


Risk Category:		Food Establishment Inspection Report				Page 1 of _____												
Establishment type: Permanent Temporary Mobile Other _____		Date: _____				Time In _____ AM/PM Time Out _____ AM/PM												
Establishment _____						LHD _____												
Address _____						Purpose of Inspection: Routine Pre-op												
Town/City _____						Reinspection Other _____												
Permit Holder _____																		
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS																		
<i>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.</i>																		
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																		
Supervision				Protection from Contamination														
IN	OUT	N/A	N/O	V	COS	R	IN	OUT	N/A	N/O	V	COS	R					
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf	<input type="checkbox"/>	15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>					
Person/Alternate Person in charge present, demonstrates knowledge and performs duties							Food separated and protected					P/C	<input type="checkbox"/>					
2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		C	<input type="checkbox"/>	16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>					
Certified Food Protection Manager for Classes 2, 3, & 4							Food-contact surfaces: cleaned & sanitized					P/Pf/C	<input type="checkbox"/>					
Employee Health				Time/Temperature Control for Safety														
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf	<input type="checkbox"/>	17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>					
Management, food employee and conditional employee; knowledge, responsibilities and reporting							Proper cooking time and temperatures					P/Pf/C	<input type="checkbox"/>					
4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P	<input type="checkbox"/>	18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>					
Proper use of restriction and exclusion							Proper reheating procedures for hot holding					P	<input type="checkbox"/>					
5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf	<input type="checkbox"/>	19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>					
Written procedures for responding to vomiting and diarrheal events							Proper cooling time and temperatures					P	<input type="checkbox"/>					
Good Hygienic Practices				Consumer Advisory														
6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/C	<input type="checkbox"/>	20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>					
Proper eating, tasting, drinking, or tobacco products use							Proper hot holding temperatures					P	<input type="checkbox"/>					
7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		C	<input type="checkbox"/>	21	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>					
No discharge from eyes, nose, and mouth							Proper cold holding temperatures					P	<input type="checkbox"/>					
Preventing Contamination by Hands				Food/Color Additives and Toxic Substances														
8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf	<input type="checkbox"/>	22	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>					
Hands clean and properly washed							Food additives: approved and properly used					P	<input type="checkbox"/>					
9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>	23	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>					
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed							Toxic substances properly identified, stored & used					P/Pf/C	<input type="checkbox"/>					
10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	24	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>					
Adequate handwashing sinks, properly supplied/accessible							Compliance with variance/specialized process/ROP criteria/HACCP Plan					P/Pf/C	<input type="checkbox"/>					
Approved Source				GOOD RETAIL PRACTICES														
11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>	<i>Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.</i>											
Food obtained from approved source							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											
12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf	<input type="checkbox"/>	OUT	N/A	N/O	V	COS	R	OUT	V	COS	R		
Food received at proper temperature							Safe Food and Water				Proper Use of Utensils							
13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf	<input type="checkbox"/>	30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			P	<input type="checkbox"/>	<input type="checkbox"/>			
Food in good condition, safe, and unadulterated							Pasteurized eggs used where required											
14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>	31	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>			
Required records available: molluscan shellfish identification, parasite destruction							Water and ice from approved source											
GOOD RETAIL PRACTICES				Food Temperature Control				Utensils and Equipment										
15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	32	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Pf	<input type="checkbox"/>	<input type="checkbox"/>			
Proper cooling methods used; adequate equipment for temperature control							Variance obtained for specialized processing methods											
16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf	<input type="checkbox"/>	Food Identification				Physical Facilities							
Plant food properly cooked for hot holding							37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>			
17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	Food properly labeled; original container											
Approved thawing methods used							Prevention of Food Contamination											
18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	38	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>			
Thermometers provided and accurate							Insects, rodents, and animals not present											
Food Identification				Violations documented				Date corrections due				#						
19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	39	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>			
Food properly labeled; original container							Contamination prevented during food preparation, storage & display											
20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>			
Prevention of Food Contamination							Personal cleanliness											
21	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		C	<input type="checkbox"/>	41	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			C	<input type="checkbox"/>	<input type="checkbox"/>			
Insects, rodents, and animals not present							Wiping cloths: properly used and stored											
22	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>	42	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>			
Contamination prevented during food preparation, storage & display							Washing fruits and vegetables											
23	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	Physical Facilities				Appeal							
Personal cleanliness							50	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	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.							
24	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	51	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Pf	<input type="checkbox"/>	<input type="checkbox"/>			
Wiping cloths: properly used and stored							Hot and cold water available; adequate pressure											
25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		C	<input type="checkbox"/>	52	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>			
Washing fruits and vegetables							Plumbing installed; proper backflow devices											
26	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>	53	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>			
Prevention of Food Contamination							Sewage and waste water properly disposed											
27	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	54	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Pf/C	<input type="checkbox"/>	<input type="checkbox"/>			
Insects, rodents, and animals not present							Toilet facilities: properly constructed, supplied, & clean											
28	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		C	<input type="checkbox"/>	55	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			C	<input type="checkbox"/>	<input type="checkbox"/>			
Contamination prevented during food preparation, storage & display							Garbage and refuse properly disposed; facilities maintained											
29	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>	56	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			P/Pf/C	<input type="checkbox"/>	<input type="checkbox"/>			
Personal cleanliness							Physical facilities installed, maintained, and clean											
30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	Adequate ventilation and lighting; designated areas used											
Wiping cloths: properly used and stored							Natural rubber latex gloves not used per CGS §19a-36f											
31	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>	Violations documented				Date corrections due				#			
Washing fruits and vegetables							Priority Item Violations											
32	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf	<input type="checkbox"/>	Priority Foundation Item Violations											
Variance obtained for specialized processing methods							Core Item Violations											
33	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>	Risk Factor/Public Health Intervention Violations											
Proper cooling methods used; adequate equipment for temperature control							Repeat Risk Factor/Public Health Intervention Violations											
34	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf	<input type="checkbox"/>	Good Retail Practices Violations											
Plant food properly cooked for hot holding							Requires Reinspection - check box if you intend to reinspect											
35	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>												
Approved thawing methods used																		
36	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>												
Thermometers provided and accurate																		
37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>												
Food properly labeled; original container																		
38	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>												
Insects, rodents, and animals not present																		
39	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>												
Contamination prevented during food preparation, storage & display																		
40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Pf/C	<input type="checkbox"/>												
Personal cleanliness																		
41	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		C	<input type="checkbox"/>												
Wiping cloths: properly used and stored																		
42	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		P/Pf/C	<input type="checkbox"/>												
Washing fruits and vegetables																		