Risk Category: 2 Food Es	tabli	shm	nent	Insp	ecti	on Re	port		F	Page 1 of	
Establishment type: Permanent Temporary Mobile Other							- 1	23/23			
			200	annecticut W.		Date:					
Establishment 2nd Bridge Brewery			Here!		11/2	Time In		AM/P		t	AM/PM
Address 642 Hilliard St St 2003	5		) F	H		LHD /		sches			
Town/City Marchester						Purpose	e of Ins	pection:	Routine	Pre-	op
Permit Holder Steve White		Connecticut Department of Public Health				Reinspe	COLUMN CONTRACT	0.00	ther TD+	1	
FOODBORNE ILLNESS RIS Risk factors are important practices or procedures identified as the most prevail										thorne illness	or injury
Mark designated compliance status (IN, OUT, N/A, N/O) for each number	Charles Later Shows	*ASS. 1.1 ASS. 1017 .	100000	in comp		200000000000000000000000000000000000000	not in con	and the same of th	N/A=not applicabl	VI. 11 11 11 11 11 11 11 11 11 11 11 11 11	=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation	type N		1		x for C	OS and/or			n-site during insp		=repeat violation
IN OUT N/A N/O Supervision		V	cos	R		UT N/A N/			rom Contamina	tion	V COS R
Person/Alternate Person in charge present, demonstrates knowledge and performs duties		Pf	0				-	eparated and	es: cleaned & s	anitized (	P/C O O
Certified Food Protection Manager for Classes 2	·	С	0	-	/		Proper	disposition o	f returned, previ	iously	P 0 0
3, & 4 Employee Health									ed, and unsafe for Control for Safe		
3 Management, food employee and conditional employee	ee;	P/Pf	00	18	0	000	Proper	cooking time	and temperatur	res	P/Pf/C O
knowledge, responsibilities and reporting	_	31 to 00 10		19	0		Proper	reheating pro	ocedures for hot	holding	POO
Proper use of restriction and exclusion  Written procedures for responding to vomiting an	nd	P	0	21				hot holding t	and temperatures	es	P O O
diarrheal events		Pf	0	22	0	000	Proper	cold holding	temperatures		(P) 0
Good Hygienic Practices		1			0	009			g and disposition		P/Pf O O
6 Proper eating, tasting, drinking, or tobacco produ 7 No discharge from eyes, nose, and mouth	ıcts use	P/C C	00		0		Time a		alth control: pro	cedures	P/Pf/C O O
Preventing Contamination by Hands		10		1	-		and re		r Advisory		
8 Ø P Hands clean and properly washed		P/Pf	0	25	0		Consum		vided: raw/undercoo	oked food	Pf OO
9 No bare hand contact with RTE food or a	. F	P/Pf/C	0	5		/			ible Population		
pre-approved alternative procedure properly follo  Adequate handwashing sinks, properly supplied/acce		(Pf/C		20	O		_		prohibited foods no and Toxic Subs		P/C   O   O
Approved Source	SSIDIC				0/2				roved and prope		POO
11 O Food obtained from approved source	(1	P/Pf/C	0	7	./				operly identified		P/Pf/C O O
12 Food received at proper temperature  Food in good condition, safe, and unadulterated		_	0	2				& used			PIPIIC O O
	- 1	P/Pf			- T				pproved Proce riance/specialize		
14	F	P/Pf/C	0	29	0				a/HACCP Plan	, a	P/Pf/C O O
Cond Potail Prostings are appropriate and				PRAC				1-1-2-1-12			
Good Retail Practices are preventative mea.  Mark OUT if numbered item is not in compliance V=violation type	Mark in								te during inspecti	on P	=repeat violation
OUT N/A N/O Safe Food and Water		V	cos		TUC	u. 0. 10		roper Use of		Oll IV	V COS R
30 Pasteurized eggs used where required		Р	0				sils: prop	perly stored			c 00
31 Water and ice from approved source 32 Variance obtained for specialized processing methods		P/Pf/C Pf	00	144	00	ensils/equ	ipment/lir	nens: properly	stored, dried, & h	andled	Pf/C O O
Food Temperature Control						loves use	-		roperly stored & u	sed	P/C O O
Proper cooling methods used; adequate equipment fo	or	Df/C	0						d Equipment		
lemperature control				17					ces cleanable,		P/P(C) 0
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used		Pf	00					constructed, a	and used maintained and	wood:	0
36 Thermometers provided and accurate		Pf/C	0	5 48					est strips availa		Pf/C O
Food Identification				49				urfaces clean			(6)00
37 Food properly labeled; original container		Pf/C	00						Facilities		
Prevention of Food Contamination  38 Insects, rodents, and animals not present		Pf/C	00				The state of the s	available; ade proper backfl	equate pressure		Pf O O
39 Contamination prevented during food preparation, storage & display	y F		00					water properl			P/Pf/C O O
40 O Personal cleanliness			00						ted, supplied, &		Pf/C O O
41 Wiping cloths: properly used and stored 42 Washing fruits and vegetables	15		00						ed; facilities main		C 0 0
									ained, and clear designated are		P/Pf/C () ()
Natural rubber latex gloves not used per CGS §19a-36f											
Person in Charge (Signature)	5/	00/	100			s docume		I	Date correction		#
2 1	4	3/	<del>00</del>			m Violation oundation		lations	6-4-2		3
Person in Charge (Printed) Steepen 7. White	2	/		Cor	e Item	Violation	ns .		8-25-2		13-
Inspector (Signature) it a new Payer Date	512	2/2	ス	Risl	Fact	or/Public	Health In	tervention Vi	olations		4
Date Date	2/2	2/2	J			ail Practic			ntion Violations		13
Inspector (Printed) Denise Payne		~		Red	uires	Reinspe	ction - c	heck box if v	ou intend to rei	nspect	-
Appeal: The owner or operator of a food establishment aggrieve or dispose of unsafe food, may appeal such order	to the	s orde	er to co	orrect a	ny ins	pection v	violation	identified by	the food inspe	ctor or to	hold, destroy,

	Food Esta	ablishment Ins	spection I	Report	Page 2 of
LHD Marche	ster	Inspection Report Continuati	ion Sheet		5-23-23
Establishment 2 <sup>n</sup>	d Bridge Bre	wery Town Mar	whester.		-
		TEMPERATURE OB			
Item/Location/Pi		Item/Location/Process	s Temp	Item/Location/P	
Chicken Buff	260 35F			Handsink +	orwater 1/8
Cooxed Onio	n 36F				
100					
	OF	SERVATIONS AND COL	DDECTIVE ACTI	DAIG	
Item Violation	s cited in this report must b	BSERVATIONS AND COP be corrected within the time frame	es below, or as stated	in sections 8-405.11 & 8-	406.11 of the food code.
Number					
10 PF Soap	dispenser ne	reded (mounted in home Kitchen	)		_
11P jorre	drelish how	n home Kitchen	Discord	John Cons	
٥	0		(3.3(0-3		
227 Cold o	an - butter	+ 1. + Dod 1. 10 @	EC Disc	arda (o	
Cold	ep suco	tout produce@ 5/19/23 Part	235 <u>                                    </u>	0000	3
Color	rep serviced	- 5/19/23 rari	isonoraer	•	
470 0,115		. /			
110 Cutti	ng board a	chine unclear	_		
11 to The	is the man	NO 1	,		
Nov-toods	turage in U	IC dury car	dprep rep	Dav	
.10 0 .	•		0.0	: ==:	
49C Casile	ton wic u	inclear			
New	ice mache	- Maritavac	* Check J	100ccliamo	co Regusence
			7. 0. 50.	ion name.	a yegan a y
	960				
	11	6.11	3		
erson in Charge (Sig	nature)	/Who		Date	5-23-23

Inspector (Signature)

