

5805

Connecticut Department of Public Health

Risk Category: 3 **Food Establishment Inspection Report** Page 1 of 2

Establishment type: Permanent Temporary Mobile Other _____ Date: 3/10/26

Establishment: Gaetano's Deli Time In: 11:10 AM/PM Time Out: 12:10 AM/PM

Address: 110 Commerce Dr LHD: NVHD

Town/City: Shelton Purpose of Inspection: Routine Pre-op

Permit Holder: Milanna Uteha x HAJ 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						
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
Person/Alternate Person in charge present, demonstrates knowledge and performs duties						
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
Certified Food Protection Manager for Classes 2, 3, & 4						
Employee Health						
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
Management, food employee and conditional employee; knowledge, responsibilities and reporting						
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
Proper use of restriction and exclusion						
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
Written procedures for responding to vomiting and diarrheal events						
Good Hygienic Practices						
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
Proper eating, tasting, drinking, or tobacco products use						
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
No discharge from eyes, nose, and mouth						
Preventing Contamination by Hands						
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
Hands clean and properly washed						
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed						
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
Adequate handwashing sinks, properly supplied/accessible						
Approved Source						
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
Food obtained from approved source						
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
Food received at proper temperature						
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	IN	<input type="checkbox"/>	<input type="checkbox"/>
Food in good condition, safe, and unadulterated						
14	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	OUT	<input type="checkbox"/>	<input type="checkbox"/>
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

OUT	N/A	N/O	V	COS	R
Safe Food and Water					
30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pasteurized eggs used where required					
31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water and ice from approved source					
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Variance obtained for specialized processing methods					
Food Temperature Control					
33	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper cooling methods used; adequate equipment for temperature control					
34	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plant food properly cooked for hot holding					
35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Approved thawing methods used					
36	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Thermometers provided and accurate					
Food Identification					
37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food properly labeled; original container					
Prevention of Food Contamination					
38	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insects, rodents, and animals not present					
39	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Contamination prevented during food preparation, storage & display					
40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Personal cleanliness					
41	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wiping cloths: properly used and stored					
42	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Washing fruits and vegetables					

Permit Holder shall notify customers that a copy of the most recent inspection report is available.

Person in Charge (Signature) [Signature] Date 3/10/26

Person in Charge (Printed) Guy C. Clawo

Inspector (Signature) [Signature] Date 3/10/26

Inspector (Printed) Michael DeSantis

Violations documented	Date corrections due	#
Priority Item Violations		4
Priority Foundation Item Violations	<u>03/24/26</u>	1
Core Item Violations	<u>6/10/26</u>	3
Risk Factor/Public Health Intervention Violations		3
Repeat Risk Factor/Public Health Intervention Violations		1
Good Retail Practices Violations		6
Requires Reinspection - check box if you intend to reinspect		<u>N</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.

Food Establishment Inspection Report

LHD NVHS Inspection Report Continuation Sheet Date 3/10/26

Establishment Gaetano's Deli Town Shelton

TEMPERATURE OBSERVATIONS

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Chicken cutlet / Steam	145°F	Tuna / Deli case	41°F		
Lasagna / Steam	148°F	Raw chicken / Walk-in cooler	41°F		
Broccoli / Cooler	41°F	Pasta salad / " "	42°F		
Cheese / 2 Door slider	42°F	Bread chicken / " "	41°F		
Ham / Deli case	41°F				
Chicken cutlet / " "	40°F				
Sausage / " "	41°F				
Rice / " "	41°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.
	CFPM - on site - Michael Mazzotta Gaetano Catalano
P 39	Exposed bread at front counter - <u>COS</u> - Remove and covered
P 16	unclean knife store in knife case - <u>COS</u> - clean and sanitize
P 22/P 24	no log for pasta salads store on counter - <u>COS</u> discard temp 70°F - pasta / sausage temp
C 47	using cardboard as shelving in walk-in cooler
C 41	using wet cloth underneath cutting board - <u>COS</u> remove cloth
C 40	No hair restraint when food worker prepping - <u>COS</u> Food worker place on hair net
C 47	Gauge cutting board
C 43	storing knives in between tables
P F 36	Non-working thermometer in low boy cooler in kitchen - <u>COS</u> thermometer
OK	Sanitizer in 3 bay sink at 100 ppm - Bleach
OK	Bathroom
OK	Dumpster

Person in Charge (Signature) [Signature] Date 3/10/26
 Inspector (Signature) [Signature] Date 3/10/26