | <input checked="" type="checkbox"/> | | | | | | |
| Pasteurized eggs used where required | | | | | | In-use utensils: properly stored | | | | | | C | |
| 31 | <input checked="" type="checkbox"/> | | | P/Pf/C | | 44 | <input checked="" type="checkbox"/> | | | | | | |
| Water and ice from approved source | | | | | | Utensils/equipment/linens: properly stored, dried, & handled | | | | | | Pf/C | |
| 32 | <input checked="" type="checkbox"/> | | | Pf | | 45 | <input checked="" type="checkbox"/> | | | | | | |
| Variance obtained for specialized processing methods | | | | | | Single-use/single-service articles: properly stored & used | | | | | | P/C | |
| Food Temperature Control | | | | | | Gloves used properly | | | | | | C | |
| 33 | <input checked="" type="checkbox"/> | | | Pf/C | | Utensils and Equipment | | | | | | | |
| Proper cooling methods used; adequate equipment for temperature control | | | | | | Food and non-food contact surfaces cleanable, properly designed, constructed, and used | | | | | | P/Pf/C | |
| 34 | <input checked="" type="checkbox"/> | | | Pf | | 47 | <input checked="" type="checkbox"/> | | | | | | |
| Plant food properly cooked for hot holding | | | | | | Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available | | | | | | Pf/C | |
| 35 | <input checked="" type="checkbox"/> | | | Pf/C | | 48 | <input checked="" type="checkbox"/> | | | | | | |
| Approved thawing methods used | | | | | | Non-food contact surfaces clean | | | | | | C | |
| 36 | <input checked="" type="checkbox"/> | | | Pf/C | | Physical Facilities | | | | | | | |
| Thermometers provided and accurate | | | | | | Hot and cold water available; adequate pressure | | | | | | Pf | |
| Food Identification | | | | | | Plumbing installed; proper backflow devices | | | | | | P/Pf/C | |
| 37 | <input checked="" type="checkbox"/> | | | Pf/C | | 50 | <input checked="" type="checkbox"/> | | | | | | |
| Food properly labeled; original container | | | | | | Sewage and waste water properly disposed | | | | | | P/Pf/C | |
| Prevention of Food Contamination | | | | | | Toilet facilities: properly constructed, supplied, & clean | | | | | | Pf/C | |
| 38 | <input checked="" type="checkbox"/> | | | Pf/C | | 51 | <input checked="" type="checkbox"/> | | | | | | |
| Insects, rodents, and animals not present | | | | | | Garbage and refuse properly disposed; facilities maintained | | | | | | C | |
| 39 | <input checked="" type="checkbox"/> | | | P/Pf/C | | 52 | <input checked="" type="checkbox"/> | | | | | | |
| Contamination prevented during food preparation, storage & display | | | | | | Physical facilities installed, maintained, and clean | | | | | | P/Pf/C | |
| 40 | <input checked="" type="checkbox"/> | | | Pf/C | | 53 | <input checked="" type="checkbox"/> | | | | | | |
| Personal cleanliness | | | | | | Adequate ventilation and lighting; designated areas used | | | | | | C | |
| 41 | <input checked="" type="checkbox"/> | | | C | | 54 | <input checked="" type="checkbox"/> | | | | | | |
| Wiping cloths: properly used and stored | | | | | | Natural rubber latex gloves not used per CGS §19a-36f | | | | | | | |
| 42 | <input checked="" type="checkbox"/> | | | P/Pf/C | | Violations documented | | | | | | | |
| Washing fruits and vegetables | | | | | | 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>4/11/25</u> | | | | | | Priority Item Violations <u>0</u> | | | | | | # <u>3</u> | |
| Person in Charge (Printed) <u>Y Chen</u> | | | | | | Priority Foundation Item Violations <u>0</u> | | | | | | # <u>3</u> | |
| Inspector (Signature) <u>[Signature]</u> Date <u>4/11/25</u> | | | | | | Core Item Violations <u>0</u> | | | | | | # <u>3</u> | |
| Inspector (Printed) <u>Glenda Buenar</u> | | | | | | Risk Factor/Public Health Intervention Violations <u>0</u> | | | | | | # <u>3</u> | |
| | | | | | | Repeat Risk Factor/Public Health Intervention Violations <u>0</u> | | | | | | # <u>3</u> | |
| | | | | | | Good Retail Practices Violations <u>0</u> | | | | | | # <u>3</u> | |
| | | | | | | Requires Reinspection - check box if you intend to reinspect <u>0</u> | | | | | | # <u>10</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. | | | | | | | | | | | | | |

Bran Rice 38.0
 Crab stick 38.5
 tuna 39.0
 Spicy tuna 38.5
 eel 38.0
 Salmon 38.0
 Spicy Kani 39.0
 White rice 172.
 miso soup 160.
 chicken 37.5
 Steak 37.0
 Filapia 37.5
 noodles 38.0
 Chicken 172.



INSPECTION REPORT
 FOOD SERVICE ESTABLISHMENTS
 CONTINUATION SHEET
 STATE OF CONNECTICUT
 DEPARTMENT OF PUBLIC HEALTH

| | | | |
|---|--|------------------------|--------------------------------------|
| NAME OF ESTABLISHMENT <i>Karaku Restaurant</i> | | TOWN <i>Seymour</i> | DATE OF INSPECTION <i>4/11/25</i> |
| INSPECTION FORM # | REMARKS | | |
| <i>55C</i> | <i>Under ceiling in storage room</i> | | |
| <i>37C</i> | <i>food out of original container not labeled</i> | | |
| <i>49C</i> | <i>under wrap fan in cooler</i> | | |
| | <i>* allergen poster posted - full log to allergen</i> | | |
| | <i>* hand towels stocked</i> | | |
| | <i>* sanitizing strips avail. for sanitizer</i> | | |
| | <i>* what are date-marks / coding</i> | | |
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| INITIAL (INSPECTOR) | INITIAL (PERSON IN CHARGE) | | |