

Connecticut Department of Public Health

Risk Category: 3 Food Establishment Inspection Report Page 1 of 2										
Establishment type: Permanent Temporary Mobile Other		Date:	9/27/2	24						
Establishment Poplyes Lousiana Citchen		etil.	ng Conne	ecticut Healt	Time Ir	11:20		Time Out	11:55	(AM/PM
Address 70 Pershing Dr			D	LI)		JUHD	- Co			
Town/City Derial						se of Inspection	on: 🥂	outine	Pre-op	
Permit Holder Ur Stadt Biddle Properties Inc - Karn		onnecti	icut De	partment	Reinsp	ection	Other			
FOODBORNE ILLNESS RISK F.				KI SHIEST						
Risk factors are important practices or procedures identified as the most prevalent cont									illness or iniu	ry.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it		-	77.10	complianc		not in compliance		not applicable	N/O=not o	
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	-						e during inspection		at violation
IN OUT N/A N/O Supervision	V	cos			OUT N/A N			Contamination		
Person/Alternate Person in charge present	-			15	7	Food separa			P/0	
demonstrates knowledge and performs duties	Pf	0		16	00			cleaned & sanitiz	zed P/Pf/	coo
Certified Food Protection Manager for Classes 2,	С			17		CONTRACTOR OF THE PARTY OF THE		urned, previousl	1/	POO
3, & 4	C			17		served, reco	nditioned, a	nd unsafe food		POO
Employee Health								trol for Safety		
Management, food employee and conditional employee;	P/Pf	0		18 🔾		Proper cooki				000
knowledge, responsibilities and reporting	100000000000000000000000000000000000000			19 🔾				ures for hot hold		POO
Proper use of restriction and exclusion	P	0	0	20	000	Proper cooling				POO
Written procedures for responding to vomiting and	Pf	0	0	21	200	Proper hot h				POO
diarrheal events				22	000	Proper cold I				POO
Good Hygienic Practices	100			23	000	○ Proper date			P/P	100
Proper eating, tasting, drinking, or tobacco products us	_	_	Θ	24	000		iblic nealth	control: procedu	res P/Pf/	
7 No discharge from eyes, nose, and mouth	С	0	0			and records				
Preventing Contamination by Hands	2000			25			nsumer Ad			100
8 Hands clean and properly washed	P/Pf	0	0	25				raw/undercooked f	food P	1010
No bare hand contact with RTE food or a	P/Pf/C	0		20				Population	D/	100
pre-approved alternative procedure properly followed	Drie			26				ibited foods not offe		
Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	07/0/		The second secon		Toxic Substance		
Approved Source				27 0		1000		d and properly u	ised	POO
11 Cood obtained from approved source	P/Pf/C	-	0	28		Toxic substa	175.0	rly identified,	P/Pf/	cool
12 Food received at proper temperature	P/Pf	-	0			stored & use		and December		
13 Food in good condition, safe, and unadulterated	P/Pf	0	0		_/			oved Procedure	S	
Required records available: molluscan shellfish	P/Pf/C	0	0	29 🔾	08	process/ROF		e/specialized	P/Pf/	COO
identification, parasite destruction	OD DE	TAIL	DD	ACTICE	C	processinor	Citteria/ii/	COFFIAII	as each	
Good Retail Practices are preventative measures to		_	_			micals and nhvs	ical objects i	nto foods	ALTERNATION OF THE PARTY OF THE	
				for COS a				ring inspection	R=rene	at violation
OUT N/A N/O Safe Food and Water	V	cos		OUT	Id/OI IX		Use of Ute		V	
30 Pasteurized eggs used where required	P	0			n-use ute	nsils: properly s		110110	C	
31 Water and ice from approved source	P/Pf/C	-	0					d, dried, & handle		
32 Variance obtained for specialized processing methods	Pf	0	0			single-service ar			P/0	
Food Temperature Control						ed properly	no.co. p.opo.	,,	C	
Proper cooling methods used; adequate equipment for		T		10	510 100 00		sils and Eq	uipment		
temperature control	Pf/C	0	0		ood and	non-food contac				A
34 O Plant food properly cooked for hot holding	Pf	0	0			esigned, constr			P/Pf/	
35 O Approved thawing methods used	Pf/C	-	0	1				ntained and use	d:	
36 Thermometers provided and accurate		0	0	148 ()		gents, sanitizer			Pf/C	
Food Identification	111/0					contact surface		on po a rando lo	С	00
37 Food properly labeled; original container	Pf/C	0		10 0	1011 1000		ysical Faci	lities	PULL SASS	
Prevention of Food Contamination	1 110			50 0 1	Hot and co	old water availa			P	00
38 Insects, rodents, and animals not present	Pf/C	0	0			installed; prope			P/Pf/	_
39 Contamination prevented during food preparation, storage & display	P/Pf/C	-	Ö			nd waste water			P/Pf/	
40 Personal cleanliness	Pf/C	_						supplied, & clea		
41 Wiping cloths: properly used and stored	C	0	0					acilities maintaine		
42 Washing fruits and vegetables	P/Pf/C		0			acilities installed			P/Pf/	000
		-		56 0	Adequate	ventilation and	lighting; des	signated areas u	ised C	
Permit Holder shall notify customers that a copy of the most recent inspection rep	JIL IS ave	allable	3.	-				per CGS §19a-3		
Person in Charge (Signature)					ns docun tem Violat		Date	corrections o	lue	0
				Priority F	oundation	n Item Violation	S	12-1-		0
Person in Charge (Printed)	-				m Violatio		12	27/24		2
Museuda Marine 1 - 0/21/21/						: Health Interver or/Public Health				0
Inspector (Signature) Xyllingla Marian Date 4/2	110	/_				ices Violations	intervention	1 VIOIAUOIIS		Z
							box if you i	ntend to reinsp		
Requires Reinspection - check box if you intend to reinspect Requires Reinspection - check box if you intend to reinspect 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, destro								destroy		
or dispose of upsafe food, may appeal such order to the										accircy,

