

TIME IN TIME OUT DATE PAGE 1 of

NEXT ROUTINE INSPE	CTION, OR SUCH SHORTER PEF	RIOD OF TIME AS MA	AY BE SPE	CIFIED I	N WRIT	ING BY T	HE REGUL	CILITIES WHICH MUST BE CORREC LATORY AUTHORITY. FAILURE TO		
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESU ESTABLISHMENT NAME: OWNER:							PERSON IN CHARGE:			
ADDRESS:				ESTABLISHMENT NUMBER: COUNTY:			: COUNTY:			
CITY/ZIP: PHONE:				FAX:				P.H. PRIORITY : H	М	L
ESTABLISHMENT TYPE BAKERY RESTAURANT	C. STORE CATEREF SCHOOL SENIOR		l Mer F.P.	GROCERY STORE INSTITUTION MOBILE VI P. TAVERN TEMP.FOOD					ENDOR	S
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other							
	approved Not Applicable	EWAGE DISPOSA PUBLIC PRIVAT		ATER S COMN	UPPLY IUNITY			MMUNITY PRIVATE		
License No		RISK FACT		D INTE	RVENT	IONS				
								ol and Prevention as contributing facto	ors in	
Compliance	eaks. Public health interventions Demonstration of Kn				ne IIInes mpliance	s or injury	/.	Potentially Hazardous Foods	COS	S R
IN OUT	Person in charge present, demor and performs duties	nstrates knowledge,		IN	OUT N	I/O N/A	Proper co	ooking, time and temperature		
	Employee Hea					I/O N/A		eheating procedures for hot holding		
IN OUT IN OUT	Management awareness; policy proper use of reporting, restriction					1/0 N/A		ooling time and temperatures		
	Good Hygienic Pra	ictices			OUT	N/A	Proper co	old holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking of No discharge from eyes, nose an					N/O N/A		ate marking and disposition a public health control (procedures /		
IN OUT N/O	6 , , ,			IN	OUT N	I/O N/A	records)			
IN OUT N/O	Preventing Contamination Hands clean and properly washe			IN	OUT	N/A	undercoo			
IN OUT N/O	OUT N/O No bare hand contact with ready-to-eat foods or approved alternate method properly followed				н			Highly Susceptible Populations		
IN OUT	Adequate handwashing facilities accessible			IN			Pasteuriz offered	ed foods used, prohibited foods not		
	Approved Sour							Chemical		
	IN OUT Food obtained from approved source				OUT	N/A		litives: approved and properly used ostances properly identified, stored and	-	
IN OUT N/O N/A				IN	OUT		used			
IN OUT	Food in good condition, safe and Required records available: shell							ormance with Approved Procedures ace with approved Specialized Process		
IN OUT N/O N/A	destruction Protection from Conta	0,1		IN	OUT	N/A	and HAC			
IN OUT N/A	Food separated and protected	ammation		The	letter to	the left of	f each item	indicates that item's status at the time	of the	
IN OUT N/A	Food-contact surfaces cleaned &	sanitized		inspection. IN = in compliance OUT = not in compliance						
	Proper disposition of returned, pr			_		in complia = not appli		OUT = not in compliance N/O = not observed		
IN OUT N/O	reconditioned, and unsafe food					=Correcte	d On Site	R=Repeat Item		
	Cood Datail Drastians are provent		OD RETAI			anana ah	omiaala an	ad abusical objects into feeds		
IN OUT	Good Retail Practices are preventa Safe Food and Water		COS R		OUT	Jyens, chi		oper Use of Utensils	COS	R
	urized eggs used where required						tensils: pro	perly stored		
Water	r and ice from approved source					Utensils		t and linens: properly stored, dried,		
	Food Temperature Contr					Single-u	se/single-s	ervice articles: properly stored, used		
	uate equipment for temperature cor oved thawing methods used	ntrol		_		Gloves ι	used proper	rly s, Equipment and Vending		
	nometers provided and accurate					Food an		contact surfaces cleanable, properly		
	Food Identification							ted, and used		
Food Identification						strips us	washing facilities: installed, maintained, used; test used			
Food	properly labeled; original container Prevention of Food Contamir			_		Nonfood		Irfaces clean Physical Facilities		
Insect	Insects, rodents, and animals not present						cold water	available; adequate pressure		
Contamination prevented during food preparation, storage and display							proper backflow devices			
Perso	nal cleanliness: clean outer clothing	g, hair restraint,				Sewage	and waste	water properly disposed		1
fingernails and jewelry Wiping cloths: properly used and stored				Toilet facilities: properly constructed, supplied						
Fruits and vegetables washed before use					Garbage/refuse properly disposed; facilities maintained Physical facilities installed, maintained, and clean					
Person in Charge /T	Title:		I			Filysical		ate:	I	1
	limothy M. Booth	ker								
Inspector:	Z JOWIN Blad	Ý	Т	elepho	ne No.	EPH		ollow-up: Yes ollow-up Date:	٢	No
MO 580-1814 (9-13)		DISTRIBUTION: WHITE -	OWNER'S CO	PY	(	CANARY - FI		- p		E6.37



