## **Connecticut Department of Public Health**

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Risk Category:			jory:	Food Establishment Ins						spection Report Page 1 of					
Establishment type: Perm				rmanent Temporary Mobile Other					- Date:						
Establishment						Assiles Connecticus Maaily			T	ime In	<i>F</i>	AM/PM Time Out		_AM/P	<u>'M</u>
Address							DPH)			LHD					
Town/City									P	Purpose of Inspection: Routine Pre-op					
Permit Holder							of Public Health			<u> </u>	ection	Other			_
		Risk	factors are import	FOODBORNE ILLNESS RIS									ess or injury	/	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered item								n compliand		-	not in compliance	·	<b>O</b> =not ob		}
P=		ority ite		ty foundation item <b>C</b> =Core item <b>V</b> =violation				riate box for			•	ted on-site during inspection	R=repea		
	IN	OUT	N/A N/O	Supervision		V	COS R		Τ	N/A N/		ion from Contamination	V	cos	
1				n/Alternate Person in charge present,		Pf		15 🔾				d and protected	P/C		
ı				onstrates knowledge and performs duties		P1		16				urfaces: cleaned & sanitized	P/Pf/C	; 0	$\overline{\bigcirc}$
2				ied Food Protection Manager for Classes 2	2,	Pf						ion of returned, previously	Р		$\supset$
			3, & 4								·	itioned, and unsafe food			
			Mana	Employee Health gement, food employee and conditional em	nnlovoo:			18				time and temperatures	P/Pf/C	1	
3				ledge, responsibilities and reporting	ripioyee,	P/P	$f  \bigcirc $	19			<u> </u>	ng procedures for hot holding			$\frac{\mathcal{L}}{\mathcal{L}}$
4				er use of restriction and exclusion		P		20			<del></del>	time and temperatures	, ; P		$\frac{2}{2}$
_				en procedures for responding to vomiting ar	nd	Dí		21			·	ling temperatures	Р		$\overline{\bigcirc}$
5	$\bigcirc$			eal events		Pf		22			<del>-  </del>	ding temperatures	Р		
				Good Hygienic Practices				23 🔾				arking and disposition	P/Pf		$\bigcirc$
6			·	er eating, tasting, drinking, or tobacco produ	ucts	P/C		24 0			ノ  ・	ic health control: procedures	P/Pf/C		
7				scharge from eyes, nose, and mouth		С					and records				
0				Preventing Contamination by Hands s clean and properly washed		P/Pt	f	25				umer Advisory ory provided: raw/undercooked	food Df		
0				are hand contact with RTE food or a								sceptible Population	1004 F1		
9	$\bigcirc$			pproved alternative procedure properly follo	owed P	/Pf/C		26				ds used; prohibited foods not of	fered P/C		
10				late handwashing sinks, properly supplied/acce		Pf/C				F		ives and Toxic Substances			
				Approved Source				27 🔾			Food additives	approved and properly used	d P		
11				obtained from approved source	P	/Pf/C		28			Toxic substance	es properly identified,	P/Pf/C		
12				received at proper temperature		P/P					stored & used		1 /1 1/6		
13	$\bigcirc$			in good condition, safe, and unadulterated		P/P	f O C		T			ith Approved Procedures			
14	$\bigcirc$		· ·	ired records available: molluscan shellfish fication, parasite destruction	P	/Pf/C		0 29 0				th variance/specialized riteria/HACCP Plan	P/Pf/C		$\supset$
			<u> </u>	noation, parabite aboutablion	GOOE	RE	ETAIL F	RACTICE	ES		process/rter e				
				Good Retail Practices are preventative mea						ns, chei	micals, and physica	al objects into foods.			
	Mark	< <b>OU</b> 1	<b>r</b> if numbered it	em is not in compliance <b>V</b> =violation type	Mark in a	ppro	priate bo	x for COS a	and/c	or <b>R</b>	COS=corrected	on-site during inspection	<b>R</b> =repea	t violati	ion
		N/A N		Safe Food and Water		٧	COS R	OUT			Proper Us	se of Utensils	V	cos	R
30				d eggs used where required		Р		_			nsils: properly sto		С		$\bigcirc$
31				ice from approved source		/Pf/C			+			perly stored, dried, & handled	Pf/C		$\frac{\bigcirc}{\bigcirc}$
32			Variance o	btained for specialized processing methods	S	Pf			<del> </del>			es: properly stored & used	P/C		$\frac{\mathcal{L}}{\mathcal{L}}$
			Proper cod	Food Temperature Control oling methods used; adequate equipment for	or			46	Gio	ves use	ed properly	s and Equipment	C		
33	$\bigcirc$		temperatur			Pf/C			Foo	d and r		surfaces cleanable,			
34			<u>'</u>	properly cooked for hot holding		Pf		<b>—    <u>/</u> /</b>  (			esigned, construc	•	P/Pf/C		$\bigcirc$
35				thawing methods used		Pf/C			+			alled, maintained and used;	Dt/O		$\overline{}$
36			Thermome	ters provided and accurate		Pf/C			clea	ıning aç	gents, sanitizers,	and test strips available	Pf/C		
				Food Identification				49	Non	-food c	contact surfaces c		С		
37		Food	d properly labe	eled; original container		Pf/C				•		sical Facilities		Tat	
20		ا م م ما	oto rodonto o	Prevention of Food Contamination		Dt/C						e; adequate pressure	Pf		$\frac{\mathcal{L}}{\mathcal{L}}$
38				nd animals not present ented during food preparation, storage & display	av D	/Pf/C		<del>-</del>	<del> </del>		nstalled; proper b nd waste water pr		P/Pf/C P/Pf/C		$\frac{\mathcal{L}}{\mathcal{L}}$
40			onal cleanline			Pf/C			_		<b>.</b>	structed, supplied, & clean	Pf/C		$\frac{\mathcal{L}}{\mathcal{L}}$
41				perly used and stored		C		<b></b>			<u> </u>	lisposed; facilities maintained	C		$\int$
			hing fruits and		P			<del>-</del>	+			maintained, and clean	P/Pf/C		$\overline{\bigcirc}$
				customers that a copy of the most recent inspect	tion report	is av	ailahla		+			hting; designated areas used	d C		$\overline{\bigcirc}$
	<b>V</b> 1111	11010	aci chan nothy C	Jacionioro triat a copy or the most recent mispect		15 av	anabici					not used per CGS §19a-36f			
Da-	C	, in o	haraa /Siana	turo)				Violation				Date corrections due		#	
rer	sor	ı ın C	harge (Signa	ture) Date				Priority Priority			ions Item Violations				
Per	son	ı in C	harge (Printe	ed)				Core Ite							
			3- (· · · · · · · · · · · · · · · · · · ·	,							Health Intervention	on Violations			
Inspector (Signature) Date											at Risk Factor/Public Health Intervention Violations				
			<b>-</b>					<del>                                 </del>			ces Violations				
			Printed)	porotor of a facal catalal'alessa to the	م ما ام		0 1 -					x if you intend to reinspect	<u> </u>	d c c t	
Ap	pea	ai: Ir		perator of a food establishment aggrieve e of unsafe food, may appeal such order	•			•	•			-		uestro	У,

Foo	dEstal	blishment Insp	ection R	eport Page	_ of					
LHD		Sheet	Date							
Establishment		Town								
TEMPERATURE OBSERVATIONS										
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp					
		SERVATIONS AND CORR								
item	eport must be	corrected within the time frames b	elow, or as stated in	sections 8-405.11 & 8-406.11 of	the food code.					
Number										
Person in Charge (Signature)				Date						
Inspector (Signature)				Date						