

## **Connecticut Department of Public Health**

Risk Category: 3 Food Establishment Inspection Report Page 1 of 2								
Establishment type: Permanent Temporary Mobile Other					Date:			
Establishment OJA P13301  Address + 27 Bn'd & pat avenu  Town/City Wytty # 4529		4sept	onne	cticus Nealth T	ime In_	330 A	M/PM Time Out_	AM/PM
Address + 2T Bridgepat avenue			P	H	.HD	M		
Town/City Multin # 4509	]			F	Purpose	of Inspection:	Routine Pre	-ор
Permit Holder	C	of Pu	ıblic H		Reinspe	CN074921040007.	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								
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered i  P=Priority item Pf=Priority foundation item C=Core item V=violation type								D=not observed R=repeat violation
P=Priority item Pf=Priority foundation item C=Core item V=violation type  IN OUT MANO Supervision	V	cos			F N/A N/O		on from Contamination	V COS R
Person/Alternate Person in charge present,		000				Food separated		P/C 0 0
demonstrates knowledge and performs duties	Pf	0	0	16			rfaces: cleaned & sanitized	P/Pf/C O
Certified Food Protection Manager for Classes 2	С	0	0	17			on of returned, previously	POO
3, & 4	C			17/9/0		served, recondit	tioned, and unsafe food	POO
Employee Health							ture Control for Safety	
Management, food employee and conditional employee;	P/Pf	0		18 0			time and temperatures	P/Pf/C O
knowledge, responsibilities and reporting	2,00000	100000		19 0			g procedures for hot holding	P 0 0
Proper use of restriction and exclusion Written procedures for responding to vomiting and	P	0	0	20 0			ime and temperatures ng temperatures	P 0 0
diarrheal events	Pf	0	0	22			ding temperatures	P 0 0
Good Hygienic Practices	4			23			rking and disposition	P/Pf O O
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0				health control: procedures	
7 No discharge from eyes, nose, and mouth	С		0	24 0 0		and records	•	P/Pf/C
Preventing Contamination by Hands						Consu	ımer Advisory	
8 C Hands clean and properly washed	P/Pf	0	0	25 🔾	0		provided: raw/undercooked food	Pf OO
9 No bare hand contact with RTE food or a	P/Pf/C	0			- Marian		ceptible Population	
pre-approved alternative procedure properly followed				26 0			used; prohibited foods not offered	P/C O
Adequate handwashing sinks, properly supplied/accessible	Pf/C	10	0	07	NAME OF TAXABLE PARTY.		ves and Toxic Substances	POO
Approved Source	DIDUG			27 0 0	0		approved and properly used	
Food obtained from approved source 12	P/Pf/C P/Pf		00	28	0	stored & used	es properly identified,	P/Pf/C O
13 C Food in good condition, safe, and unadulterated		0			e		th Approved Procedures	
Required records available: molluscan shellfish				2000			variance/specialized	P/Pf/C
identification, parasite destruction	P/Pf/C	0	0	29 0 0	10		iteria/HACCP Plan	PIPIIC
GOOD RETAIL PRACTICES								
Good Retail Practices are preventative measures t								
		_	_	for COS and/o	or R	The state of the s		R=repeat violation
OUT N/A N/O Safe Food and Water	V P	cos	R	OUT			e of Utensils	C C C
30 Pasteurized eggs used where required Water and ice from approved source	P/Pf/C	0	0			ils: properly store	erly stored, dried, & handled	Pf/C O O
32 O Variance obtained for specialized processing methods	Pf	0	0				es: properly stored & used	P/C 0 0
Food Temperature Control				46 Glo				c 00
Proper cooling methods used: adequate equipment for	Dir	I		^		Utensils	and Equipment	
temperature control	Pf/C	0	9	14410			urfaces cleanable,	P/PE/C
34 O Plant food properly cooked for hot holding	Pf	0	0	pro		igned, constructe		1
35 O Approved thawing methods used	Pf/C	_	0				lled, maintained and used;	Pf/C O O
Thermometers provided and accurate	Pf/C	0	0				and test strips available	
Food Identification	Duo	0		49 Nor	1-100d CO	ntact surfaces cl	ical Facilities	(c)00
37 Food properly labeled; original container  Prevention of Food Contamination	PI/C	10	9	50 Hot	and cold		adequate pressure	Pf OO
38 Insects, rodents, and animals not present	Pf/C	0				stalled; proper ba		P/Pf/C O
39 Contamination prevented during food preparation, storage & display	P/Pf/C					waste water pro		P/Pf/C O O
40 Personal cleanliness	Pf/C						tructed, supplied, & clean	Pf/C O
41 Wiping cloths: properly used and stored	С	0	0				sposed; facilities maintained	800
42 Washing fruits and vegetables	P/Pf/C	0	0				naintained, and clean	P/Pf/C O
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is av	ailable	e.				iting; designated areas used	000
							ot used per CGS §19a-36f  Date corrections due	#
Person in Charge (Signature) Date	1141	120	1	Violations Priority Item			Date corrections due	
	1	/				tem Violations		
Person in Charge (Printed)	10	_ 1		Core Item \	/iolations		gula	
	11	11				lealth Intervention		1
Inspector (Signature) Date [[ [ U ] ] Date			Repeat Risk Factor/Public Health Intervention Violations Good Retail Practices Violations					
							c if you intend to reinspect	
Inspector (Printed) 6 MM MM 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							hold, destroy	
Appeal: The owner or operator of a rood establishment aggreed by this order to correct any inspection violation identified by the root inspection of the root in								

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FOOD SERVICE ESTABLISHMENTS DEPARTMENT OF PUBLIC HEALTH

CONTINUATION SHEET

NAME OF ESTABLISHMENT TOWN

DA

CONTINUA	HON SHEET								
NAME OF ES	STABLISHMENT TOWN HULLON	C	DATE OF INSPECTION 11/14/24						
INSPECTION FORM #	REMARKS								
43qu	Ac plack's container i	th no ha	ndus buried until						
	form- source (LOS)								
49C									
TIC	uncleandrists crays	unt Delin	2 thousant						
	2	^							
	= hundmis stocked it praje								
	Sams strips avelable of samming								
	allyn poster poster								
	& date man of -								
	ound an cioling								
		-							
INITIAL (IN:	SPECTOR) \(\sigma\)	INITIAL (PERSON IN C	HARGE)						
INITIAL (IIV	SILCION) W	INITIAL (FERSON IN C	HAROL)						