

Connecticut Department of Public Health

Risk Category: 1

Food Establishment Inspection Report

Page 1 of

Establishment type: Permanent Temporary Mobile Other _____

Establishment Mac Food Mart

Address 25 No. Main St

Town/City Beacon Falls

Permit Holder Mackam Mohammad

Date: 5/20/25

Time In 11:30 AM/PM Time Out 12:08 AM/PM

LHD N/MD

Purpose of Inspection: Routine Pre-op

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	IN	OUT	N/A	N/O	V	COS	R
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf	<input type="checkbox"/>	15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
				Person/Alternate Person in charge present, demonstrates knowledge and performs duties				Food separated and protected				P/C								
				Certified Food Protection Manager for Classes 2, 3, & 4				Food-contact surfaces: cleaned & sanitized				P/Pf/C								
				Employee Health				Proper disposition of returned, previously served, reconditioned, and unsafe food				P								
				Management, food employee and conditional employee; knowledge, responsibilities and reporting				Time/Temperature Control for Safety												
				Proper use of restriction and exclusion				Proper cooking time and temperatures				P/Pf/C								
				Written procedures for responding to vomiting and diarrheal events				Proper reheating procedures for hot holding				P								
				Good Hygienic Practices				Proper cooling time and temperatures				P								
				Proper eating, tasting, drinking, or tobacco products use				Proper hot holding temperatures				P								
				No discharge from eyes, nose, and mouth				Proper cold holding temperatures				P								
				Preventing Contamination by Hands				Proper date marking and disposition				P/Pf								
				Hands clean and properly washed				Time as a public health control: procedures and records				P/Pf/C								
				No bare hand contact with RTE food or a pre-approved alternative procedure properly followed				Consumer Advisory												
				Adequate handwashing sinks, properly supplied/accessible				Consumer advisory provided: raw/undercooked food				Pf								
				Approved Source				Highly Susceptible Population												
				Food obtained from approved source				Pasteurized foods used; prohibited foods not offered				P/C								
				Food received at proper temperature				Food/Color Additives and Toxic Substances												
				Food in good condition, safe, and unadulterated				Food additives: approved and properly used				P								
				Required records available: molluscan shellfish identification, parasite destruction				Toxic substances properly identified, stored & used				P/Pf/C								
				GOOD RETAIL PRACTICES				Compliance with variance/specialized process/ROP criteria/HACCP Plan				P/Pf/C								
				<i>Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.</i>																