Risk Category: Food Establ	lishn	nen	t Ir	spe	ecti	on R	eport	Page 1	of	-	
Establishment type: Permanen) Temporary Mobile Other						Date:	5/18/23				
Establishment ANOIS DIZZO		+eepir	ng Conne	cticut Healt	1	Time I	n	AM/PM Time Out 3	:30	_AM/	IPM)
Address 290 B Broad ST			D	H		LHD	mancin	ester			O
Town/City Manchester					7	Purpo	se of Inspection	: Routine Pr	e-op		
Permit Holder And 1 Heather	C	onnecti of Po	icut De ublic H	partmen ealth	t.	Reins	pection	Other			
FOODBORNE ILLNESS RISK FA	ACTO	RS.	ANI	D PU	BLI	C HE	ALTH INTERV	ENTIONS	Wite	N/S	
Risk factors are important practices or procedures identified as the most prevalent cont	ributing fa	ctors c	of food	iborne il	lness o	r injury. I	nterventions are contr	ol measures to prevent foodborne illne	ess or injur	у.	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if	tem	11	N=in	compli	ance	OUT	=not in compliance	N/A=not applicable N	O=not ob	oserve	ed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appr	opria	te box	for C	OS and/	or R COS=corre	cted on-site during inspection	R=repea	at viol	lation
IN OUT N/A N/O Supervision	V	cos	_	1		T N/A		ion from Contamination	V		S R
Person/Alternate Person in charge present							○ Food separate		R/C	0	
demonstrates knowledge and performs duties	Pf	0	0	16	200	0		surfaces: cleaned & sanitized			
Certified Food Protection Manager for Classes 2					10	1000		tion of returned, previously			
2 8 0 3, & 4	С	0	0	17				litioned, and unsafe food	P	0	0
Employee Health					1		Time/Tempera	ature Control for Safety			
Management, food employee and conditional employee;	P/Pf	0		18	<b>3</b> C		Proper cooking	time and temperatures	P/Pf/C	0	0
knowledge, responsibilities and reporting	1783,34564.4	-			$\supset$	0	Proper reheati	ng procedures for hot holding		0	0
Proper use of restriction and exclusion	P	0	0	20	$\supset \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	20	Proper cooling	time and temperatures			
Written procedures for responding to vomiting and	Pf	0		21		0	Proper hot hole	ding temperatures		0	
diarrheal events				22 0	2			lding temperatures			0
Good Hygienic Practices				23 0	2			arking and disposition	P/Pf	0	0
6 O Poper eating, tasting, drinking, or tobacco products us 7 O No discharge from eyes, nose, and mouth				24	2			lic health control: procedures	P/Pf/C	0	0
	С	0	$\Box$				and records		1.020 10.00		
Preventing Contamination by Hands  8	DIDE			25 4	1			sumer Advisory		1-	
No hard hand contact with DTE food or a	PIPI	0	=	25	90			ry provided: raw/undercooked food	l Pf	10	0
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0	10			sceptible Population sused; prohibited foods not offered	Dic		1
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	20 0		101		ives and Toxic Substances		0	10
Approved Source	11.110			27 0	510	-		: approved and properly used		0	1
11 Sood obtained from approved source	P/Pf/C	0	0		ak I		Toxic substant	ces properly identified,	-	-	
12 Or O Food received at proper temperature		0	_	28	<b>TX</b>		stored & used	ses property identified,	P/Pf/C	<b>X</b>	0
13 Food in good condition, safe, and unadulterated		O						ith Approved Procedures			
Required records available: molluscan shellfish	P/Pf/C	0	0	29		1		th variance/specialized	מוסנות		
identification, parasite destruction								criteria/HACCP Plan	P/Pf/C	10	0
	OD RE										
Good Retail Practices are preventative measures to							emicals, and physic	al objects into foods.			
	n appro	-	-	for CO	S and	or R	COS=corrected	on-site during inspection	R=repea	t viola	ation
OUT N/A N/O Safe Food and Water	V	cos		OL				se of Utensils	V	cos	R
30 Pasteurized eggs used where required	Р	0	-				ensils: properly sto		C		0
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C	-		44	O Ute	ensils/ed	quipment/linens: pro	perly stored, dried, & handled		0	
Food Temperature Control	Pf	0	0		-		Contract Con	les: properly stored & used		0	
Description of the profile of the state of t			-	40		oves us	sed properly	P	C	0	10
temperature control	Pf/C	0	0	-	E	hac ho		s and Equipment surfaces cleanable.	_	_	-
34 O O Plant food properly cooked for hot holding	Pf	0	0	47	3		lesigned, construc	en malika-mara distila sun sanda distina da sun santa.	P/Pf/C	0	0
35/ X 🛇 Approved thawing methods used		X	0		IM.			alled, maintained and used;	1	+-	+
36 C Thermometers provided and accurate	Pf/C	6	0	48				and test strips available	Pf/C	0	0
Food Identification				49 (			contact surfaces of		С	0	0
37 C Food properly labeled; original container	Pf/C	0	0					sical Facilities			_
Prevention of Food Contamination				50 0	) Ho	t and c	old water available	e; adequate pressure	Pf	10	0
38 O Insects, rodents, and animals not present	Pf/C	0	0				installed; proper b		P/Pf/C		
Contamination prevented during food preparation, storage & display	P/P/C		0				and waste water pr		P/Pf/C		
40 Personal cleanliness	Pf/C	-	_	53 <	OT O	ilet faci	lities: properly con	structed, supplied, & clean	Pf/C	0	0
41 O Wiping cloths: properly used and stored	C	0						lisposed; facilities maintained	С		0
42 O Washing fruits and vegetables	P/Pf/C	0	0	55 <	⊃ Ph	ysical f	acilities installed,	maintained, and clean	P/Pf/C	0	0
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable		56		equate	ventilation and lig	hting; designated areas used	C	0	0
								not used per CGS §19a-36f			
Person in Charge (Signature)	18/	73					nented	Date corrections due		#	
	10/1	_				n Viola	n Item Violations	5/21/23		_	
Person in Charge (Printed) HOTALY C7058CLIN				Core	ltem	undatio Violatio	nne violations	81,0122		4	-
ALITAIN HIMNIN -i.	n1 -	-	-					on Violations		4	-
Inspector (Signature) Julius School Date 5	X12	3		Risk Factor/Public Health Intervention Violations Repeat Risk Factor/Public Health Intervention Violations							
INLINOID EXMINAVA	1			Good	Reta	il Pract	tices Violations			-	
spector (Printed)   W											
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to	corre	ect an	v insi	ection	violation identifie	ed by the food inspector or t	o hold.	destr	rov.
or dispose of unsafe food, may appeal such order to the	Directo	or of l	Heal	th, no	t late	than	forty-eight hours	after issuance of such orde			-80

1st - White: Health Department

	FOO	U ESL		ıt inspe	ction	Report	Page	_ of
LHD_M_(	anchester		Inspection Report	Continuation She	eet		Date 5/18/	23
Establishr	ment Andi n	1770	Town	Manch	estev			
		reac	TEMPERATU		<u> </u>			
Item	/Location/Process	Temp	Item/Locatio		Temp	Item/Lo	cation/Process	Temp
Walk	in cooler	•	101770 COLO		•	Hand sint	Committee of the Commit	1126
Chook		38F	Ham		ADF	1100.00 21.10	MIGICAL	1101
Ham		39F	IMODITION II		416	in banan	Liniv	167F
Wina		30F	Charle		415	interna	CVIIX	101
Savel		<b>U</b>	Marso		701			
Suvu		381	CAIAN CAIA	ONIO				
MAAA	luo.		Dalla Colo	10	40=			
reach	as as my dad	m in F	FEILLIVE		40+			
wing	5-alsurved	50-605	Ham		AOF			
V	Violations cited in this	report must b	SERVATIONS A	ND CORREC	TIVE ACTI	ONS	44.9.0.400.44 -5#	
Item	Violations cited in this	report must b	e corrected within the	une names belo	w, or as stated	in sections 6-40:	0.11 & 8-406.11 OF th	e tood code.
· Number								
MAHAM	teststrips av	allani	P -					
T JOI CAL	100101110000	MITTER	<u> </u>					
			Washington a comment					
5PF	Food produc	+ All+ +	haluling rai	nm ++ m	n -na	LA MILLIA	1 At range +	+mn
211	in the line is	2 ( E .	TIM VOITING TO		th tio	THUVILL	1 al loure	
	Meatballs	26' D	pepperoni	325 -	- COS -	moved	to wic.	•
		100	1 -1 1					
1120	cantalla ave tu	Ad ar	04.05	Aunt - ~		۸۲		
43 C	comainer va	ru us	Scoop int	onto su	100-0	02		
39 C	Chicken HIL	nac St	tored and	-100V in	MAINIK	In con	er-cos	
200	Madication	2 121 2		1 1 1 1	VVVIII	111 000	201	
28 p	MEGICATION	1 900	AC ALLICIT	mave.	-cos			
20 P	chickeh w	MMM	betrafor	7 50-61	OFINT	PAChIN	2 coolex	
	made light	VANIA	inerctal	1 dicci	ardad		10000	)
- All rest	mant hear	ruum	persiur	r - aisu	Muca	-003		
45C	Linen cinset	in od	CK - store	d single	SPrvill	e on Flor		
150	tood is radius							0/
100	Food produc	LLMI	cher wir	igs) in	wain	IN NOT	PIOTECTE	1
	161			V			•	
* ALAK	food therm	0100 0 14	V augus	ni A				
HULLA	Loon Linin	unun	<u>avaijai</u>	اللاب الله		11		
notex	good giov	e use	+ handwa	isnina (	lbserv	ed		
nattk	discussed	CAAlin	a sonatil	05 110	FOF +	076F/21	24 70 0	IF/Ain
HULLA	CHO COOS CO	C001111	a pracin	20 - 15	00-1	0 10, (21	11) 1074	1. (4nr)
notex	aiscussea	FUA (	m'ecklist	- WI DP	VRAN I	ncha	role	
				- P	1 001 1	110100		
0 . A 1/a	C 1	1	A :00 0 1 A	0 16.00				
Note*	Fact Sheets	to b	e emaile	a for c	DOLIR	701		
								-
				4				
		00000	0 1	- V			1.1	- Comment
Person in	Charge (Signature)	(1000)	well cass	en			Date 5//	8/23
	(Signature) Zaw	in	Strand IN				Date 5/18	14.1
	COMMISSION TOUCH		- 1111 11 X / //				HATE WILL	1 / 1



## TOWN OF MANCHESTER HEALTH DEPARTMENT

479 Main Street, P.O. Box 191, Manchester, CT 06045-0191 Phone Number: **(860) 647-3173**, Fax Number: **(860) 647-3188** 

## 2022 FDA Food Code Checklist

The purpose of this checklist is to inform you on the new regulations and the changes that have been made within the Food Code. The Manchester Health Department recognizes that the adoption of the 2022 FDA Food Code will be a transition for you, for inspectors and Food Establishments. We will continue to work with you to educate and implement the new regulations within this code. We understand that this may generate questions, which we are committed to working with you during this transition period and process.

Facility: Andi S p1270	
Violations Documentation No Numerical Scoring Grade-3 Violation Levels	CEPM/PIC on every shift during operating hours 1 Pf Implementing Date Marking (Sec. 3-501.17) 23 P/Pf
<ul> <li>PRIORITY – 72 hours for correction</li> <li>PRIORITY FOUNDATION – 10 days for correction</li> </ul>	Signage/Posters required  Handwashing sign at all handwash sinks (section 6-301.14) 10c
CORE – 90 days for correction or determined by inspector  Corrections and ReInspections      Corrected on site violations	<ul> <li>9 Major Allergens 37c</li> <li>Outdoor Allowance for dogs -preapproval and sign required. 38 Pf</li> </ul>
Reinspection – case by case     Repeat violations  No Bare Hand Contact – Correction Required 9 P/Pf/C	Employee Assessment Form  Comiting/Diarrhea Written clean-up Policy  Mop Sink Required (Sec. 5-203.13) CORE -90 day  Temperature: Final Cook Temperatures
Resources:	
2022 FDA Food Code: https://www.fda.gov/food/fda-food-cod	de/food-code-2022
Town of Manchester Health Dept: https://www.manchesterct	.gov/Government/Departments/Health-Department
FDA Handbook: <a href="https://www.fda.gov/food/retail-food-indus-protection-employee-health-and-personal-hygiene-handbook">https://www.fda.gov/food/retail-food-indus-protection-employee-health-and-personal-hygiene-handbook</a>	stryregulatory-assistance-training/retail-food-
Environmental Health Inspector:	
Signature of Inspector: 2000 A1000	W
Print Name: Lauren Grand	Date: 5/18/23
Person In Charge: Signature of Person In Charge:	Title: NAMA CLOSE N
Print Name: Heather Crosselin	Title: \www.ll\
Email <u>heather, gosselin 0307. B. Qu</u>	rail-com
J	

