

Yung Kuo Lee
8/21/29

Risk Category: 4	Food Establishment Inspection Report	Page 1 of 2
Establishment type: Permanent Temporary Mobile Other _____		Date: 11/14/24
Establishment: Sushi Village		Time In: 12:00 AM/PM Time Out: 12:20 AM/PM
Address: 77 Bridgeport Avenue		LHD: NUTD
Town/City: Durham #6011		Purpose of Inspection: Routine Pre-op
Permit Holder: _____		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.

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									
IN	OUT	N/A	N/O	V	COS	R	IN	OUT	N/A	N/O	V	COS	R
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/C	<input type="checkbox"/>	<input type="checkbox"/>
Person/Alternate Person in charge present, demonstrates knowledge and performs duties				Food separated and protected									
<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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
Certified Food Protection Manager for Classes 2, 3, & 4				Food-contact surfaces: cleaned & sanitized									
Employee Health				Proper disposition of returned, previously served, reconditioned, and unsafe food									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
Management, food employee and conditional employee; knowledge, responsibilities and reporting				Time/Temperature Control for Safety									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
Proper use of restriction and exclusion				Proper cooking time and temperatures									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
Written procedures for responding to vomiting and diarrheal events				Proper reheating procedures for hot holding									
Good Hygienic Practices				Proper cooling time and temperatures									
<input checked="" type="checkbox"/>	<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"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
Proper eating, tasting, drinking, or tobacco products use				Proper hot holding temperatures									
<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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
No discharge from eyes, nose, and mouth				Proper cold holding temperatures									
Preventing Contamination by Hands				Proper date marking and disposition									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>
Hands clean and properly washed				Time as a public health control: procedures and records									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	Consumer Advisory						
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed				Consumer advisory provided: raw/undercooked food									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	Highly Susceptible Population						
Adequate handwashing sinks, properly supplied/accessible				Pasteurized foods used; prohibited foods not offered									
Approved Source				Food/Color Additives and Toxic Substances									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input type="checkbox"/>	<input type="checkbox"/>
Food obtained from approved source				Food additives: approved and properly used									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
Food received at proper temperature				Conformance with Approved Procedures									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>
Food in good condition, safe, and unadulterated				Compliance with variance/specialized process/ROP criteria/HACCP Plan									
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	GOOD RETAIL PRACTICES						
Required records available: molluscan shellfish identification, parasite destruction													

GOOD RETAIL PRACTICES

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

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

Safe Food and Water				Proper Use of Utensils			
OUT	N/A	N/O	V	OUT	N/A	N/O	V
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C
Pasteurized eggs used where required				In-use utensils: properly stored			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C
Water and ice from approved source				Utensils/equipment/linens: properly stored, dried, & handled			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/C
Variance obtained for specialized processing methods				Single-use/single-service articles: properly stored & used			
Food Temperature Control				Gloves used properly			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	Utensils and Equipment			
Proper cooling methods used; adequate equipment for temperature control				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf	Food and non-food contact surfaces cleanable, properly designed, constructed, and used			
Plant food properly cooked for hot holding				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available			
Approved thawing methods used				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	Non-food contact surfaces clean			
Thermometers provided and accurate				Physical Facilities			
Food Identification				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	Hot and cold water available; adequate pressure			
Food properly labeled; original container				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C
Prevention of Food Contamination				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	Plumbing installed; proper backflow devices			
Insects, rodents, and animals not present				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	Sewage and waste water properly disposed			
Contamination prevented during food preparation, storage & display				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pf/C	Toilet facilities: properly constructed, supplied, & clean			
Personal cleanliness				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C	Garbage and refuse properly disposed; facilities maintained			
Wiping cloths: properly used and stored				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P/Pf/C	Physical facilities installed, maintained, and clean			
Washing fruits and vegetables				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C
Permit Holder shall notify customers that a copy of the most recent inspection report is available.				<input type="checkbox"/> Adequate ventilation and lighting; designated areas used			
				<input type="checkbox"/> Natural rubber latex gloves not used per CGS §19a-36f			

Person in Charge (Signature) _____	Date: 11/14/24	Violations documented	Date corrections due	#
Person in Charge (Printed) _____		Priority Item Violations		
Inspector (Signature) _____	Date: 11/14/24	Priority Foundation Item Violations		
Inspector (Printed) Gunda Burren		Core Item Violations		
		Risk Factor/Public Health Intervention Violations		
		Repeat Risk Factor/Public Health Intervention Violations		
		Good Retail Practices Violations		
		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, 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.