	FOO	d Esta	blishment ins	spection F	Report Page_	of						
LHD_	VHD	Date_ 9/0										
Establishment Poplyes Town Derby												
			TEMPERATURE OB	SERVATIONS								
	n/Location/Process	Temp	Item/Location/Process		Item/Location/Process	Temp						
HH #5	Spicy Chx	135-155°F	Popcorn Chx	160° F	Sliding Continet	ial 39°F						
H 8	classic chx	138-158°C		5 4205	- Coslaw	42°F						
	ench Fries	136°F	grigio di procreo		WIC	440=						
		180°F	Raw Chx @ bread	ing of 28°F	-raw chix	WIT						
.00	ost pepper wings ac + cheese	163°F	There was a preasure	11901.00	- Shredded chee	X 41%						
Clanna	tab mesol pol	170°F			-Coslaw	40°F						
orcuit	Tab-mash Pot	160°F			COSTUN	70 /						
****	-red beans	5°F										
WIT			SERVATIONS AND COR	DECTIVE ACTION	ONG							
	Violations cited in this				in sections 8-405.11 & 8-406.11	of the food code.						
Item Number	6/20/28		3/16/25	9/25/28 (
CFPM-	mohammed Hos	sain, Isla	m Mahammal, Su	mmua Ferde	IUS, Amer Atia About	yfat Fouda						
CITAL			red Signage									
	Thursday in L) VOK	er, orginage	11011	100 110							
-	Donlo a the a	/	Dia 4 DISS or	in war med	, ice machine	e-010						
	HOLE THERMO	metery,	Dip wells , II.	11010aca C	, rec macrane							
	Sanifordia Alask & Rose Il Manual Tack Strings											
	Sanitizer-Quat 3 Bay 400ppm, Test Strips Allergen Poster, Clean up Kit+V/D procedures, Dry Storage											
Allergen Statement												
	>111t/1941 314	AUWIVE	· V									
157	Sada 100 and -:	. 6	disired third alien	molean								
47 Soda machine @ drive-thru avea unctean												
55 Wall in mop sink arealtiles in disrepair w/ Exposed wood												
Good job. Good glove use + cleaning												
	College Job.	0000	giore oper	Turning								
		1	7									
	n Charge (Signature)	2. Longh	kes		Data							
Person ir	r (Signature)	1/2/1	Man		Date 9/	27/24						
Inspecto	r (Signature)	in M	willing.		Date 1	0.10-1						