Risk Category: Food Establ	ishn	ner	nt Ir	specti	ion Rep	port	Page 1 c	of <u>3</u>
Establishment type: Permanent Temporary Mobile Other					Date:	5/25/23		
Establishment Bowers at Robertson		40	onne Conne	Cicar Houly	Time In_	AM/PM Tin	ne Out	AM/PM
Address 45 N School St		D	P	H)	LHD V	Manchestr		
Town/City Manchester		conec	tiget De	partment		of Inspection: Routi	he Pro	e-op
Permit Holder MTPS		of	Public H	ealth	Reinspe			
FOODBORNE ILLNESS RISK F. Risk factors are important practices or procedures identified as the most prevalent cont							vent foodborne illne	ess or injury
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				compliance		ot in compliance N/A=not ap	5.3 1.5%	O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type						R COS=corrected on-site duri	ng inspection	R=repeat violation
IN OUT N/A N/O Supervision	V	cos	R		N/A N/O		the comment of the state of the	V COS R
Person/Alternate Person in charge present,	Pf	C	0	15 😿 🤇		Food separated and protecte Food-contact surfaces: clean		P/C O O
demonstrates knowledge and performs duties  Certified Food Protection Manager for Classes 2,	_	+				Proper disposition of returned		
2 Certified Food Protection Manager for Classes 2, 3, & 4	C	0	0	17		served, reconditioned, and ur		P 0 0
Employee Health						Time/Temperature Control		
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	f	0			Proper cooking time and tem Proper reheating procedures		P/Pf/C O O
4 Proper use of restriction and exclusion	P	10	0	20 0		Proper cooling time and temp	peratures	P 0 0
5 Written procedures for responding to vomiting and	Pf			21 @	000	Proper hot holding temperatu	ires	P 0 0
diarrheal events	PI		$\square$	22	500	Proper cold holding temperat	ures	POO
Good Hygienic Practices  6 OProper eating, tasting, drinking, or tobacco products us	- D/O			23	000	Proper date marking and disp	position	P/Pf O O
6 Proper eating, tasting, drinking, or tobacco products us 7 No discharge from eyes, nose, and mouth	e P/C		00	24 0	000	Time as a public health contr and records	oi: procedures	P/Pf/C O
Preventing Contamination by Hands						Consumer Advisor	У	
8  Hands clean and properly washed	P/Pt	f C	0	25 💿 🤇	0 0	Consumer advisory provided: raw/u	undercooked food	Pf OO
9 No bare hand contact with RTE food or a	P/Pf/C		0	00/0/		Highly Susceptible Pop		
pre-approved alternative procedure properly followed  Adequate handwashing sinks, properly supplied/accessible	Pf/C	10	0	26		Pasteurized foods used; prohibited ood/Color Additives and Toxi		P/C 0 0
Approved Source	171/0	,	10	27 0		Food additives: approved and		POO
11 O Second obtained from approved source	P/Pf/C	10	0			Toxic substances properly ide		
12 O O Food received at proper temperature	P/P	f C	0	28		stored & used		P/Pf/C O
Food in good condition, safe, and unadulterated	FP	)0	0			Conformance with Approved		
14 Crequired records available: molluscan shellfish identification, parasite destruction	P/Pf/C		0	29 🔾		Compliance with variance/sporocess/ROP criteria/HACCP		P/Pf/C O
	OD RE	TA	L PF	RACTICES	S	procedure dischar in tool	1 1011	
Good Retail Practices are preventative measures to	o contro	ol the	addit	ion of patho	gens, chem	nicals, and physical objects into fo	oods.	
The state of the s	_	-	-	for COS and	nd/or R	COS=corrected on-site during i	In the second second	R=repeat violation
OUT N/A N/O Safe Food and Water  30 Pasteurized eggs used where required	V P	-	S R	OUT	n una utana	Proper Use of Utensils sils: properly stored		V COS R
31 Water and ice from approved source	P/Pf/C		_			pment/linens: properly stored, dri	ed & handled	C O O
32 O Variance obtained for specialized processing methods	Pf	_	0	45 O Si	Single-use/si	ngle-service articles: properly sto		P/C 0 0
Food Temperature Control				46 O G	Sloves used			c 0 0
Proper cooling methods used; adequate equipment for temperature control	Pf/C	C	0	T IE		Utensils and Equipm		
34 O Plant food properly cooked for hot holding	Pf		0	12/10 31		on-food contact surfaces clean signed, constructed, and used	iable,	P/Pf/C O O
35 O Approved thawing methods used			0	IVA		ng facilities: installed, maintain	ed and used:	
36 C Thermometers provided and accurate			0			ents, sanitizers, and test strips		Pf/C O O
Food Identification		1 -	_	49 🧼 N	Non-food co	ontact surfaces clean		(0)00
37 Food properly labeled; original container  Prevention of Food Contamination	Pt/C		0	50 O I	lat and sale	Physical Facilities d water available; adequate pro		N 000
38 Insects, rodents, and animals not present	Pf/C		0			stalled; proper backflow device		Pf O O
39 Contamination prevented during food preparation, storage & display	P(Pfi)					d waste water properly dispose		P/Pf/C O O
40 Personal cleanliness	Pf/C		0	53 O To	oilet faciliti	es: properly constructed, supp	lied, & clean	Pf/C O O
41 Wiping cloths: properly used and stored						refuse properly disposed; facilities		200
42 Washing fruits and vegetables	P/Pf/C					ilities installed, maintained, an entilation and lighting; designa		P/P(IC)
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is av	ailab	le.			per latex gloves not used per C		
Person in Charge (Signature) — Date 5 /	25	10	3		ns docume em Violatio		rections due	#
	Priority Fo	oundation l	Item Violations Jun	e4,23	92			
Person in Charge (Printed) Michaelle Hills	Risk Fact	n Violations tor/Public H	Health Intervention Violations	1St 25,8	23 4 "			
Inspector (Signature) Denisitaine Date 5	Repeat Risk Factor/Public Health Intervention Violations							
Inspector (Printed) Venuse Paune Requires Reinspection - check box if you intend to reinspect								
Appeal: The owner or operator of a food establishment aggrieved by to or dispose of unsafe food, may appeal such order to the	his ord Direct	er to	corr f Hea	ect any ins Ith, not late	spection viter than for	iolation identified by the food rty-eight hours after issuance	inspector or to of such orde	to hold, destroy, r.

drayne@manchestercT.gov.

Food Establishment Inspection Report Page 2 of 3

			MILOITII OITE IIIOPE		200016		i <del></del>
LHD Ma	nchester		Inspection Report Continuation Sh	neet		Date 5-25	-2023
Establishr	ment Bowers (	Robe	1300 Town Manche	ster		5-25-	2023 2015e RC
			TEMPERATURE OBSER		la compa	Test	C 13C PO
Item	/Location/Process	Temp	Item/Location/Process	Temp	Item/Lo	cation/Process	Temp
milk	reach in cooler	38F			Hand Sin	k kitchen	125F
	otato fries	200 F			Quat Buc	The second secon	
	cheese walkin	40F			your soc	re(	300ppm
5/100	Store willia	38F					
J#1119	Eleese walkin	381					
					1		
		00	SERVATIONS AND CORRE				
	Violations cited in this		SERVATIONS AND CORRE e corrected within the time frames be			11 2 2 406 11 af the	food and
Item Number	Violations steet in this	roport mast be	corrected within the time hames be	low, or as stated	III Sections 6-400	). 11 & 6-406. 11 Of the	Tood code.
Number							
49c	unclean do	indecs ,	under prep tables in	Litche	on (05	Š	
844	11 11 1 1 1	1	may prop quotes in	MICH	41.000		
13PF	Multiple dent	red can	ned goods in dry sto	rage. Di	Scarded	C05	
49c 49c	unclean gas	sket in	work in cooler. C	05			
49c			work in coolerand		- lac i	المالات انع مرا	
20 -	VIICIEAN PAN	cover 11	WOULD IN COOPERAND	KITCHEN !	reater v	U.U SUBMITTED	
SUPF	tood prepared	next to	hand sink with a	4 Splash	guard.	reperation Provide	105
55c on	Ceilina over a	lish was	sh area not smooth	DE ON SIL	1 classable	ماريم در د	لملاه
			211 34 65 107 31 60 11	1 01 000119	Mention	. W.O Sub.	IJITKO
						49	
16.	1 1 1 1 1 1	1/27 1			1 11		
Note:	Lighting (1)	0(2)	oulbs not bright -	- W.O.	submitte	d	
	0 0		<u> </u>				
			X				
							75
							Employed The Control of the Control
							禮。
						Novel	ANGE
Person in	Charge (Signature)	m				Date 5/25	5/22
	(Signature)	Min. V	. 11. 0			-1-	122
iiispector (	(Signature)	ruse ta	in a second			Date 5/25/	25

#### **Denise Payne**

From:

Doreen Ruggiero <doreenr@mpspride.org>

Sent:

Thursday, May 25, 2023 1:37 PM

To:

Michelle Hills

Cc:

Elisha Feenstra; Teresa Thompson; Nick Aldi; Denise Payne

Subject:

Re: Work Order

#### EXTERNAL MESSAGE - Think Before You Click!

Hi,

All set! A work order has been submitted.

Thanks, Doreen

### Doreen Ruggiero \*)/

Administrative Assistant Food Service Department Manchester Public Schools Northwest Park 448 Tolland Tnpk., Bldg. 1 Manchester, CT 06042 Phone: 860-647-3462

Fax: 860-647-5037



On Thu, May 25, 2023 at 12:46 PM Michelle Hills < <a href="mhills@mpspride.org">mhills@mpspride.org</a>> wrote:

Good afternoon,

We had our inspection today and need to correct a few things in the kitchen. Can you please put in a work order for the following.

- 1) Clean the fan covers in the walk-in cooler and kitchen heater.
- 2) Have the ceiling over the dishwash area repaired so it can be easily cleaned.
- 3) Change the lightbulb in the walk-in fridge.