FOOD ESTABLISHMENT INSPECTION REPORT					PAGE <sup>2</sup> of		
ESTABLISHMEN	T NAME	ADDRESS		CITY/ZIP			
FOOD PRODUCT/LOCATION TEMP. in ° F FOOD PRODUCT			CT/ LOCATI	ON	TEMP. i	n ° F	
Code		PRIORITY IT	EMS			Correct by	Initial
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reduction E IMMEDIATE ACTION within 72 I	to an acceptable level, hazar hours or as stated.	rds associated	with foodborne illness	(date)	
							THB
							THB
							1110
							THB
Code		CORE ITEI	MS			Correct by	Initial
Reference	Core items relate to general sanitation standard operating procedures (SSOP	, operational controls, facilities or str	ructures, equipment design, c	general mainte ection or as s	nance or sanitation tated.	(date)	millar
							THB
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		EDUCATION PROVID	DED OR COMMENTS				
Person in Ch	arge /Title: T. 1 an .L	2			Date:		
Inspector:	Limetry M. F	roilleker Hadild	Telephone No.	EPHS No.	Follow-up:	Yes	No
MO 580-1814 (9-13)	Manuzzie MM	DISTREPUTION: WHITE - OWNER'S COPY	CANARY – FILE CO	OPY	Follow-up Date:		E6.37A



FOOD ESTABLISHMENT INSPECTION REPORT					PAGE <sup>3</sup> of		
ESTABLISHMEN	T NAME	ADDRESS		CITY /ZIP			
FO	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUC	CT/ LOCATIC	N	TEMP. ii	n°F
Code Reference	Priority items contribute directly to the	PRIORITY IT	EMS	ds associated v	with foodborne illness	Correct by (date)	Initial
	Priority items contribute directly to the or injury. These items MUST RECEIV	/E IMMEDIATE ACTION within 72	hours or as stated.			(uuto)	2.20
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Code Reference	Core items relate to general sanitation standard operating procedures (SSOF	CORE ITE n, operational controls, facilities or st Ps). These items are to be correct	ructures, equipment design, q	eneral mainten	ance or sanitation ated.	Correct by (date)	Initial
							THB
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		EDUCATION PROVID	DED OR COMMENTS				
<b>6</b>				- 1			
Person in Ch	harge / litle: $\mathcal{T} \cdot (l_{M})$	R int			Date:		
Inspector:	limothy M.	Doitleker	Telephone No.	EPHS No. 1	Follow-up:	Yes	No



