

TIME IN TIME OUT DATE PAGE 1 of

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ESTABLISHMEN	T NAME	ADDRESS		CITY/ZIP			
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Code Reference	Priority items contribute directly to the or injury. These items MUST RECEN	PRIORITY IT elimination, prevention or reduction VE IMMEDIATE ACTION within 72	EMS to an acceptable level, hazards hours or as stated.	s associated with	foodborne illness	Correct by (date)	Initial
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Code Reference	Core items relate to general sanitation standard operating procedures (SSO	CORE ITE n, operational controls, facilities or st Ps) These items are to be correct	ructures, equipment design, ge	neral maintenand	ce or sanitation	Correct by (date)	Initial
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ESTABLISHMEN	TNAME	ADDRESS		CITY /ZIP			
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FOOD ESTABLISHMENT INSPECTION REPORT				PAGE 6 of			
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Person in Ch	arge /Title:	ŧP			Date:		
Inspector:	J. Man Jan	Frank	Telephone No.	EPHS No. F	ollow-up: ollow-up Date:	Yes	No
MO 580-1814 (9-13)		DISTRIBUTION: WHITE - OWNER'S COP	Y CANARY – FILE COP		onow-up Date.		E6.37A