Thank you, Michelle Hills

											$\neg$			
Risk C	Category:	: 4	Food Establ	lishn	ner	nt Ir	isp	ecti	on Rep	ort	Page 1	of		
Estab	lishment	type:	Permanent Temporary Mobile Other						Date:					
Estab	lishment	B	ickley Elementary		400	on Conne	etitat Hea	<u>a</u>	Time In_	Time Out		AM/P	M	
	ss 25	n Ve	ernon St	DPH					LHD Marchester					
			cheste						Purpose of Inspection: Routine Pre-op					
				-	onnec	ticut De	partme	nt	Reinspec	ction Othe	r			_
Permi	t Holder	1111	FOODBORNE ILLNESS RISK F.	ACTO	RS	AN	D PL	JBLI			NS			
	Risk facto	rs are imp	ortant practices or procedures identified as the most prevalent con	tributing fa	actors	of food	dborne	illness c	or injury. Inter	ventions are control measure	es to prevent foodborne ill	ness or injur	/.	
Ma	ark designa	ated com	pliance status (IN, OUT, N/A, N/O) for each numbered i	item				liance				I/O=not of	n water	-
-	ority item		ority foundation item				ate box				n Contamination	R=repea	cos	
IN	OUT N/A		Supervision son/Alternate Person in charge present,	V	COS	R	15		UT N/A N/O	Food separated and pr		-	000	7/10
1 3	00	SOURCE STATE	nonstrates knowledge and performs duties	Pf	C	0	16	-		Food-contact surfaces				_
2 0	00	Cer	tified Food Protection Manager for Classes 2,	С	0	0	17	0		Proper disposition of re served, reconditioned,		F	0	
		3, 8	Employee Health	_	4					Time/Temperature Co				
	-	Mar	nagement, food employee and conditional employee;	D/D			18	05	000	Proper cooking time as				
3 3		kno	wledge, responsibilities and reporting	P/P	111	-				Proper reheating proce			0	
4 2	0		per use of restriction and exclusion	P	0	0				Proper cooling time an Proper hot holding tem			000	
5 3	0	The second second	tten procedures for responding to vomiting and rheal events	Pf	C	0				Proper cold holding ten			0	_
	1 1000	ulai	Good Hygienic Practices		+	h				Proper date marking a		P/Pf	_	_
6 2	0	Pro	per eating, tasting, drinking, or tobacco products us	se P/C	10	0	24	0	000	Time as a public healt		es P/Pf/C	0	
7 0	0		discharge from eyes, nose, and mouth	С		0	24			and records		171 170		$\Box$
	1		Preventing Contamination by Hands	l m/m			05			Consumer A  Consumer advisory provide		od Pf	101	
8 👽	0		hads clean and properly washed bare hand contact with RTE food or a	P/P	1 0	0	25	00	) Q	Highly Susceptible		DG PI		-
9 2	00	( )	-approved alternative procedure properly followed	P/Pf/C		0	26	0	0	Pasteurized foods used; pr		ed P/C		0
10 @	0		equate handwashing sinks, properly supplied/accessible	Pf/C		0			CONTRACTOR OF THE PERSONS	od/Color Additives an				
	/		Approved Source				27	0	20	Food additives: approv		ed 1	0	0
11 0	0	Foo	od obtained from approved source	P/Pf/C		0	28	8		Toxic substances prop	perly identified,	P/Pf/		
12 🔾			od received at proper temperature		f C		20			stored & used				$\subseteq$
13 🖸	10		od in good condition, safe, and unadulterated	P/P	f C	0	-		- /	enformance with App Compliance with varia				
14 0	0		quired records available: molluscan shellfish ntification, parasite destruction	P/Pf/C		0	29	0		process/ROP criteria/h		P/Pf/		0
	+	1.00	GC	OD R	ETA	IL PI	RACT	TICES	3					
			Good Retail Practices are preventative measures							icals, and physical object	s into foods.		West to the same	
Ma	rk OUT if r	numbered		in appro	_	_			d/or R	COS=corrected on-site		R=repe		
	T N/A N/O		Safe Food and Water	V	-	S R		TUC		Proper Use of U	tensils	V C		_
30 🔾	the second secon		zed eggs used where required nd ice from approved source	P/Pf/C	_	00				sils: properly stored pment/linens: properly sto	ared dried & handled		0	-
31 (	AND DESCRIPTION OF THE PERSON NAMED IN		e obtained for specialized processing methods	Pf						ngle-service articles: prop		P/0		
UL U		Variation	Food Temperature Control				-		Sloves used			С	_	
33 🤇	The state of the s	Proper c	cooling methods used; adequate equipment for	PfIC		0				Utensils and E				-
	to the same of		ture control				47			on-food contact surface	(20)	P(Pf/	10	0
			od properly cooked for hot holding	Pf		0	-			signed, constructed, and ng facilities: installed, m		_		
35 C			nd thawing methods used meters provided and accurate			000				ents, sanitizers, and tes		' Pf/C	0	0
30		Heimoi	Food Identification	1 0	٥١٠					ontact surfaces clean	ot otripo avariable	C	0	0
37	Food pr	operly la	beled; original container	Pf/0		0				Physical Fa	acilities			
			Prevention of Food Contamination				50			d water available; adeq		P		
			, and animals not present			0		-	0	stalled; proper backflov	ATT. TO SEE THE CONTROL OF THE CONTR			
			evented during food preparation, storage & display	P/Pf/0						d waste water properly				
	Persona		properly used and stored	CC	3	000	54			ies: properly constructe I refuse properly disposed				
			and vegetables	P/Pt/0						cilities installed, maintai				_
										entilation and lighting; o		ed C	0	0
Pen	mit noider :	oriali noth	fy customers that a copy of the most recent inspection re	hour is a	valial	JIE.				oer latex gloves not use			-	
Dam	on in Ch	rac (C)	nature Va / GNANDA Date 5 12	3/2	3				ns docume		te corrections du	e	#	
rerso	on in Gna	ige (Sig	nature Va GWWWX Date 5 3	1 00	_				em Violation		June 4,2		Ø	_
Perso	on in Cha	rge (Pri	nted) Eva Kavanaan	1.50						s Aı	16 25.23		2	
	n man		7 7 ( -1	1221	22		Ris	k Fac	tor/Public I	s Au Health Intervention Viol	ations		Ø	
Inspe	ector (Sign	nature)	Dense Payor Date 5	25/	25		Re	peat F	Risk Factor	/Public Health Intervent	tion Violations		2	
Inch	otor (Driv	nted)	Denise Paline				Bo	ou Ke	Reineno	es Violations	u intend to reinene	ct	2_	
	Inspector (Printed) Denise Wijne Requires Reinspection - check box if you intend to reinspect  Appeal: 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								OV					
App	Jul. 1116	or disp	ose of unsafe food, may appeal such order to the	e Direc	tor	of He	alth,	not la	ter than fo	rty-eight hours after is	suance of such or	der.		-31
1														_

Foo	d Esta	blishment Insp	ection F	Report Page	2 of
LHD Marchester		Inspection Report Continuation S			-23-23
Establishment Buckley &	Elemen	tary Town Mar	chesto	-	
		TEMPERATURE OBSER			
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Proces	CONTRACTOR
Creamcheese	37F	TACO meat	162F	Spray bottle	200pp
Cheese	385	Cheese/ bears	1685	·	
	OB	SERVATIONS AND CORRE	CTIVE ACTION	ONG	
Item Violations cited in this	report must be	e corrected within the time frames be	elow, or as stated	in sections 8-405.11 & 8-406.1	1 of the food code.
Number					
53C Restroom -	not self	a losi oc.			
1)0000	10. 30, 7	Casing			
:170 \	150		- 1		
47PF VICTORY 2	door -	cut watermellon 1. Ambient Tem or TCS food	@46F	> Chillin W!	C, \
until	needed	1. Ambient Ten	p at 40	F (Cut Th	isday.)
Dont	use fo	rTCS food		- 7,	5
410 Sanitiner 6	ualet t	ows @ Dishm	a chire	The Tololo	
0				i able	
1/ -					
Note: Dish machi	ne >1	bot on surface			
			-		
				×=	
					PATE PATE PATE PATE PATE PATE PATE PATE
				-	
Person in Charge (Signature)	ra- K	growing		Date 5	22/23
Person in Charge (Signature)	, , -	To		ć	723/25
position (Signature)	inis	· ugn		Date O	1-1-2

Distribution: 1st - White - Health Department 2nd - Yellow - Owner/Operator/Person in Charge

elava amps pride, ora

Risk Category: 3 Food Estab	tisk Category: 3 Food Establishment Inspection Report Page 1 of									
Establishment type: Permanent Temporary Mobile Other_						Date:	5-15-23	5		
Establishment Chipotle		Reek!	NO COMMEN	cican Reality	7	ime In_		M/PM Time Out	AM/PM	
Address 48 Hale Rd	4		P	H)	-		Manane			
Town/city Manchester	J				F	Purpose	of Inspection:		re-op	
Permit Holder			icut Dej ublic Ho	Salvano G		Reinspe		Other FDA		
FOODBORNE ILLNESS RISK F			_		_					
Risk factors are important practices or procedures identified as the most prevalent co.  Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered	MODERN MANGERS			complia			ot in compliance		N/O=not observed	
P=Priority item Pf=Priority foundation item C=Core item V=violation type		_						ed on-site during inspection	R=repeat violation	
IN OUT N/A N/O Supervision	V	cos	_	10 100 m	T	N/A N/C	T	on from Contamination	V COS R	
Person/Alternate Person in charge present				15 🤇	-		Food separated		P/C 0 0	
demonstrates knowledge and performs duties	Pf	0	0	16 🤇		0		rfaces: cleaned & sanitize	d P/Pf/COO	
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17			served, recondit	on of returned, previously ioned, and unsafe food	POO	
Employee Health						T_T_		ure Control for Safety		
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	0	0	18 0				time and temperatures g procedures for hot holding	P/Pf/C O O	
4 O Proper use of restriction and exclusion	P	0	0					ime and temperatures	POO	
Written procedures for responding to vomiting and							Proper hot holdi		P 0 0	
diarrheal events	Pf	0	0					ling temperatures	POO	
Good Hygienic Practices				23 <		00		rking and disposition	P/Pf O O	
6 Proper eating, tasting, drinking, or tobacco products u				24 0		00		health control: procedure	P/Pf/C O	
7 O No discharge from eyes, nose, and mouth  Preventing Contamination by Hands	С		0		4		and records	mer Advisory		
8 O Hands clean and properly washed	P/Pf	0	0	25 (	DIC	0		provided: raw/undercooked for	od Pf OO	
No bare hand contact with RTF food or a		lon-						ceptible Population		
pre-approved alternative procedure properly followed			0	26 🤇		100000		used; prohibited foods not offere		
10 O Adequate handwashing sinks, properly supplied/accessible	e Pf/C	0	0					es and Toxic Substance		
Approved Source	Talana	_		27 (		0		approved and properly us	ed POO	
11 O Food obtained from approved source 12 O Food received at proper temperature	P/Pf/C			28 🤇		0		es properly identified,	P/Pf/C O O	
13 O Food in good condition, safe, and unadulterated		0					stored & used	th Approved Procedures		
Required records available: molluscan shellfish				20	J	No.		variance/specialized		
identification, parasite destruction	P/Pf/C	0	0	29 🤇		0		iteria/HACCP Plan	P/Pf/C O O	
	OOD RE									
Good Retail Practices are preventative measures									_	
Mark OUT if numbered item is not in compliance V=violation type Mark OUT N/A N/O Safe Food and Water	k in appro	cos		ou	A Alleran	or R	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO	on-site during inspection e of Utensils	R=repeat violation	
30 Pasteurized eggs used where required	P	0	_			ise utens	sils: properly store		C O O	
31 Water and ice from approved source	P/Pf/C	-						erly stored, dried, & handled		
32 O Variance obtained for specialized processing methods	Pf	0	0	45 C	Sin	gle-use/si	ngle-service article	s: properly stored & used	P/C O O	
Food Temperature Control				46	⊃ Glo	ves use	d properly		c 00	
Proper cooling methods used; adequate equipment for	Pf/C	0	0	-	15			and Equipment		
temperature control  Plant food properly cooked for hot holding	Pf	_	0	47			on-food contact s signed, constructe	urfaces cleanable,	P/Pf/C O O	
35 O Approved thawing methods used		0			Ma			lled, maintained and used	. '	
36 Thermometers provided and accurate		0		48				and test strips available	Pf/C O O	
Food Identification	WITE			49 (			ontact surfaces cl		C 00	
37 O Food properly labeled; original container	Pf/C	0	0				Physi	ical Facilities		
Prevention of Food Contamination								adequate pressure	Pf (O (O	
38 Insects, rodents, and animals not present  Ontamination prevented during food preparation, storage & display	Pf/C	0		_	_		stalled; proper ba	Control of the Contro	P/Pf/C O O	
40 Personal cleanliness		0			_		d waste water pro	perly disposed tructed, supplied, & clean	P/Pf/C O O	
41 Wiping cloths: properly used and stored	C		0					sposed; facilities maintained		
42 Washing fruits and vegetables	P/Pf/C			55	Phy	sical fac	ilities installed, m	aintained, and clean	P/P(C)	
Permit Holder shall notify customers that a copy of the most recent inspection re	56 <	> Ade	equate ve ural rubb	entilation and ligh per latex gloves n	ting; designated areas use ot used per CGS §19a-36	ed COO				
Person in Charge (Signature)				-		docume		Date corrections du	e #	
Person in Charge (Signature) Date			_	_		n Violation		8-19-23		
Person in Charge (Printed)						/iolation	Item Violations		23	
							Health Interventio	n Violations	70	
						Repeat Risk Factor/Public Health Intervention Violations				
Inspector (Printed)  Denise Poune  Good Retail Practices Violations  Requires Reinspection - check box if you intend to								2		
Appeal: The owner or operator of a food establishment aggrieved by	this and	or to	000	Requ	ires l	keinspe	ction - check box	t if you intend to reinspec	T L L L L L	
or dispose of unsafe food, may appeal such order to th										