GOOD RETAIL PRACTICES

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	COS	R	OUT	V	COS	R	OUT	V	COS	R	OUT	V	COS	R
30	<input type="checkbox"/>	<input type="checkbox"/>		P	<input type="checkbox"/>	43	<input type="checkbox"/>		<input type="checkbox"/>	43	<input type="checkbox"/>		<input type="checkbox"/>	50	<input type="checkbox"/>		<input type="checkbox"/>
				Pasteurized eggs used where required				In-use utensils: properly stored				Pf					
31	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>	44	<input type="checkbox"/>		<input type="checkbox"/>	44	<input type="checkbox"/>		<input type="checkbox"/>	51	<input type="checkbox"/>		<input type="checkbox"/>
				Water and ice from approved source				Utensils/equipment/linens: properly stored, dried, & handled				P/Pf/C					
32	<input type="checkbox"/>	<input type="checkbox"/>		Pf	<input type="checkbox"/>	45	<input type="checkbox"/>		<input type="checkbox"/>	45	<input type="checkbox"/>		<input type="checkbox"/>	52	<input type="checkbox"/>		<input type="checkbox"/>
				Variance obtained for specialized processing methods				Single-use/single-service articles: properly stored & used				P/C					
				Food Temperature Control				Gloves used properly				C					
33	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	46	<input type="checkbox"/>		<input type="checkbox"/>	Utensils and Equipment							
				Proper cooling methods used; adequate equipment for temperature control				Food and non-food contact surfaces cleanable, properly designed, constructed, and used				P/Pf/C					
34	<input type="checkbox"/>	<input type="checkbox"/>		Pf	<input type="checkbox"/>	47	<input checked="" type="checkbox"/>		<input type="checkbox"/>	47	<input checked="" type="checkbox"/>		<input type="checkbox"/>	48	<input type="checkbox"/>		<input type="checkbox"/>
				Plant food properly cooked for hot holding				Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available				Pf/C					
35	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	48	<input type="checkbox"/>		<input type="checkbox"/>	48	<input type="checkbox"/>		<input type="checkbox"/>	49	<input checked="" type="checkbox"/>		<input type="checkbox"/>
				Approved thawing methods used				Non-food contact surfaces clean				C					
36	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	Physical Facilities											
				Thermometers provided and accurate				Hot and cold water available; adequate pressure				Pf					
				Food Identification				Plumbing installed; proper backflow devices				P/Pf/C					
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	51	<input type="checkbox"/>		<input type="checkbox"/>	51	<input type="checkbox"/>		<input type="checkbox"/>	52	<input type="checkbox"/>		<input type="checkbox"/>
				Prevention of Food Contamination				Sewage and waste water properly disposed				P/Pf/C					
38	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	52	<input type="checkbox"/>		<input type="checkbox"/>	52	<input type="checkbox"/>		<input type="checkbox"/>	53	<input type="checkbox"/>		<input type="checkbox"/>
				Insects, rodents, and animals not present				Toilet facilities: properly constructed, supplied, & clean				Pf/C					
39	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>	53	<input type="checkbox"/>		<input type="checkbox"/>	53	<input type="checkbox"/>		<input type="checkbox"/>	54	<input type="checkbox"/>		<input type="checkbox"/>
				Contamination prevented during food preparation, storage & display				Garbage and refuse properly disposed; facilities maintained				C					
40	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	54	<input type="checkbox"/>		<input type="checkbox"/>	54	<input type="checkbox"/>		<input type="checkbox"/>	55	<input checked="" type="checkbox"/>		<input type="checkbox"/>
				Personal cleanliness				Physical facilities installed, maintained, and clean				P/Pf/C					
41	<input type="checkbox"/>	<input type="checkbox"/>		C	<input type="checkbox"/>	55	<input checked="" type="checkbox"/>		<input type="checkbox"/>	55	<input checked="" type="checkbox"/>		<input type="checkbox"/>	56	<input type="checkbox"/>		<input type="checkbox"/>
				Wiping cloths: properly used and stored				Adequate ventilation and lighting; designated areas used				C					
42	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>	56	<input type="checkbox"/>		<input type="checkbox"/>	56	<input type="checkbox"/>		<input type="checkbox"/>	Natural rubber latex gloves not used per CGS §19a-36f			
				Washing fruits and vegetables													

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

Person in Charge (Signature) <u>[Signature]</u>	Date <u>5/20/25</u>	
Person in Charge (Printed) _____		
Inspector (Signature) <u>[Signature]</u>	Date <u>5/20/25</u>	
Inspector (Printed) <u>Laurel Shaw</u>		

Violations documented	Date corrections due	#
Priority Item Violations		0
Priority Foundation Item Violations		0
Core Item Violations	10 DAYS TO DAYS	8
Risk Factor/Public Health Intervention Violations		1
Repeat Risk Factor/Public Health Intervention Violations		3
Good Retail Practices Violations		8
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.

Food Establishment Inspection Report

LHD NVHD

Inspection Report Continuation Sheet

Date 5/20/25

Establishment Mac Food Mart Town Beacon Falls

TEMPERATURE OBSERVATIONS

Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
N/A					

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.
	CFPM: N/A
	No "Buttered Rolls" at inspection
	(Coffee, packaged muffins, danish, pre-packed items retail)
49c	Product shelves/liners walkin unclean, moldy
10pf	Hand wash sink not appropriately stocked, no dispensers for soap, single use towel, readily accessible/convenient use.
49c	Fan covers walkin unclean, dusty.
55c	Storage shelves not in good repair, (particle board chipped) unclean
49c(R)	Food crumbs/bread crumbs present, unclean at counter. Dusty
47c	Straws in boxes, wrapper exposed to leak, not good repair COS Discarded at inspection
37c	Product not in original package unlabeled. "Whipped butter" per operator its margarine but not in use. COS - Discarded container.
37c	Food Allergen notification removed/lacking. COS provided/Posted
	Clorox Regular Bleach # margarine box Tabz noted in walkin refrig.

Person in Charge (Signature)	Date <u>5/20/25</u>
Inspector (Signature) <u>Daniel Ashaw</u>	Date <u>5/20/25</u>

