Food Establishment Inspection Report

Local Health Department Name and Address		No. of Risk Factor/Intervention Violations	Date
		No. of Repeat Risk Factor/Intervention Violations	Time In
Establishment	License/Permit #		Time Out
		Permit Holder	Risk Category
Street Address		Purpose of Inspection	
City/State	ZIP Code		

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
IN=in compliance **OUT**=not in compliance **N/O**=not observed **N/A**=not applicable
Mark "X" in appropriate box for COS and/or R
COS=corrected on-site during inspection **R**=repeat violation

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

	Compliance Status		COS	R
	Supervision			
1	In, Out	Person in charge present, demonstrates knowledge, and performs duties		
2	In, Out, N/A	Certified Food Protection Manager (CFPM)		
	Employee Health			
3	In, Out	Management, food employee and conditional employee; knowledge, responsibilities and reporting		
4	In, Out	Proper use of restriction and exclusion		
5	In, Out	Procedures for responding to vomiting and diarrheal events		
	Good Hygienic Practices			
6	In, Out, N/O	Proper eating, tasting, drinking, or tobacco use		
7	In, Out, N/O	No discharge from eyes, nose, and mouth		
	Preventing Contamination by Hands			
8	In, Out, N/O	Hands clean and properly washed		
9	In, Out, N/A, N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		
10	In, Out	Adequate handwashing sinks properly supplied and accessible		
	Approved Source			
11	In, Out	Food obtained from approved source		
12	In, Out, N/A, N/O	Food received at proper temperature		
13	In, Out	Food in good condition, safe, and unadulterated		
14	In, Out, N/A, N/O	Required records available: shellstock tags, parasite destruction		

	Compliance Status		COS	R
	Protection from Contamination			
15	In, Out, N/A, N/O	Food separated and protected		
16	In, Out, N/A	Food-contact surfaces; cleaned and sanitized		
17	In, Out	Proper disposition of returned, previously served, reconditioned and unsafe food		
	Time/Temperature Control for Safety			
18	In, Out, N/A, N/O	Proper cooking time and temperatures		
19	In, Out, N/A, N/O	Proper reheating procedures for hot holding		
20	In, Out, N/A, N/O	Proper cooling time and temperature		
21	In, Out, N/A, N/O	Proper hot holding temperatures		
22	In, Out, N/A, N/O	Proper cold holding temperatures		
23	In, Out, N/A, N/O	Proper date marking and disposition		
24	In, Out, N/A, N/O	Time as a Public Health Control; procedures & records		
	Consumer Advisory			
25	In, Out, N/A	Consumer advisory provided for raw/undercooked food		
	Highly Susceptible Populations			
26	In, Out, N/A	Pasteurized foods used; prohibited foods not offered		
	Food/Color Additives and Toxic Substances			
27	In, Out, N/A	Food additives: approved and properly used		
28	In, Out, N/A	Toxic substances properly identified, stored, and used		
	Conformance with Approved Procedures			
29	In, Out, N/A	Compliance with variance/specialized process/HACCP		

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.
Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation

			COS	R
		Safe Food and Water		
30		Pasteurized eggs used where required		
31		Water and ice from approved source		
32		Variance obtained for specialized processing methods		
		Food Temperature Control		
33		Proper cooling methods used; adequate equipment for temperature control		
34		Plant food properly cooked for hot holding		
35		Approved thawing methods used		
36		Thermometers provided & accurate		
		Food Identification		
37		Food properly labeled; original container		
		Prevention of Food Contamination		
38		Insects, rodents, and animals not present		
39		Contamination prevented during food preparation, storage and display		
40		Personal cleanliness		
41		Wiping cloths: properly used and stored		
42		Washing fruits and vegetables		

			COS	R
		Proper Use of Utensils		
43		In-use utensils: properly stored		
44		Utensils, equipment & linens: properly stored, dried, & handled		
45		Single-use/single-service articles: properly stored and used		
46		Gloves used properly		
		Utensils, Equipment and Vending		
47		Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
48		Warewashing facilities: installed, maintained, & used; test strips		
49		Non-food contact surfaces clean		
		Physical Facilities		
50		Hot and cold water available; adequate pressure		
51		Plumbing installed; proper backflow devices		
52		Sewage and waste water properly disposed		
53		Toilet facilities: properly constructed, supplied, & cleaned		
54		Garbage & refuse properly disposed; facilities maintained		
55		Physical facilities installed, maintained, and clean		
56		Adequate ventilation and lighting; designated areas used		
		Employee Training		
57		All food employees have food handler training		
58		Allergen training as required		

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Establishment: _____ Establishment #: _____

Water Supply: ☐ Public ☐ Private Waste Water System: ☐ Public ☐ Private

Sanitizer Type: _____ PPM: _____ Heat: _____

TEMPERATURE OBSERVATIONS							
Item/Location	Temp		Item/Location	Temp		Item/Location	Temp

OBSERVATIONS AND CORRECTIVE ACTIONS	
Item Number	Violations cited in this report must be corrected within the time frames below.

CFPM Verification (name, expiration date, ID#):			

HACCP Topic:

_____ _____
Person in Charge (Signature) Date

_____ **Follow-up:** ☐ Yes ☐ No (Check one) **Follow-up Date:** _____
Inspector (Signature)

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OBSERVATIONS AND CORRECTIVE ACTIONS	
Item Number	Violations cited in this report must be corrected within the time frames below.

Person in Charge (Signature)

Date

Follow-up: ☐ Yes ☐ No (Check one) **Follow-up Date:** ______________

Inspector (Signature)