## **Connecticut Department of Public Health**

Risk Category: 2 5817 34775 Food Establishment Inspection Report Page 1 of 2												
Establishment type: Permanent Temporary Mobile Other							Date: 9 19 25					
Establishment Dun Kin Donuts			second connecticut Health			Time	ln_	115	MM/PM Time Out		_AM	/PM
Address 20 N. Main St			D	Ш		LHD		NUHO				
Town/City Beacon falls						Purpose of Inspection: Routine Pre-op						
Permit Holder Eugenia Cavaliere	Connecticut Department of Public Health			ent	Reinspection Other							
FOODBORNE ILLNESS RISK FACTORS AN						IC H	EAL	TH INTERVE	ENTIONS			
Risk factors are important practices or procedures identified as the most prevalent cont.				_						s or injury	<i>'</i> .	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	tem	11	N=in	comp	liance	OL	IT=n	ot in compliance	N/A=not applicable N/C	=not ob	serve	ed
P=Priority item Pf=Priority foundation item C=Core item V=violation type				te bo	x for (	cos an	d/or	R COS=correc	ted on-site during inspection	R=repea	_	
IN OUT N/A N/O Supervision	٧	cos	R		-	OUT N/A			on from Contamination	٧		R
Person/Alternate Person in charge present,	Pf	0		-		_	10003300	Food separated		P/C		0
demonstrates knowledge and performs duties  Certified Food Protection Manager for Classes 2,		-		16	9	PC	,		urfaces: cleaned & sanitized ion of returned, previously	P/Pf/C		0
2 Settilled 1 ood 1 totection Manager for Classes 2,	С	0	0	17	0			8 A 15	itioned, and unsafe food	P	0	0
Employee Health			200		,	/	A COLUMN		ture Control for Safety			
Management, food employee and conditional employee;	P/Pf			18	0	00	0	Proper cooking	time and temperatures	P/Pf/C		0
knowledge, responsibilities and reporting	P/PI		$\circ$	19	0				g procedures for hot holding	P	0	0
4 O Proper use of restriction and exclusion	Р	0	0	-	-				time and temperatures	P	_	
Written procedures for responding to vomiting and	Pf			-	- 1				ing temperatures	P	_	-
diarrheal events  Good Hygienic Practices					00				ding temperatures irking and disposition	P/Pf	10	0
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	101	0	23	0		1		c health control: procedures			10
7 No discharge from eyes, nose, and mouth	C 170		0	24	0		0	and records	e ricatii control. procedures	P/Pf/C	0	0
Preventing Contamination by Hands			0.09	200			/		umer Advisory			
8 Hands clean and properly washed	P/Pf	0	0	25	0	00			y provided: raw/undercooked food	Pf	0	0
No bare hand contact with RTE food or a	P/Pf/C	0	0				/		ceptible Population			
pre-approved alternative procedure properly followed	10000000000			26	0	02			used; prohibited foods not offered	P/C	0	0
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C		0		1		Printers and		ves and Toxic Substances			
Approved Source	DIDGO			27	0	00			approved and properly used	IP	0	0
11 Construction Food obtained from approved source 12 Construction Food received at proper temperature	P/Pf/C		0	28	0			stored & used	es properly identified,	P/Pf/C		0
13 Food in good condition, safe, and unadulterated	P/Pf		0				C		ith Approved Procedures			
Required records available: molluscan shellfish			0	00					h variance/specialized	DIDNE		0
identification, parasite destruction	P/Pf/C			29				process/ROP c	riteria/HACCP Plan	P/Pf/C		
	OD RE											
Good Retail Practices are preventative measures to				70.00			hem			SHOULDING		
	n appro			_		id/or R			description for the second of	R=repea	-	ation
OUT N/A N/O Safe Food and Water  30 Pasteurized eggs used where required	P	cos	R		TUC	2-1150 1	tone	ils: properly stor	se of Utensils	C	0	
31 Water and ice from approved source	P/Pf/C	-	0						perly stored, dried, & handled	Pf/C	-	0
32 Variance obtained for specialized processing methods	Pf	_	0						es: properly stored & used	P/C	_	-
Food Temperature Control				46	0	Bloves	used	properly		С	0	0
Proper cooling methods used; adequate equipment for	Pf/C	0	0						and Equipment			
temperature control	100.000			47	( )				surfaces cleanable,	P/Pf/C	0	0
34 O Plant food properly cooked for hot holding	Pf	-	0		p			igned, construct				
35 O Approved thawing methods used	Pf/C			48	( )				illed, maintained and used;	Pf/C	0	0
36 Thermometers provided and accurate  Food Identification	Pf/C		0	19				ntact surfaces c	and test strips available	С	0	0
37 Food properly labeled; original container	Pf/C	0	0	40		1011 100	4 00		ical Facilities		NAME OF	182
Prevention of Food Contamination				50	OF	lot and	cold		; adequate pressure	Pf	0	0
38 Insects, rodents, and animals not present	Pf/C	0	0	-	_			stalled; proper ba		P/Pf/C	0	0
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	0					waste water pro		P/Pf/C	-	0
40 Personal cleanliness	Pf/C	-		-					structed, supplied, & clean	Pf/C		0
41 Wiping cloths: properly used and stored	C	0			_				isposed; facilities maintained	C		0
42 Washing fruits and vegetables	P/Pf/C	de la la		-	_				naintained, and clean nting; designated areas used	P/Pf/C	-	0
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is av	ailable							not used per CGS §19a-36f			
Alach				Section 1985		s doc			Date corrections due		#	
Person in Charge (Signature) Date						em Vic						
Demonstrate Observe (Detector)								tem Violations			-	
Person in Charge (Printed)	1		_	_		n Viola			on Violations		+	
Inspector (Signature) Willow Date 9/17/25 Risk Factor/Public Health Intervention Violations Repeat Risk Factor/Public Health Intervention Violations									_		_	
Good Retail Practices Violations												
Inspector (Printed) Melane Dokla Requires Reinspection - check box if you intend to reinspect								1				
Appeal: The owner or operator of a food establishment aggrieved by the										hold,	dest	roy,

4/17/26

LHD NVHO			Inspection Report Continuation Sh	Date 9	117/25	
stablishr	nent Dynkin Dor	nuts	Town_Beacon	falls		
			TEMPERATURE OBSER	VATIONS		
Item	Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Proces	s Temp
		0.5	CEDVATIONS AND CORDE	STIVE ACTION	10	
Item		report must be	SERVATIONS AND CORRECT ECORRECT IN SERVICE CORRECT CORRECT CORRECT IN SERVICE CORRECT CORRECT CORRECT CORREC	ow, or as stated in		1 of the food code.
Number	aladan Horn	and an	6/26 Joan Ellion	1-123		
	guage ner	unal 2	VI-4 South Citio)	1100		
	C 11 11	0 - 1				
	Mont. Hane	dsinh s	tocked signed			
	Quat	used	200 ppm.			
	(ou)	bon 4	200 ppm.			
		0				
	Back: Draws	- Carl	a HASE			
	vack prawe	1 COOU	7 10 8			
	HISV					
	Lowb	oy 400	F			
	lan	rachen	r inderect			
	Mos	cink				
	115001	in Can	ler 40°F Free	101/		
	bl	111 000	- 11 - 1	Cer o		
	3 Day	- STr	ips chlorine/	Wat -		
	Storage OK					
	Storage ok Restrict					
	JUST IN OR					
		AIC	20			
erson in	Charge (Signature)	10000			Date	2//
enector	(Signature)	VICADO			Date	9/17/25