Code reduction         Code Set         Division         TEMP. In * F         FOOD PRODUCT/LOCATION         TEMP. In * F           Code reduction         TEMP. In * F         FOOD PRODUCT/LOCATION         TEMP. In * F         FOOD PRODUCT/LOCATION         TEMP. In * F           Code reduction         FOOD PRODUCT/LOCATION         TEMP. In * F         FOOD PRODUCT/LOCATION         TEMP. In * F           Code reduction         FOOD PRODUCT/LOCATION         TEMP. In * F         FOOD PRODUCT/LOCATION         TEMP. In * F           Code reduction         FOOD PRODUCT/LOCATION         TEMP. In * F         FOOD PRODUCT/LOCATION         TEMP. In * F           Code reduction         FOOD PRODUCT/LOCATION         TEMP. In * F         FOOD PRODUCT/LOCATION         TEMP. In * F           Code reduction         FOOD PRODUCT/LOCATION         TEMP. In * F         FOOD PRODUCT/LOCATION         Temp. In * F           Code reduction         FOOD PRODUCT/LOCATION         TEMP. In * F         FOOD PRODUCT/LOCATION         Temp. In * F           Code reduction         Code reduction         Code reduction         Code reduction         Code reduction         Temp. In * F           Code reduction         Code reduction         Code reduction         Code reduction         FOOD PRODUCT/LOCATION         Temp. In * F           Code reduction         Code reduct	NINCE ST	POOD ESTABLISHMENT INSPECTION REPORT				PAGE <sup>4</sup> of	of		
Code         Converting         Converting         Converting         Converting         Initial           Code         Protocy terms contribute directly to the eliminator, prevention or relativition to the acceptable level. Incades associated with foodborne lines         Converting         Table           Code         Protocy terms contribute directly to the eliminator, prevention or relativities or as stated.         Table         Table         Table           Code         Protocy terms contribute directly to the eliminator, prevention or relativities or as stated.         Table         Table         Table           Code         Protocy terms contribute directly to the eliminator, preventional controls, basis or as stated.         Table         Table         Table         Table           Code         Converting protocoles         COPE ITEMS         Converting         Converting         Table         Table <td< td=""><td>ESTABLISHMEN</td><td>T NAME</td><td>ADDRESS</td><td colspan="3">ADDRESS CITY /ZIP</td><td></td><td></td></td<>	ESTABLISHMEN	T NAME	ADDRESS	ADDRESS CITY /ZIP					
Reference         Phototy liens accorbable circety to me elimination, prevention or reduction to an acceptable level. Inzards associated with focdborne liness         (date)           Code         Core liens MUST RECEIVE IMMEDIATE ACTION within 72 hours or as sated.         Image: Code liens and the elimination, prevention or reduction to an acceptable level. Inzards associated with focdborne liness         TMB           Code         Core liens relate to general samilation, operational controls, foolities or structures, equipment design, general mentenance or samilation         Correct by instrument of (date)         Instrument of (date)           Code         Core liens relate to general samilation, operational controls, foolities or structures, equipment design, general mentenance or samilation         Correct by instrument of (date)         Instrument of (date)           Reference         Core liens relate to general samilation, operational controls, foolities or structures, equipment design, general mentenance or samilation         TMB           Middle         Core liens relate to general samilation, dependional controls, foolities or structures, equipment design, general mentenance or samilation         TMB           Middle         Core liens relate to general samilation         EDUCATION PROVIDED OR COMMENTS         TMB           EDUCATION PROVIDED OR COMMENTS         EDUCATION PROVIDED OR COMMENTS         Vestor         No	FO	DD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUC	T/ LOCATI	LOCATION		n°F	
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Person in Charge /Title: Timody, M. Bootteber Inspector: Muni J.L. M. Bootteber MMCMMA Telephone No. EPHS No. Follow-up: Yes No		Core items relate to general sanitatio standard operating procedures (SSO	n, operational controls, facilities or st	ructures, equipment design, ge	eneral mainte ction or as s	nance or sanitation tated.	Correct by (date)	Initial	
Person in Charge /Title: Timothy M. Boottohen Inspector: Mini J.L. M. M. WMWMM Telephone No. EPHS No. Follow-up: Yes No Follow-up Date: Yes No								THB	
Person in Charge /Title: Tringty M. Bouttoker Inspector: Manig T. M. M. Bouttoker Inspector: Manig T. M.								MB	
Person in Charge /Title: Timethy M. Bostkher Inspector: Mani, L. M. WM. Burgy M. Bostkher Mani, L. M. WM. Burgy M. Bostkher Mani, L. M. WM. Burgy M. Bostkher Telephone No. EPHS No. Follow-up: Yes No Follow-up Date:								TMB	
EDUCATION PROVIDED OR COMMENTS         Date:         Person in Charge /Title:       Date:         Inspector:       Date:         Multimit Link       Multimethy         Telephone No.       EPHS No.         Follow-up:       Yes         No       Follow-up Date:								TMB	
Person in Charge /Title:     Date:       Inspector:     Multiplication       Multiplication     Telephone No.       EPHS No.     Follow-up:       Yes     No       Follow-up Date:     Follow-up Date:								TMB	
Inspector:     Telephone No.     EPHS No.     Follow-up:     Yes     No       Multiniz Link     Multiniz Link     Multiniz     Follow-up Date:     No			EDUCATION PROVID	DED OR COMMENTS				I	
Inspector:     Telephone No.     EPHS No.     Follow-up:     Yes     No       Multiniz Link     Multiniz Link     Multiniz     Follow-up Date:     No									
	Person in Ch	arge /Title: Time fr. M. R.	Nolas,			Date:			
DIVERSION AND THE OWNER ODDY CANADY FOR ODDY FOR ODDY	Inspector: MO 580-1814 (9-13)		HAUY DISTRIBUTION: WHITE - OWNER'S COPY			Follow-up: Follow-up Date:	Yes	No E6.37A	

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F	FOOD ESTABLISHMENT INSPECTION REPORT				PAGE <sup>5</sup> of		
ESTABLISHMEN	ISHMENT NAME ADDRESS (			CITY /ZIP			
FO	DD PRODUCT/LOCATION	TEMP. in ° F	TEMP. in ° F FOOD PRODUCT/ L			TEMP. in ° F	
Code		PRIŌRITY IT	FMS			Correct by	Initial
Reference	Priority items contribute directly to the or injury. These items MUST RECEIV	elimination, prevention or reduction	to an acceptable level, hazar hours or as stated.	ds associated w	ith foodborne illness	(date)	miliar
Code		CORE ITEI	MS	_		Correct by	Initial
Reference	Core items relate to general sanitation standard operating procedures (SSOF	. operational controls, facilities or st	ructures, equipment design, a	eneral mainten	ance or sanitation Ited.	(date)	
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Person in Ch	م. اسم T· ۱ میر ا			[	Date:		
Inspector:	large /Title: <u>Timothy M. Boi</u> Inniz III MMABI	<b>liekar</b>	Telephone No.	EPHS No. F	ollow-up:	Yes	No
MO 580-1814 (9-13)		DISTRIBUTION: WHITE - OWNER'S COP	CANARY – FILE CC		ollow-up Date:		E6.37A