Connecticut Department of Public Health

Risk Category: 4 Food Establ	ichn	2012	t In	cnoc	otion	Donort		Page 1 c	2	
Risk Category: Food Establishment Inspectablishment type: Permanent Temporary Mobile Other					Juon	Report	1,-1	a I A	<u>'</u>	
Establishment type: Permanent Temporary Mobile Other				16-	Date	1/2	131	2	110	
Establishment Tot En [] F 1387		45epir	ng Commet	Nearly .	Time	e In	A	M/PM Time Out	TUA	M/PM
Address To New Howen Part		D	P	H)	LHD		WH			
Town/City Sugman #1913				Purp	ose of Ins	spection:	Routine Pre	e-op		
Permit Holder	C	onnection of Pu	cut Dep ublic He	artment alth	Rein	spection		Other		
FOODBORNE ILLNESS RISK FA										
Risk factors are important practices or procedures identified as the most prevalent cont		1000	Sec. 17. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18							
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it P=Priority item Pf=Priority foundation item C=Core item V=violation type				omplian		JT=not in co		The same of the sa	O=not obse	
IN OUT N/A N/O Supervision	V	cos			OUT NI		THE PERSON NAMED IN COLUMN	ed on-site during inspection on from Contamination	R=repeat v	cos R
Person/Alternate Person in charge present		000	-	15	/			and protected		00
demonstrates knowledge and performs duties	Pf	0		16	00	-		irfaces: cleaned & sanitized		00
Certified Food Protection Manager for Classes 2								on of returned, previously		3455 SASS
2 3, & 4	С			17		serve	d, recondit	tioned, and unsafe food	P	
Employee Health								ture Control for Safety		
Management, food employee and conditional employee;	P/Pf	0		18 🔾	90			time and temperatures	P/Pf/C	
knowledge, responsibilities and reporting	1220000			19	99			g procedures for hot holding		
Proper use of restriction and exclusion	P	0		20 🔾	200			ime and temperatures		
Written procedures for responding to vomiting and diarrheal events	Pf	0		22				ding temperatures		00
Good Hygienic Practices		1000		23	00			rking and disposition		50
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0					c health control: procedures	T	
7 No discharge from eyes, nose, and mouth	С	_	0	24	00		ecords	,	P/Pf/C	
Preventing Contamination by Hands				E			Consu	mer Advisory		
8 Hands clean and properly washed	P/Pf	0	0	25 🔾	00	Consur	mer advisory	provided: raw/undercooked food	Pf (00
No bare hand contact with RTE food or a	P/Pf/C	0				The same of the sa	~	ceptible Population		
pre-approved alternative procedure property followed	P/Pf/C	-		26	00	A STATE OF THE PARTY OF THE PAR		used; prohibited foods not offered	P/C	00
Adequate handwashing sinks, properly supplied/accessible	Pfic	0	9	07				ves and Toxic Substances	ID.	
Approved Source 11	DIDEIC			27 🧭	00	- Company of the last of the l		approved and properly used as properly identified,	P	
Food obtained from approved source 12 Food received at proper temperature	P/Pf/C	_	\exists	28	00) BINGSON	substance 1 & used	es properly identified,	P/Pf/C	
13 Food in good condition, safe, and unadulterated	P/Pf	-	ŏH					th Approved Procedures		
Required records available: molluscan shellfish				00				variance/specialized	P/Pf/C	
identification, parasite destruction	P/Pf/C			29 🔾		proce	ss/ROP cr	iteria/HACCP Plan	PIPIIC	
	OD RE									
Good Retail Practices are preventative measures to					-					
	n appro				and/or R				R=repeat v	
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	P	cos		OUT		itensils: pro		e of Utensils	C	COS R
31 Water and ice from approved source	P/Pf/C							erly stored, dried, & handled		
32 Variance obtained for specialized processing methods	Pf	-						s: properly stored & used		00
Food Temperature Control					-	used prope			C	00
Proper cooling methods used: adequate equipment for	Pf/C						Utensils	and Equipment		
temperature control		0		47 🔾				urfaces cleanable,	P/Pf/C	
Plant food properly cooked for hot holding	Pf	0	0					ed, and used		
Approved thawing methods used	P/C			48				lled, maintained and used;	Pf/C	00
Thermometers provided and accurate	Pf/C		\mathcal{L}	49		g agents, sa d contact s		and test strips available	100 B	DO
Food Identification 37 Food properly labeled; original container	/f/c	0	-14	49	INCH 100	u contact s		ean ical Facilities		71
Prevention of Food Contamination	100		\preceq	50 0	Hot and	cold water		adequate pressure	Pf	00
38 Insects, rodents, and animals not present	Pf/C	0						ackflow devices	T	00
39 Contamination prevented during food preparation, storage & display	P/Pf/C		_	52 🔾	Sewage	and waste	water pro	perly disposed		00
40 Personal cleanliness	P#G	0	0	53 🔾	Toilet fa	cilities: pro	perly cons	tructed, supplied, & clean	1	00
41 Wiping cloths: properly used and stored	C	0		54				sposed; facilities maintained	S	20
42 ○ Washing fruits and vegetables	P/Pf/C	0			-			naintained, and clean	P/P/C	
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable			Natural	rubber late		iting; designated areas used ot used per CGS §19a-36f		
Person in Charge (Signature) Date	13/2	4		Priority	Item Vic			Date corrections due	-	#
Person in Charge (Printed) Sheft Sodoli'	- 1			Core It	em Viola			9 6days (cos)	13	C
Inspector (Signature) Date (7)	13/	20	1	Repeat	t Risk Fa	ctor/Public	Health Int	n Violations ervention Violations	1	-42
Inspector (Printed) Cunda Bulnary						actices Viola		c if you intend to reinspect	4	0
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to							o hold de	estrov
or dispose of unsafe food, may appeal such order to the										J. Oy,

Mushall 350 Amabres 39.0 Salu 36 T chuse 39.0 Amsay 400 Chica wigs 370 Drived chica 280 Jacan 39.5 Van chican 385 mulbar 180. Philly (frail 29.5 Constant 160.

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INSPECTION REPORT FOOD SERVICE ESTABLISHMENTS CONTINUATION SHEET STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

NAME OF ESTABLISHMENT HAT GILLAPISAN TOWN DATE OF INSPECTION 1213/24									
INSPECTION FORM # REMARKS									
354 impriper thanks method buy used (cos)									
374 furleut of onignal contravar not labeled los									
494 Unclean great how typem									
TIC Wigning clothes not bein street in sankfuly									
Antin he one on use (as)									
JC undraugis WL									
A went over verhearing methods									
A went over verhealing									
owert are Civling procedures									
A Alleston and a contrat " Court of the state of the									
A deligen poster poster face traing los to									
& Sanitzin Juppan									
INITIAL (INSPECTOR) INITIAL (PERSON IN CHARGE) 5.5,									
Distribution: 1st - White - Health Department 2nd - Yellow - Owner/Manager									