Foo	d Esta	blishment In	spection F	Report Page_	2 of
LHD Manchester		Inspection Report Continu			15-23
Establishment Chipolte	·	Town	archesto		
		TEMPERATURE O	BSERVATIONS		
Item/Location/Process	Temp	Item/Location/Proce	ess Temp	Item/Location/Process	Temp
Guacamole		Pork	ISSF	Handsink	120F
Picode gyp	39F	Wnitellia	141		
L'ico de calle	39F	Chicken Pastor	147		
CreanSow	40 F	whitedia	174		
PONL	37F	Beek	163		
hidler	395				
Violations cited in this	report must be	SERVATIONS AND CO	DRRECTIVE ACTIO	DNS in sections 8-405.11 & 8-406.11	
Item Number	roport mast be	corrected within the time ha	mes below, or as stated	in sections 8-405.11 & 8-406.11	of the food code.
					, 1
16P Dishwasher	nots	anitizina o	rall re pour	- W/R/s in3B	Ay-Airdry
55c Interior W	211 1.70	anitizing a	Diales	777	1 1
THE WILLIAM	en wo	un cook	Bustca		•
Trash piled o	up at	backdoor -	outside		
54C Boxes Dutsi	de n	otio dumpite.	/		
	71.	21/11 Cho 1903 00			
		•			
					11
					li l
0 = 0	245.00 IA	V	2 / /	0 . 0	
nsp. & FDA Review wi	th Am	ber Mercado,	Keview W/K	eston Move.	
· .	2	1	J / '	J	
	MiliM 1	2000	5 01/ 001 1/10	060	(122
Person in Charge (Signature)	WY/II /A	our !	reseah Mo	ose Date 511	3/23
Inspector (Signature)	MIDE K	LAMLE		Date 5	15/23
	·· AAAA AA			Date 9	10 010



### TOWN OF MANCHESTER HEALTH DEPARTMENT

479 Main Street, P.O. Box 191, Manchester, CT 06045-0191 Phone Number: **(860) 647-3173**, Fax Number: **(860) 647-3188** 

#### 2022 FDA Food Code Checklist

The purpose of this checklist is to inform you on the new regulations and the changes that have been made within the Food Code. The Manchester Health Department recognizes that the adoption of the 2022 FDA Food Code will be a transition for you, for inspectors and Food Establishments. We will continue to work with you to educate and implement the new regulations within this code. We understand that this may generate questions, which we are committed to working with you during this transition period and process.

Chipothe	
Violations Documentation  No Numerical Scoring Grade-3 Violation Levels  PRIORITY – 72 hours for correction  PRIORITY FOUNDATION – 10 days for correction  CORE – 90 days for correction or determined by inspector  Corrections and ReInspections  Corrected on site violations  Reinspection – case by case  Repeat violations  No Bare Hand Contact – Correction Required  9 P/Pf/C	CFPM/PIC on every shift during operating hours 1 Pf Implementing Date Marking (Sec. 3-501.17) 23 P/Pf Signage/Posters required  O Handwashing sign at all handwash sinks (section 6-301.14) 10c  O 9 Major Allergens 37c  O Outdoor Allowance for dogs -preapproval and sign required. 38 Pf  Employee Assessment Form Vomiting/Diarrhea Written clean-up Policy  Mop Sink Required (Sec. 5-203.13) CORE -90 day  Temperature: Final Cook Temperatures
Resources:  2022 FDA Food Code: <a href="https://www.fda.gov/food/fda-food-co">https://www.fda.gov/food/fda-food-co</a> Town of Manchester Health Dept: <a href="https://www.manchesterct">https://www.manchesterct</a> FDA Handbook: <a href="https://www.fda.gov/food/retail-food-induction">https://www.fda.gov/food/retail-food-induction</a>	.gov/Government/Departments/Health-Department
protection-employee-health-and-personal-hygiene-handbo	<u>ook</u>
Environmental Health Inspector:	
Signature of Inspector: Serve Tayne	
Print Name: Denise Payne	Date: 5/15/23
Person In Charge:	
Signature of Person In Charge:	Title: Apprentice
Print Name: Amber Mercado	Date: 5/17/23
Email <u>mamber 2626@gmail.com</u>	

Category: 2 Food Establishment Inspection Report Page 1 of 2												
Establishment type Permanent Temporary Mobile Other			Date: 5/24/2.3									
Establishment DUNKIN DONUTS		areging Con	Time In 2 AM/PM Time Out 3:30 AM/PM									
Address 171 Spen Cur St		D	LHD MANCHESTER									
Town/City NOW DOWN MAN CLOSESTER			Purpose of Inspection: Routine Pre-op									
Permit Holder YOLANGA R	C	onnecticut D of Public	t Department it Reinspection Other									
FOODBORNE ILLNESS RISK FA			ND PUBLIC HEALTH INTERVENTIONS									
Risk factors are important practices or procedures identified as the most prevalent cont.  Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if			foodborne illness or injury. Interventions are control measures to prevent foodborne illness or injury.									
P=Priority item Pf=Priority foundation item C=Core item V=violation type			rin compliance OUT=not in compliance N/A=not applicable N/O=not observed oriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation									
IN OUT N/A N/O Supervision	V	COS R										
1 Person/Alternate Person in charge present,	Pf	00	15 0 0 Food separated and protected P/C 0									
demonstrates knowledge and performs duties  Certified Food Protection Manager for Classes 2,			Food-contact surfaces: cleaned & sanitized P/P/P/C O									
3, & 4	С	00	served, reconditioned, and unsafe food									
Employee Health  Management, food employee and conditional employee;			Time/Temperature Control for Safety  18 O Proper cooking time and temperatures P/Pf/C O									
knowledge, responsibilities and reporting	P/Pf	00	18 O O Proper cooking time and temperatures P/Pf/C O 19 O Proper reheating procedures for hot holding P O									
4 Proper use of restriction and exclusion	Р	00	20 O Proper cooling time and temperatures POO									
Written procedures for responding to vomiting and diarrheal events	Pf	00	21 O Proper hot holding temperatures POO									
Good Hygienic Practices			22 Proper cold holding temperatures POD Proper date marking and disposition P/Pf OD									
6 Ø Ø Proper eating, tasting, drinking, or tobacco products us	e P/C	00	Time as a public health control: procedures									
7 No discharge from eyes, nose, and mouth	С	00	and records									
Preventing Contamination by Hands  8	P/Pf	00	Consumer Advisory									
No bare hand contact with RTE food or a			Highly Suscentible Population									
pre-approved alternative procedure properly followed	P/Pf/C	00	26 Pasteurized foods used; prohibited foods not offered P/C O									
Adequate handwashing sinks, properly supplied/accessible	Pyc	00	Food/Color Additives and Toxic Substances									
Approved Source			27 C Food additives: approved and properly used P C C									
11 C Food obtained from approved source 12 C Food received at proper temperature		00										
13 Food in good condition, safe, and unadulterated		00	stored & dised									
Required records available: molluscan shellfish	P/Pf/C		Compliance with variance/specialized									
identification, parasite destruction	Contract to Secure 2		process/ROP criteria/HACCP Plan  PRACTICES									
Good Retail Practices are preventative measures to	o contro	I the addi	idition of pathogens, chemicals, and physical objects into foods.									
			ox for COS and/or R COS=corrected on-site during inspection R=repeat violation									
OUT N/A N/O Safe Food and Water	٧	COS R	Proper Use of Utensils V Cos R									
30 Pasteurized eggs used where required Water and ice from approved source	P	00	O C C									
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C Pf	00	7,7,7, 2									
Food Temperature Control			49 Single-use/single-service articles: properly stored & used PC   46 Gloves used properly									
Proper cooling methods used; adequate equipment for	DFIC	00	Utensils and Equipment									
temperature control			Proof and non-lood contact surfaces cleanable,									
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf	00	=   Property designed, dendated, and deed									
36 Thermometers provided and accurate		00										
Food Identification			49 ★ Non-food contact surfaces clean C ○ ○									
37 Food properly labeled; original container	Pf/C	00	Physical Facilities									
Prevention of Food Contamination  38 Value Insects, rodents, and animals not present	200		50 O Hot and cold water available; adequate pressure Pf O O									
39 Contamination prevented during food preparation, storage & display	PIPE	000	51 2 Plumbing installed; proper backflow devices PPC 0 2 Sewage and waste water properly disposed P/Pf/C 0									
40 Personal cleanliness		00										
41 Wiping cloths: properly used and stored	С	00	54 Garbage and refuse properly disposed; facilities maintained C_O									
42 Washing fruits and vegetables		00										
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable.	36 Adequate ventilation and lighting; designated areas used COO Natural rubber latex gloves not used per CGS §19a-36f									
Person in Charge (Signature)	3(1	12	Violations documented Date corrections due #									
Person in Charge (Signature)	<del>-</del> -	0)	Priority Item Violations 5/27/23 Priority Foundation Item Violations 6/3/23 3									
Person in Charge (Printed) ZVONG PLING 1001	110		Priority Foundation Item Violations 6/3/23 3 Core Item Violations 8/24/23 15									
1/11/11/11/11/11/11/11/11/11/11/11/11/1	112	2	Risk Factor/Public Health Intervention Violations									
Inspector (Signature) Date 1)	4/4	<u> </u>	Repeat Risk Factor/Public Health Intervention Violations									
Inspector (Printed) WWW MWW	1		Requires Reinspection - check box if you intend to reinspect									
Appeal: The owner or operator of a food establishment aggrieved by the	his orde	er to cor	prrect any inspection violation identified by the food inspector or to hold, destroy									
or dispose or unsale food, may appear-such order to the	Directo	or of Hea	ealth, not later than forty-eight hours after issuance of such order.									

