


5922

Risk Category: <u>2</u>		Food Establishment Inspection Report		Page 1 of <u>2</u>	
Establishment type: <u>Permanent</u> Temporary Mobile Other _____			Date: <u>2/4/25</u>		
Establishment <u>Lucky's Deli</u>			Time In <u>1050</u> AM/PM Time Out <u>1120</u> AM/PM		
Address <u>45 Pearl Street</u>			LHD <u>NVHD</u>		
Town/City <u>Seymour</u>			Purpose of Inspection: <u>Routine</u> Pre-op		
Permit Holder <u>Qing Juan Zhou</u>			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				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"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>
Person/Alternate Person in charge present, demonstrates knowledge and performs duties				Food separated and protected									
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>	16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
Certified Food Protection Manager for Classes 2, 3, & 4				Food-contact surfaces: cleaned & sanitized									
				Proper disposition of returned, previously served, reconditioned, and unsafe food									
Employee Health				Time/Temperature Control for Safety									
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	18	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Proper cooking time and temperatures									
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>	19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
Proper use of restriction and exclusion				Proper reheating procedures for hot holding									
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
Written procedures for responding to vomiting and diarrheal events				Proper cooling time and temperatures									
				Proper hot holding temperatures									
				Proper cold holding temperatures									
Good Hygienic Practices				Consumer Advisory									
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>	23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>
Proper eating, tasting, drinking, or tobacco products use				Proper date marking and disposition									
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>	24	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
No discharge from eyes, nose, and mouth				Time as a public health control: procedures and records									
Preventing Contamination by Hands				Highly Susceptible Population									
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>
Hands clean and properly washed				Consumer advisory provided: raw/undercooked food									
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	26	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed				Pasteurized foods used; prohibited foods not offered									
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	Food/Color Additives and Toxic Substances						
Adequate handwashing sinks, properly supplied/accessible				Food additives: approved and properly used									
				Toxic substances properly identified, stored & used									
Approved Source				Conformance with Approved Procedures									
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	27	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
Food obtained from approved source				Compliance with variance/specialized process/ROP criteria/HACCP Plan									
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	28	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
Food received at proper temperature													
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>							
Food in good condition, safe, and unadulterated													
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<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													
Safe Food and Water				Proper Use of Utensils				Utensils and Equipment					
OUT	N/A	N/O	V	COS	R	OUT	V	COS	R	OUT	V	COS	R
30	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>	43	<input type="checkbox"/>	C	<input type="checkbox"/>	47	<input checked="" type="checkbox"/>	P/Pf/C	<input type="checkbox"/>
Pasteurized eggs used where required			Utensils/equipment/linens: properly stored, dried, & handled			Food and non-food contact surfaces cleanable, properly designed, constructed, and used							
31	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	44	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	48	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>
Water and ice from approved source			Single-use/single-service articles: properly stored & used			Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available							
32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	45	<input type="checkbox"/>	P/C	<input type="checkbox"/>	49	<input type="checkbox"/>	C	<input type="checkbox"/>
Variance obtained for specialized processing methods			Gloves used properly			Non-food contact surfaces clean							
Food Temperature Control				Physical Facilities									
33	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	50	<input type="checkbox"/>	Pf	<input type="checkbox"/>	56	<input type="checkbox"/>	C	<input type="checkbox"/>
Proper cooling methods used; adequate equipment for temperature control			Hot and cold water available; adequate pressure			Adequate ventilation and lighting; designated areas used							
34	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	51	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	Natural rubber latex gloves not used per CGS §19a-36f			
Plant food properly cooked for hot holding			Plumbing installed; proper backflow devices										
35	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	52	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>				
Approved thawing methods used			Sewage and waste water properly disposed										
36	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	53	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>				
Thermometers provided and accurate			Toilet facilities: properly constructed, supplied, & clean										
Food Identification				Prevention of Food Contamination									
37	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	54	<input type="checkbox"/>	C	<input type="checkbox"/>				
Food properly labeled; original container			Insects, rodents, and animals not present			Garbage and refuse properly disposed; facilities maintained							
				Contamination prevented during food preparation, storage & display			Physical facilities installed, maintained, and clean						
				Personal cleanliness			Adequate ventilation and lighting; designated areas used						
				Wiping cloths: properly used and stored									
				Washing fruits and vegetables									

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>2/4/25</u>		Violations documented		Date corrections due		#	
Person in Charge (Printed) <u>Qing Juan Zhou</u>		Priority Item Violations		<u>COS</u>		<u>2</u>	
Inspector (Signature) <u>[Signature]</u> Date <u>2/4/25</u>		Priority Foundation Item Violations		<u>COS</u>		<u>1</u>	
Inspector (Printed) <u>Amy Durand</u>		Core Item Violations		<u>5/4/25</u>		<u>1</u>	
		Risk Factor/Public Health Intervention Violations				<u>3</u>	
		Repeat Risk Factor/Public Health Intervention Violations				<u>2</u>	
		Good Retail Practices Violations				<u>1</u>	
		Requires Reinspection - check box if you intend to reinspect				<u>1</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.

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Inspection Report Continuation Sheet

Date 2/4/25

Establishment Lucky's Deli Town Seymour

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Sliced tomatoes	38°F				
Sliced deli ham	38°F				
raw patty	41°F				
2 door lowboy	37°F				
Both hand sink	102°F				
FoH hand sink	103°F				

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: Qing Juan Zhou 8/18/2026
	Handsinks stocked ✓ signage ✓ hot h2o ✓ vinyl gloves ✓ consumer advisory ✓ thermometers in units ✓ bleach sanitizer ✓ test strips spices labeled
10pf	F04 handsink blocked not accessible, cos, pic moved
28p	Sanitizer not made - cooking & food prep going on cos pic made bucket 50ppm
47C	2 door deli show case gaskets unclean
15p	raw chicken & pork stored over produce in 2dr rowbo cos pic moved to bottom
	RV = repeat violation

Person in Charge (Signature)

Date _____

Inspector (Signature)

Date _____