


Risk Category: <b>3</b>	<b>Food Establishment Inspection Report</b>	Page 1 of <b>2</b>
Establishment type: <b>Permanent</b> Temporary Mobile Other	Date: <b>10/16/25</b>	Time In: <b>4:55</b> AM/PM Time Out: <b>5:25</b> AM/PM
Establishment: <b>The Peacocks 33a Bar</b>	LHD: <b>N/A</b>	Purpose of Inspection: <b>Routine</b> Pre-op
Address: <b>81 S Main St</b>	Reinspection: <b>Other</b>	
Town/City: <b>Beacon Falls</b>		
Permit Holder:		



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			
IN	OUT	N/A	N/O	V	COS	R					
<b>Supervision</b>				<b>Protection from Contamination</b>							
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Person/Alternate Person in charge present, demonstrates knowledge and performs duties											
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Certified Food Protection Manager for Classes 2, 3, & 4											
<b>Employee Health</b>				<b>Time/Temperature Control for Safety</b>							
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Management, food employee and conditional employee; knowledge, responsibilities and reporting											
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Proper use of restriction and exclusion											
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Written procedures for responding to vomiting and diarrheal events											
<b>Good Hygienic Practices</b>				<b>Consumer Advisory</b>							
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Proper eating, tasting, drinking, or tobacco products use											
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
No discharge from eyes, nose, and mouth											
<b>Preventing Contamination by Hands</b>				<b>Highly Susceptible Population</b>							
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Hands clean and properly washed											
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed											
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Adequate handwashing sinks, properly supplied/accessibile											
<b>Approved Source</b>				<b>Food/Color Additives and Toxic Substances</b>							
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Food obtained from approved source											
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Food received at proper temperature											
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Food in good condition, safe, and unadulterated											
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
Required records available: molluscan shellfish identification, parasite destruction											
<b>GOOD RETAIL PRACTICES</b>											
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											
OUT	N/A	N/O	V	COS	R	OUT	V	COS	R		
<b>Safe Food and Water</b>						<b>Proper Use of Utensils</b>					
30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			43	<input type="checkbox"/>				
Pasteurized eggs used where required						In-use utensils: properly stored					
31	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			44	<input type="checkbox"/>				
Water and ice from approved source						Utensils/equipment/linens: properly stored, dried, & handled					
32	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			45	<input type="checkbox"/>				
Variance obtained for specialized processing methods						Single-use/single-service articles: properly stored & used					
<b>Food Temperature Control</b>						<b>Utensils and Equipment</b>					
33	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			46	<input type="checkbox"/>				
Proper cooling methods used; adequate equipment for temperature control						Gloves used properly					
34	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			47	<input type="checkbox"/>				
Plant food properly cooked for hot holding						Food and non-food contact surfaces cleanable, properly designed, constructed, and used					
35	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			48	<input type="checkbox"/>				
Approved thawing methods used						Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available					
36	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			49	<input type="checkbox"/>				
Thermometers provided and accurate						Non-food contact surfaces clean					
<b>Food Identification</b>						<b>Physical Facilities</b>					
37	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			50	<input type="checkbox"/>				
Food properly labeled; original container						Hot and cold water available; adequate pressure					
<b>Prevention of Food Contamination</b>						Plumbing installed; proper backflow devices					
38	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			51	<input type="checkbox"/>				
Insects, rodents, and animals not present						Sewage and waste water properly disposed					
39	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			52	<input type="checkbox"/>				
Contamination prevented during food preparation, storage & display						Toilet facilities: properly constructed, supplied, & clean					
40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			53	<input type="checkbox"/>				
Personal cleanliness						Garbage and refuse properly disposed; facilities maintained					
41	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			54	<input type="checkbox"/>				
Wiping cloths: properly used and stored						Physical facilities installed, maintained, and clean					
42	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			55	<input type="checkbox"/>				
Washing fruits and vegetables						Adequate ventilation and lighting; designated areas used					
Permit Holder shall notify customers that a copy of the most recent inspection report is available.						Natural rubber latex gloves not used per CGS §19a-36f					
Person in Charge (Signature) <i>[Signature]</i> Date <b>10/16/25</b>						<b>Violations documented</b>					
Person in Charge (Printed) <b>CHAL LEE</b>						Date corrections due					
Inspector (Signature) <i>[Signature]</i> Date <b>10/16/25</b>						#					
Inspector (Printed) <b>Blenda Brunant</b>						Priority Item Violations					
						Priority Foundation Item Violations					
						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.

