


Debanki Magna
7/21/25

Connecticut Department of Public Health

EHS-108 Rev. 2/16/23

Risk Category: <u>3</u>		Food Establishment Inspection Report		Page 1 of <u>2</u>	
Establishment type: Permanent <input checked="" type="checkbox"/> Temporary <input type="checkbox"/> Mobile <input type="checkbox"/> Other <input type="checkbox"/>			Date: <u>7/24/25</u>		
Establishment: <u>Hartley Spire</u>			Time In: <u>4:50</u> AM/PM Time Out: <u>7:15</u> AM/PM		
Address: <u>507 Hamden Ave</u>			LHD: <u>NH40</u>		
Town/City: <u>Shelton #5846</u>			Purpose of Inspection: <u>Routine</u> Pre-op <input type="checkbox"/>		
Permit Holder			Reinspection <input type="checkbox"/> Other <input type="checkbox"/>		



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				Time/Temperature Control for Safety					
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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1 Person/Alternate Person in charge present, demonstrates knowledge and performs duties				15 Food separated and protected				18 Proper cooking time and temperatures					
2 Certified Food Protection Manager for Classes 2, 3, & 4				16 Food-contact surfaces: cleaned & sanitized				19 Proper reheating procedures for hot holding					
				17 Proper disposition of returned, previously served, reconditioned, and unsafe food				20 Proper cooling time and temperatures					
Employee Health				Consumer Advisory				Highly Susceptible Population					
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>
3 Management, food employee and conditional employee; knowledge, responsibilities and reporting				25 Consumer advisory provided: raw/undercooked food				26 Pasteurized foods used; prohibited foods not offered					
4 Proper use of restriction and exclusion				26				27 Food additives: approved and properly used					
5 Written procedures for responding to vomiting and diarrheal events				27				28 Toxic substances properly identified, stored & used					
Good Hygienic Practices				Food/Color Additives and Toxic Substances				Conformance with Approved Procedures					
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/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"/>
6 Proper eating, tasting, drinking, or tobacco products use				28				29 Compliance with variance/specialized process/ROP criteria/HACCP Plan					
7 No discharge from eyes, nose, and mouth				29									
Preventing Contamination by Hands				GOOD RETAIL PRACTICES									
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.						
8 Hands clean and properly washed				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									
9 No bare hand contact with RTE food or a pre-approved alternative procedure properly followed													
10 Adequate handwashing sinks, properly supplied/accessible													
Approved Source				Safe Food and Water				Proper Use of Utensils					
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	<input type="checkbox"/>	<input type="checkbox"/>
11 Food obtained from approved source				30 Pasteurized eggs used where required				43 In-use utensils: properly stored					
12 Food received at proper temperature				31 Water and ice from approved source				44 Utensils/equipment/linens: properly stored, dried, & handled					
13 Food in good condition, safe, and unadulterated				32 Variance obtained for specialized processing methods				45 Single-use/single-service articles: properly stored & used					
14 Required records available: molluscan shellfish identification, parasite destruction								46 Gloves used properly					
Prevention of Food Contamination				Food Temperature Control				Utensils and Equipment					
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
38 Insects, rodents, and animals not present				33 Proper cooling methods used; adequate equipment for temperature control				47 Food and non-food contact surfaces cleanable, properly designed, constructed, and used					
39 Contamination prevented during food preparation, storage & display				34 Plant food properly cooked for hot holding				48 Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available					
40 Personal cleanliness				35 Approved thawing methods used				49 Non food contact surfaces clean					
41 Wiping cloths: properly used and stored				36 Thermometers provided and accurate									
42 Washing fruits and vegetables													
Physical Facilities				Food Identification									
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>
50 Hot and cold water available; adequate pressure				37 Food properly labeled; original container									
51 Plumbing installed; proper backflow devices													
52 Sewage and waste water properly disposed													
53 Toilet facilities: properly constructed, supplied, & clean													
54 Garbage and refuse properly disposed; facilities maintained													
55 Physical facilities installed, maintained, and clean													
56 Adequate ventilation and lighting; designated areas used													
57 Natural rubber latex gloves not used per CGS §19a-36f													

Person in Charge (Signature) <u>[Signature]</u> Date <u>07/24/25</u>		Violations documented		Date corrections due		#	
Person in Charge (Printed) <u>Debanki Magna</u>		Priority Item Violations					
Inspector (Signature) <u>[Signature]</u> Date <u>7/24/25</u>		Priority Foundation Item Violations					
Inspector (Printed) <u>Glenn Beemster</u>		Core Item Violations		<u>9045</u>		<u>43</u>	
		Risk Factor/Public Health Intervention Violations					
		Repeat Risk Factor/Public Health Intervention Violations					
		Good Retail Practices Violations				<u>4</u>	
		Requires Reinspection - check box if you intend to reinspect		<input checked="" type="checkbox"/>		<u>10</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.

Stew-187.
White rice 148.
Jollof rice 172.
Spinach stew-34.3
Stew. 37.4



INSPECTION REPORT
FOOD SERVICE ESTABLISHMENTS
CONTINUATION SHEET

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH

NAME OF ESTABLISHMENT Hentage Spice		TOWN Shelton	DATE OF INSPECTION 7/24/21
INSPECTION FORM #	REMARKS		
370	Granulated spice not labeled OK		
43C	Scoops (handles) buried in food product		
49C	Using non-food grade bins to store food		
49C	Ext/lids of food bins unclear		
	* Handprints streaked		
	* Allergen poster posted		
	* Wnt am thauy procedures		
	* Sanitizer full - sanitizing steps not		
INITIAL (INSPECTOR)	apm		INITIAL (PERSON IN CHARGE) DAA