

6221

Connecticut Department of Public Health

Risk Category: 3 **Food Establishment Inspection Report** Page 1 of 9

Establishment type: Permanent Temporary Mobile Other _____ Date: 6/4/25

Establishment Ecua Salvador Fast Food LLC Time In 11:30 AM/PM Time Out 12:45 AM/PM

Address 67 Howe Ave LHD NVHD

Town/City Shelton Purpose of Inspection: Routine Pre-op

Permit Holder Edgar Perez 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.

Supervision				Protection from Contamination									
IN	OUT	N/A	N/O	V	COS	R	IN	OUT	N/A	N/O	V	COS	R
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
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GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Safe Food and Water				Proper Use of Utensils					
OUT	N/A	N/O	V	COS	R	OUT	V	COS	R
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>

Person in Charge (Signature) R Molina Date 06-04-25

Person in Charge (Printed) _____

Inspector (Signature) Amanda Kuchin Date 6/4/25

Inspector (Printed) Amanda Kuchin

Violations documented	Date corrections due	#
Priority Item Violations	<u>6/11/25</u>	<u>4</u>
Priority Foundation Item Violations	<u>6/11/25</u>	<u>3</u>
Core Item Violations	<u>6/4/25</u>	<u>9</u>
Risk Factor/Public Health Intervention Violations		<u>5</u>
Repeat Risk Factor/Public Health Intervention Violations		<u>1</u>
Good Retail Practices Violations		<u>11</u>
Requires Reinspection - check box if you intend to reinspect		<input checked="" type="checkbox"/>

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 6/4/25

Establishment Ecwa Salvador Fast Food Town Shelton

TEMPERATURE OBSERVATIONS

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
2 dr Raetone unit	41°F	2 dr reach in / BM	32°F	HH	
- raw chx	39°F	- Sliced cheese	34°F	- rice	162°F
- raw beef	39°F	- milk/mozz	32°F	- meat + veggie	148°F
1 dr freezer Box	41°F	F0H unit	36°F		
- Strawberries	42°F				

OBSERVATIONS AND CORRECTIVE ACTIONS

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.
	9/18/26
CFPM	- Edgar Perez → Not on-site during inspection
	Handsink - Stocked ✓, Signage ✓, Hot H2O 139°F ✓, Vinyl gloves ✓
	Sanitizer - 100ppm Bucket - Chlorine ✓, Test Strips ✓
	menu - Allergen Statement + Consumer Advisory ✓
	Ice machine ✓, microwave ✓, TO-go inverted ✓, Allergen poster ✓
PF 1	PIC not on-site (CFPM) during inspection + many P/PF violations
C 37	Products in bins with granulated powders not labeled - COS, PIC labeled ✓
C 36	No thermometers in units/or poorly placed - COS, thermometers found + placed to front ✓
C 47	Deli Slicer unclean - just used, will clean
PF 25	No datemarking of food items - COS, PIC started datemarking
C 41	Wiping cloths stored on Countertops
C 47	Fan in 2 door Raetone cooler very dusty
C 47	Gaskets on 2 dr Raetone cooler in disrepair
P 23	Expired juices in fridge - juices made for employee, told to label + store Elsewhere, if for public can't use those containers
C 39	Plastic milk container being used for other purposes - for employees
P 15	Raw Chicken/meats over other items/RTE in 2 dr Raetone cooler
P 39	Child in kitchen w/ no shoes on
P 28	Nail Polish remover stored on shelf w/ dry goods - COS, removed ✓
C 49	Hoods + baffles very unclean
C 41	Wiping cloths stored under Bain Marie cutting board
PF 33	2 dr reach in has puddle on bottom shelf → leaking?, moved items to top *SERVICER ASAP*

Person in Charge (Signature) Rolinda Date _____
 Inspector (Signature) Amanda Puchini Date 6/4/25

REMARKS for: Ecua Salvador Fast Food, LLC on 6/4/25
Establishment Name Date

✓ indoor seating? NO ACCESS to restrooms, should only be used as take out waiting area.

✓ Next inspection + all p(priority) + pf(priority foundation) violations + circled must be corrected by 6/11/25 + continue to be maintained.

✓ 2 door reach in with leak/puddled water must be serviced ASAP + an invoice should be sent to NVHD or provided at next inspection. Email for sending invoice: ARUCHIN@NVHD.ORG

✓ A CFPM must be on-site during peak hours / Lunch + Dinner, certify another employee if Adjar Peres cannot be here at peak hours daily.

If you have any questions or want to review violations, please call 203-981-3255 x113 + we can set up a call with a translator.

Satisfactory

Unsatisfactory

INSPECTOR:
(Signature)

Amanda Ruchin

PERSON IN CHARGE:
(Signature)

R. Molina

Permit Holder shall notify customers that a copy of the most recent inspection report is available.

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