reinspection: 6/3/23 (Monday 6/5/23)

Food Establishment Inspection Report Establishment\_DUN TEMPERATURE OBSERVATIONS Item/Location/Process Item/Location/Process Temp Item/Location/Process Temp Temp 39F Almond milk Cold hald Sanitize bucket avai 2000pm 39F cream heese Under counter 3 hay quat Silk cocoast milk Radberry Concentrate 388 Walk in freezer Kausage Patty Hot hold Slice Chase Walk in cooler 38F walk in cooler 153F Street COM Walk in cools Hand sink customer Bathroom 38F ream cheese cold hold 38 F Patty Cold 409 cheese slice cold had 39E **OBSERVATIONS AND CORRECTIVE ACTIONS** Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 & 8-406.11 of the food code. Item Number 490 Unclean hand sink by Front service area 43c iver held in Stagnant room temp water at front area. - cos es damaged in Front area is month 55c damaged under counter fridge front area MIC45 Coffee FILTES not protected or inverted front area - COS 5/25/23 Unclean under counter cold holding drawers (interior)-SSC/S6C Unclean wall and hood behind backel Prep station. SUMBOLD Back corner hand sink leaking on Floor 35C or damaged in front area damaged 2 door cooler in No paper towels at hand sink by 3 bay- cos 5/25/23 Marker, tape, trash stored in hand Sink by 3bay - (0) 5/25/23 382 Gap under Back door 39c in Freezer has ice build up (severe) 490 unclean floors in work in freezer Milk crates used as shelves 47c unclean mens restroom handsink - cos 5/25/23 Hot water 165f in mens Bathroom - COS 5/25/23 Almond milk stored on counter at 59 f - discarded on site - cos -in persor Person-in Charge (Signature) Inspector (Signature)

Risk Catego	rv: 2	Food Esta	f In	sn	eci	tion	Ren	ort		Page 1 o	£ \$					
		rmanent Temporary Mobile Other					- C	_		te: F	5/12/23		3			
		Kin Donuts		connection									ut		AM/PM	
	Set (12945)	and Tok		DPH LHD Marchester												
Town/City		(4).		Purpose of Inspection: Routiple									Pre	e-op		
1		e Madeiros		Connecticut Department of Public Health Reinspection Other 1							Other TDI	_				
		FOODBORNE ILLNESS RISK														
		ant practices or procedures identified as the most prevalent ance status (IN, OUT, N/A, N/O) for each number	ANT. VIII.	ng fad		F-10-1	borne	1157		PRINTER TO THE	ventions are control of in compliance	measures to prevent fo N/A=not applica		ss or injury. D=not obs	A STATE OF THE RESERVE OF THE PARTY OF THE P	
P=Priority iter		y foundation item C=Core item V=violation ty		k in	1000		De 2010/1981		2000		The second secon	ted on-site during ins		R=repeat		
IN OUT N		Supervision		٧	cos					N/A N/O	C2.50 C C C C C C C C C C C C C C C C C C C	on from Contamir			COS R	
Dr. Court Course	Perso	n/Alternate Person in charge present,		Pf	0	0					Food separated					
	demoi	nstrates knowledge and performs duties	-	MAIN		$\exists$	16	•	0			urfaces: cleaned &		P/Pf/C	00	
2 0 0	3, & 4	ed Food Protection Manager for Classes 2,		С	0	0	17		0			on of returned, pre tioned, and unsafe		Р	00	
		Employee Health	- 12									ture Control for S		12.00		
3 🚳 🔾		ement, food employee and conditional employee; edge, responsibilities and reporting	F	P/Pf	0	0	-					time and temperat			00	
400		r use of restriction and exclusion		Р	0	0						time and temperati		-	00	
5 0		n procedures for responding to vomiting and		Pf	00000	0	21	<b>(</b>	0	00	Proper hot hold	ing temperatures			00	
3 6	diarrh	eal events		FI								ding temperatures			00	
6 6 0	O Propo	Good Hygienic Practices r eating, tasting, drinking, or tobacco products	0.1100	P/C			23		0	00	Proper date ma	rking and disposition of the control	on	P/Pf	00	
6 <b>6</b> O		scharge from eyes, nose, and mouth		C	00		24	0	0		and records	c nealth control. pr	ocedures	P/Pf/C	00	
	DE A R								personal and the control of the cont	umer Advisory						
8 👁 🔾		s clean and properly washed	P	P/Pf	0	0	25	0	0	0		y provided: raw/underd		Pf	00	
900		re hand contact with RTE food or a	, P/P	Pf/C	0	0	-					ceptible Population		100		
10 😂 🔾	pre-ar	proved alternative procedure properly follows ate handwashing sinks, properly supplied/accessi		Pf/C			26	0	0	S E		used; prohibited foods ves and Toxic Su	The second second	P/C	00	
10	Adequ	Approved Source	ible Tr	-1/0		$\overline{}$	27		0			approved and pro	200	P	00	
1160	Food	obtained from approved source	P/P	ef/C	0	0			1	No.		es properly identifie				
		received at proper temperature			0		28	•	0	0	stored & used			P/Pf/C	00	
13		in good condition, safe, and unadulterated	F	P/Pf	0	0				С		th Approved Proc				
14 0 0		red records available: molluscan shellfish fication, parasite destruction	P/P	of/C	.0	0	29	0	0	<b>o</b>		h variance/speciali riteria/HACCP Plar		P/Pf/C	00	
	lidenti		GOOD	RE	TAIL	PR	ACT	TICE	ES	PERM	process//Cir ci	interia/ iACCI Fiai				
		Good Retail Practices are preventative measure								s, chemi	icals, and physica	l objects into foods.				
			ark in ap	_		-	for C	OS a	and/or	R	COS=corrected	on-site during inspec	ction	R=repeat	violation	
OUT N/A N/		Safe Food and Water		V	cos			TUC				e of Utensils		V	COS R	
31 🔾	17.	d eggs used where required ice from approved source		o of/C	00	0					ils: properly stor	ed perly stored, dried, &	handlad	C	00	
32 0 0		btained for specialized processing methods	II 0 x 0.000	of o		0						es: properly stored &			00	
		Food Temperature Control					46	0	Glove	es used	properly				00	
33 🔾	3.5	ling methods used; adequate equipment for	F	of/C	0							and Equipment				
	temperatur	e control properly cooked for hot holding		Pf	0		47					surfaces cleanable		P/P(C	00	
		hawing methods used			0						igned, construct a facilities: insta	ed, and used illed, maintained ar	nd used:	T >		
36 🔾		ters provided and accurate			0		48					and test strips avai		Pf/C	00	
		Food Identification					49		Non-	food co	ntact surfaces cl			(c)	00	
37 S Food	properly labe	led; original container	F	Other	b	0		_			Phys	ical Facilities				
20 00 10000	to radonta a	Prevention of Food Contamination nd animals not present	Te	6								; adequate pressu	re	Pf		
		ented during food preparation, storage & display	P/P	AIC.		$\frac{2}{2}$					stalled; proper ba I waste water pro				00	
40 O Perso					Ö							structed, supplied,	& clean		00	
	·	perly used and stored		С	0		54	0	Garba	age and	refuse properly di	isposed; facilities ma	intained	C	00	
42 Wash	ing fruits and	vegetables	P/P	Pf/C	0	0						naintained, and cle		P/P(/C	000	
Permit Holde	er shall notify o	sustomers that a copy of the most recent inspection	report is	ava	ilable							nting; designated a not used per CGS {				
Person in Ch	narge (Signa	ture) Date 5	-17	, –	· ) .	2				ocume Violatio		Date correcti	ons due		#	
Person in Charge (Printed) An A Hedeiro									Foun	dation I	tem Violations				8	
reison in Cr	iarge (Printe	x xhin long, a		100		Core Item Violations  Risk Factor/Public Health Intervention Violations										
Inspector (Signature) Lenes tay Date 5/12/23								Risk Factor/Public Health Intervention Violations  Repeat Risk Factor/Public Health Intervention Violations								
2								Good Retail Practices Violations								
		eniserayne		-10 10 21		Requires Reinspection - check box if you intend to reinspect										
Appeal: The	e owner or o	perator of a food establishment aggrieved	by this o	orde	er to	COTT	ect a	iny i	inspe	ction vi	iolation identifie	d by the food insp	ector or t	o hold, d	destroy,	

Food Establishment Inspection Report Inspection Report Continuation Sheet Establishment | Town Warchester TEMPERATURE OBSERVATIONS Item/Location/Process Item/Location/Process Temp Item/Location/Process Temp 155F Sausage Patty Slider from Hot/Cold PREP Most Bucket 20000M 155F 3 Bay SINK when where cheese 32 F Walkin **OBSERVATIONS AND CORRECTIVE ACTIONS** Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 & 8-406.11 of the food code. Item Number Email Compliant uncoverd bagels and rolls not protected 49 C Unclear hand sink unserved FRP around walk in cooler 391c Boxes of food on floor in walk in freezer 470 Damaged gasket on walkin Freezer door Ordered to arrive Milkgrate in walk in freezer used as shelf EC UP in walk in freezer floor inverted or protected

Inspector (Signature)

Date 5/12/23

#### **Denise Payne**

From:

ana medeiros <ananmario6@yahoo.com>

Sent:

Monday, May 22, 2023 10:48 AM

To:

Denise Payne

Subject:

Re: Dunkin Donuts FDA meeting and inspection

Compliance 5-12-23
Inspection.
Dayne

**EXTERNAL MESSAGE - Think Before You Click!** 

Good morning Denise,

Hope this finds you well.

