

5995

Connecticut Department of Public Health

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

Establishment type: Permanent Temporary Mobile Other Date: 10/28/25
Establishment Kickstart Cafe
Address 462 Howe Ave
Town/City Shelton
Permit Holder Stephanie Champagne



Time In AM/PM Time Out AM/PM
LHD NVHD
Purpose of Inspection: Routine Pre-op
Reinspection Other

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Table with columns for item number, compliance status (IN, OUT, N/A, N/O), violation type (V, COS, R), and description of risk factors and interventions.

GOOD RETAIL PRACTICES

Table with columns for item number, compliance status (OUT, N/A, N/O), violation type (V, COS, R), and description of retail practices.

Person in Charge (Signature) Stephanie Date 10/28/25
Person in Charge (Printed) Stephanie Champagne
Inspector (Signature) Amanda Ruchin Date 10/28/25
Inspector (Printed) Amanda Ruchin

Table with columns for violations documented, date corrections due, and number of violations.

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 NVHD

Inspection Report Continuation Sheet

Date 10/28/25

Establishment Kickstart Cafe

Town Shelton

TEMPERATURE OBSERVATIONS

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
door	35°F	reach in FDI	38°F	cooked mushrooms	170°F
-milk	36°F	reach in freezer	5°F		
-Sour Cream	36°F	Showcase	35°F		
reach in/BM unit	39°F				
-Cheese	35°F				
-Sausage	40°F				
-Lettuce	41°F				

OBSERVATIONS AND CORRECTIVE ACTIONS

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.

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.
	7/24/26 6/2030
C#pm	Stephanie Champagne 6/29/27, Nicole Todd, Amanda Schrafenburg 1/30 Cassandra Marro 8/2030, Charlotte Fogoberra 8/2030, James Bess Handsink - Stocked ✓, Signage ✓, Hot H ₂ O ✓ Sanitizer - Chlorine 3 Bay 50-100ppm ✓, Bucket 50-100ppm ✓ Allergen poster ✓ Consumer Advisory ✓, Allergen Statement ✓

- C 55 Wall behind ice machine unclean
- C 55 mop sink area unclean
- C 55 Cracked floor tiles in main kitchen

Person in Charge (Signature)

Inspector (Signature)

Date 10/28/25
Date 10/28/25