Here are our corrective actions

We have followed up with the crew on all violations corrected on site. The manager is working on following each practice daily also covers for the bagels have been purchased. An order for new gaskets for the walk in cooler and freezer have also been placed and should be recieved within 5 days.

Thak you kindly

## Ana Medeiros

Franchisee Dunkin Donuts

C.860-930-7059

F.860-647-2955

On Monday, May 15, 2023 at 12:45:54 PM EDT, Denise Payne dpayne@manchesterct.gov> wrote:

With attachment...

From: Denise Pavne

Sent: Monday, May 15, 2023 12:40 PM

To: shandanina@gmail.com; ana medeiros <ananmario6@yahoo.com>

Subject: Dunkin Donuts FDA meeting and inspection

Hello Ladies,

Thank you for taking the time to meet with Jose and I on Friday to discuss changes in the CT Food Code. I will be looking into the back flow preventor at the mop sink and will get back to you on that.

I have attached your inspection and all violations that were noted were Core violations which require a 90-day correction/corrected on site. Those corrected on site, please just discuss that with staff so it is not a repeat violation. The others should be corrected as soon as possible but you have 90-days. Please forward a correction email for each issue and I can then put this inspection in as compliant.

If you have any questions, please call.

#### Denise Payne, R.S.

Environmental Health Inspector

Manchester Health Department

479 Main Street, P.O. Box 191

Manchester, CT 06071

Ph: 860-647-3180

Fax: 860-647-3188

dpayne@manchesterct.gov

Risk Category: 2 Food Estab	on Repo	ort	Page 1	of						
Establishment type: Permanent Temporary Mobile Other				W	Date: 5	12/23				
Establishment Dunkin Donuts	Time InAM/PM Time Ou							AM/PM		
Address 1205 To Hand Tok		DF								
Town/City Manchester	J				Purpose of	Inspection:		re-op		
Permit Holder Ana Madeiros	ACTO	of Publ	it Depa	ther FDA						
FOODBORNE ILLNESS RISK F. Risk factors are important practices or procedures identified as the most prevalent con				1000				ness or injury.		
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered i			3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ompliance				I/O=not observed		
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	approp	priate	e box for C	OS and/or R	COS=corrected or	n-site during inspection	R=repeat violation		
IN OUT N/A N/O Supervision	V	cos	R	IN O	UT N/A N/O	Protection fr	rom Contamination	V COS R		
1 O Person/Alternate Person in charge present,	Pf	0				ood separated and	l protected	P/C O		
demonstrates knowledge and performs duties				16 0 0			es: cleaned & sanitize	d P/Pf/C O		
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0		17 0			f returned, previously ed, and unsafe food	POO		
Employee Health							Control for Safety			
Management, food employee and conditional employee;	P/Pf	00					and temperatures	P/Pf/C O O		
knowledge, responsibilities and reporting  Proper use of restriction and exclusion	Р						ocedures for hot holdin			
Written procedures for responding to vomiting and		0				roper cooling time roper hot holding to	and temperatures	P O O		
diarrheal events	Pf	0				roper cold holding		P 0 0		
Good Hygienic Practices						roper date marking		P/Pf O O		
6 O Proper eating, tasting, drinking, or tobacco products us	se P/C	0		1	Ti		alth control: procedure	e l		
7 O No discharge from eyes, nose, and mouth	С	00		24 0		nd records		P/Pf/C O		
Preventing Contamination by Hands						Consumer	r Advisory			
8 O Hands clean and properly washed	P/Pf	0	2	25 🔾	) () Co		vided: raw/undercooked foo	d Pf OO		
No bare hand contact with RTE food or a	P/Pf/C	0				Highly Suscept				
pre-approved alternative procedure properly followed	J. C.	10000		26 0		~	prohibited foods not offere			
Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	_ +				and Toxic Substance			
Approved Source	DIDIIO	101		27 0			roved and properly use	ed POO		
11 C Food obtained from approved source 12 C Food received at proper temperature		00	_	28 0		oxic substances pr	roperly identified,	P/Pf/C O		
13 O Food in good condition, safe, and unadulterated		00				ored & used	pproved Procedures			
Required records available; molluscan shallfish					Cr	ompliance with var		The second second second		
identification, parasite destruction	P/Pf/C	0	$\geq \mid \mid$	29 0		ocess/ROP criteria		P/Pf/C		
				ACTICES						
Good Retail Practices are preventative measures to										
				or COS and	d/or R C		te during inspection	R=repeat violation		
OUT N/A N/O Safe Food and Water	V	cos		OUT		Proper Use of	Utensils	V COS R		
30 Pasteurized eggs used where required Water and ice from approved source	P/Pf/C	00	읡	43 O In-	-use utensils:	properly stored	stored, dried, & handled	C 00		
32 O Variance obtained for specialized processing methods	Pf	0					roperly stored & used	Pf/C O O		
Food Temperature Control	1	191		10 00	loves used pr		openy stored a asea	600		
Proper cooling methods used; adequate equipment for	Delo			TEN TE			d Equipment			
temperature control	PI/C	0		47 👄 FC	ood and non-f	food contact surfac	ces cleanable,	P/PIC OO		
34 O Plant food properly cooked for hot holding	Pf	0		pr	operly design	ned, constructed, a	and used	PIPICIS		
35 O Approved thaving methods used 36 Thermometers provided and accurate		0					maintained and used;	Pf/C		
	Pf/C	0	긔	Cle			test strips available			
Food Identification  37 Pood properly labeled; original container	Dec	0		49 W	on-rood conta	act surfaces clean	F 79747	(0)00		
Prevention of Food Contamination	I I			50 O H	nt and cold w	Physical ater available; ade		Pf 00		
38 Insects, rodents, and animals not present	PfC		5	51 O PI	umbing instal	lled; proper backflo	ow devices	P/Pf/C O O		
39 Contamination prevented during food preparation, storage & display		00				aste water properly		P/Pf/C O O		
40 Personal cleanliness		0					ted, supplied, & clean	Pf/C O O		
41 O Wiping cloths: properly used and stored	C	0	5][				ed; facilities maintained	000		
42 Washing fruits and vegetables	P/Pf/C	0	2	55 🗪 Ph	nysical facilitie	es installed, maint	ained, and clean	P/P(C)OO		
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ailable.					; designated areas use sed per CGS §19a-36f	ed (b) o		
Person in Charge (Signature)	/   -	Violations	s documente m Violations	ed <i>E</i>	Date corrections due					
Person in Charge (Printed) And Hege ToS		/		Priority Fo	undation Iten Violations			No.		
Inspector (Signature) Denis Park Date 5	3	Risk Factor/Public Health Intervention Violations Repeat Risk Factor/Public Health Intervention Violations								
2		Good Retail Practices Violations								
Inspector (Printed) Deniserayne				Requires	Reinspection	n - check box if y	ou intend to reinspec	t		
Appeal: The owner or operator of a food establishment aggrieved by to or dispose of unsafe food, may appeal such order to the	his orde	er to co	orre	ct any ins	pection viola	ation identified by	the food inspector or	to hold, destroy,		

Food Establishment Inspection Report Inspection Report Continuation Sheet Establishment | Town\_Warchester **TEMPERATURE OBSERVATIONS** Item/Location/Process Temp Item/Location/Process Item/Location/Process Temp 155F Sausage HotCold PREP Sausage Patty Slider Fride Mout Burket 20000M 16F 155F 3 Bay SINK 140 F betty Cream cheese mord Milk 38f 32F Egas Walkin **OBSERVATIONS AND CORRECTIVE ACTIONS** Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 & 8-406.11 of the food code. Item Number lime build up on 3 bay Sink 15c uncoverd bagels and rolls not protected (Cos 49 c Unclear hand sink 55c unsecured FRP around walk in cooler 39c Boxes of food on floor in walk in freezer 470 Damaged gasket on walkin Freezer door Milkorate in walk in freezer used as shelf 3910 Ice build up in walk in freezer floor Bug zapper over open baxes of food supply 56c Personal hard lation bottle out on Pres/service counter 37c unlabeled containers of Food / Sugar bin, source bottles Teafilters not inverted or protected Person in Charge (Signature)

Inspector (Signature)

Risk Category: 3 Food Establ	lishn	nen	t Ir	nspecti	ion Re	port	Page 1	of					
Establishment type: Permanent Temporary Mobile Other					Date:	5/16/23							
Establishment GUNTUR MITCHIS		4cepit	ng Cgriffe	acticur Mealing	Time In	12 AN	MPM Time Out	AM/PM					
Address 1716 Spencerst		D	P	H)		manches	teg						
Town/City Manchester	J				Purpose of Inspection: Routine Pre-op								
Permit Holder La) Th poorna		of Po	ublic H	epartment lealth	Reinsp		Other						
FOODBORNE ILLNESS RISK FA Risk factors are important practices or procedures identified as the most prevalent cont								ess or injury.					
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if				compliance		not in compliance		O=not observed					
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appr	opria	ate box for C	COS and/o	r R COS=correcte	ed on-site during inspection	R=repeat violation					
IN OUT N/A N/O Supervision	V	cos	R		UT N/A N/		n from Contamination	V COS R					
1 6 O Person/Alternate Person in charge present,	Pf	0	0			Food separated		APIC O					
demonstrates knowledge and performs duties				(16)(-)(3)	Brown Street		faces: cleaned & sanitized	PIPICOO					
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 6			n of returned, previously oned, and unsafe food	POO					
Employee Health							ure Control for Safety						
Management, food employee and conditional employee;	P/Pf	0	0	18 0 0	000	roper cooking ti	ime and temperatures	P/Pf/C O O					
knowledge, responsibilities and reporting  Proper use of restriction and exclusion	Р	0		19 0	000	Proper reneating	procedures for hot holding me and temperatures						
Written procedures for responding to vomiting and			$\vdash$			Proper hot holding	ne and temperatures	P 0 0					
diarrheal events	Pf	0	0	2202		Proper cold hold		PXO					
Good Hygienic Practices	-	_					king and disposition	P/PT O O					
6 O Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0			Time	health control: procedures						
7 O No discharge from eyes, nose, and mouth	С	0	0	24		and records		P/Pf/C O					
Preventing Contamination by Hands				/	/		mer Advisory						
8 O Hands clean and properly washed	P/Pf	0	0	25 0			provided: raw/undercooked food	Pf OO					
9 No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	0		20101			eptible Population	11-1					
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	26 0	) Q		sed; prohibited foods not offered						
Approved Source	1110		$\subseteq$	27 0 9	z IS		es and Toxic Substances approved and properly use						
11 Food obtained from approved source	P/Pf/C	0	0				s properly identified,						
12 O Food received at proper temperature		0		28 0		stored & used	s properly identified,	P/Pf/C O					
13 C Food in good condition, safe, and unadulterated		0	_		/		h Approved Procedures						
14 O Required records available: molluscan shellfish	P/Pf/C	0	0	29 0	0		variance/specialized	P/Pf/C O O					
identification, parasite destruction	OD DE	TAIL	DE	RACTICES		process/ROP crit	teria/HACCP Plan	1,1,1,0,0,0					
Good Retail Practices are preventative measures to						micals and physical	objects into foods						
				for COS an			n-site during inspection	R=repeat violation					
OUT N/A N/O Safe Food and Water	V	cos	_	OUT	40.10		of Utensils	V COS R					
30 Pasteurized eggs used where required	Р		0		-use uter	sils: properly store		000					
31 O Water and ice from approved source	P/Pf/C	0	0	(4) X U	tensils/equ	ipment/linens: prope	erly stored, dried, & handled	Pf@00					
32 O Variance obtained for specialized processing methods	Pf	0	0	(45) X S	ingle-use/s	single-service articles	s: properly stored & used	P(C)00					
Food Temperature Control		_		46 O G	loves use	ed properly		200					
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0	0	M. IF		Utensils :	and Equipment						
34 O Plant food properly cooked for hot holding	Pf		0			non-food contact su esigned, constructe		P/P(C) 0					
35 O Approved thawing methods used		0	_	I W			ed, maintained and used:						
36 O Thermometers provided and accurate		0		48 Cl	leaning ag	gents, sanitizers, ar	nd test strips available	Pf/C O O					
Food Identification				(49) X N	on-food o	contact surfaces cle	ean	(0)00					
Food properly labeled; original container	PIC	9	0			Physic	cal Facilities						
Prevention of Food Contamination							adequate pressure	Pf O O					
38   Insects, rodents, and animals not present   39   © Contamination prevented during food preparation, storage & display		0				nstalled; proper bac		P/P(C) O					
40 Personal cleanliness	P/P(C					nd waste water prop		P/Pf/C O O					
41 Wiping cloths: properly used and stored	C	00	_				ructed, supplied, & clean posed; facilities maintained	Pf/C O O					
42 Washing fruits and vegetables	P/Pf/C						aintained, and clean	P/Pf(C) O					
				56 O A	dequate v	ventilation and light	ing; designated areas used	1 600					
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	allable	•	ON	atural rub	ber latex gloves no	t used per CGS §19a-36f						
Person in Charge (Signature) Date Of IN 2   Violations documented   Date corrections due   Priority Item Violations   51/9/23   3													
	112	-	_				5/19/23	3					
Person in Charge (Printed) AALTIT KUCHWII				Core Item		Item Violations	8/16/23	13					
104740 At ad 11	1 -		-			Health Intervention		3					
Inspector (Signature) 7 MON Date 5	6/23	3		Repeat R	isk Facto	r/Public Health Inte	rvention Violations	10					
Inches (Bringer ) MILLEN Grande	URS)					ces Violations		13					
Appeal: The owner or operator of a food establishment aggrieved by the	hio a-d	054-	22-	Requires	Keinspe	ction - check box	if you intend to reinspect	(025)					
or dispose of unsafe food, may appeal such order to the	Directo	or of	Hea	ilth, not lat	er than for	violation identified orty-eight hours aff	by the tood inspector or ter issuance of such order	to noid, destroy,					

FOC	ou Esta	<u>iblishment ins</u>	bection	Report Page	or			
LHD Manchester	31	Inspection Report Continuation	Date <u>5/16</u>	Date 5/16/23				
Establishment JUNTUR N	nirchis	TownMAY						
		TEMPERATURE OBS	ERVATIONS					
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp			
Butterchicken walk in	38F	Spicy Sauce Hothold	19 200 F	Hand sink in Kitcher	11.5F			
Rice walkin	38F	1 1	3	Hand sink in Public Bath				
Butter walkin	38F			THIC SUR IT TO THE	10 14			
	100 STORY 100 STORY 100			Pito in				
Heavy Cream cold Pref	7. 100			Temp Rite. 5				
Ginger garlic cold Pref	38F			Date: Fecha Emp:				
Cheese cubes cold Prep				PASS WHEN BLUE PASS TURNS ORANGE				
Spicy Sauce cold PPEP	38 F			ES ACEPTRALE CUANDO LA BARRA AZUL CAMRIA A COLOR NARANIA	II.			
Diced tomato cold MEP	38F			160°F/71°C				
		SERVATIONS AND CORF			Me de la company			
Item Violations cited in th	is report must b	e corrected within the time frames	below, or as state	d in sections 8-405.11 & 8-406.11 of	the food code.			
Number								
390 Oil stored	outside	on Shelf near i	valk in co	nler				
				near walk in To.	be semaned			
51c leak in wall	cin coole	er dripping into buc	ket.	1,200 000 775.	) ( 10 10 10 ·			
		and outside next		in cooler				
		t 7200 ppm - CO			l.			
45 ( Reuse of six	rale use	containers for s	toring food		ļ!			
51C Hand sink in	Kitche	n constantly dripp	ing.					
440 Plates not	protecte	1-Cos, inverted						
370 Food products	not label	ed properly in Friday	e and cook	line				
470 Damaged gas	sket on	one door reach in.						
Note No signage a	t hands	sink						
440 Pots stored	on floor	near 3 bay						
15 p Raw chicker	1 stored	above cooked ch	licken in 1	ender counter cold pri	ep			
180 tood product	n walk	in cooler not protec	ted.					
Page Cheese cube	25 held	at 49f in Cold Pre	P Had C.	FPM discard food p	raduct			
550 Ceiling files	in Kitz	then unclean						
490 unclean fan	· ·							
Note Food thermonder								
Note No ill employees	•							
	Λ							
Person in Charge (Signature)	Kans			Date OS	ich 2			
Inspector (Signature)	un th	andly		Date 5/16				
1000		1000		Date // (/)	1 / 1			



#### TOWN OF MANCHESTER HEALTH DEPARTMENT

479 Main Street, P.O. Box 191, Manchester, CT 06045-0191 Phone Number: **(860)** 647-3173, Fax Number: **(860)** 647-3188

#### 2022 FDA Food Code Checklist

The purpose of this checklist is to inform you on the new regulations and the changes that have been made within the Food Code. The Manchester Health Department recognizes that the adoption of the 2022 FDA Food Code will be a transition for you, for inspectors and Food Establishments. We will continue to work with you to educate and implement the new regulations within this code. We understand that this may generate questions, which we are committed to working with you during this transition period and process.

Facility: GUNTUR MIRCHIS	
✓ Violations Documentation No Numerical Scoring Grade-3 Violation Levels  ○ PRIORITY - 72 hours for correction ○ PRIORITY FOUNDATION - 10 days for correction ○ CORE - 90 days for correction or determined by inspector  ✓ Corrections and ReInspections ○ Corrected on site violations ○ Reinspection - case by case ○ Repeat violations  ✓ No Bare Hand Contact - Correction Required 9 P/Pf/C	CFPM/PIC on every shift during operating hours 1 Pf Implementing Date Marking (Sec. 3-501.17) 23 P/Pf Signage/Posters required  O Handwashing sign at all handwash sinks (section 6-301.14) 10c  O 9 Major Allergens 37c  O Outdoor Allowance for dogs -preapproval and sign required. 38 Pf  Employee Assessment Form  Vomiting/Diarrhea Written clean-up Policy  Mop Sink Required (Sec. 5-203.13) CORE -90 day  Temperature: Final Cook Temperatures
Resources:	
2022 FDA Food Code: https://www.fda.gov/food/fda-food-cod	de/food-code-2022
Town of Manchester Health Dept: https://www.manchesterct	gov/Government/Departments/Health-Department
FDA Handbook: https://www.fda.gov/food/retail-food-induprotection-employee-health-and-personal-hygiene-handbook	stryregulatory-assistance-training/retail-food- ook
Environmental Health Inspector:	
Signature of Inspector: Lauten Standing	<u> </u>
Print Name: Lauren Grande	Date: 5/16/2023
Person in Charge:	
Signature of Person In Charge:	Title: Mtmaxel
Print Name: AALIGH RUCHPUDI	Date: 05/16/23
Email GUNTUR MIRCHISUSA QGMAIL GA	A

Risk Category: 3 Food Establ	t In	spe	ctic	on Rei	port	Page 1	of 3					
Establishment type: Permanent Temporary Mobile Other					T	2012-01 N. 2011-14	130/23					
Establishment HOWCIL CHENCY TECH H.S.		Asea in	2 Conner	cticut Health	Time In 8:30 AMPM Time Out 11:00 AM							
Address 791 middle to the west		DI	P	H) LHD Manchester								
Town/City Manches Her	j			Purpose of Inspection: Routine Pre-op								
Permit Holder PWI LLW IS	C	onnectic of Pu	cut Dep ablic Ho	partment ealth	Reinspection Other							
FOODBORNE ILLNESS RISK FA Risk factors are important practices or procedures identified as the most prevalent cont								yeat foodborno illar	ee or injun			
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				complia		The street of the street	ot in compliance N/A=not a		O=not ob	-		
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appro	opriat	te box t	for CC	S and/or	R COS=corrected on-site duri	ing inspection	R=repea	t violation		
IN OUT N/A N/O Supervision	V	cos	R			T N/A N/C			ν	COS R		
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0	15 (			Food separated and protecte Food-contact surfaces: clean			00		
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 4	1		Proper disposition of returned	d, previously	P			
Employee Health	AT .				1		served, reconditioned, and un Time/Temperature Control					
3 Management, food employee and conditional employee;	P/Pf	0		18 🕥			Proper cooking time and tem	peratures	P/Pf/C	00		
knowledge, responsibilities and reporting  Proper use of restriction and exclusion	P		0	19 (	4 0		Proper reheating procedures Proper cooling time and temp	for hot holding		00		
5 Written procedures for responding to vomiting and							Proper tooling time and temperatu			00		
diarrheal events	Pf	0		22 0		00	Proper cold holding temperat	ures	P	00		
Good Hygienic Practices  6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0		23 4		90	Proper date marking and disp Time as a public health contr	position	P/Pf	00		
7 O No discharge from eyes, nose, and mouth	C		8	24			and records	oi. procedures	P/Pf/C	00		
/ Preventing Contamination by Hands		1			1		Consumer Advisor			DE BU		
8 D Hands clean and properly washed	P/Pf	0	9	25	<b>b</b> C	0	Consumer advisory provided: raw/u		Pf	00		
9 No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	0	0	26	60		Highly Susceptible Pop Pasteurized foods used; prohibited		P/C	00		
Adequate handwashing sinks, properly supplied/accessible	PC	0	0	20 0	<i>D</i>		od/Color Additives and Toxi			1010		
Approved Source				27 🤇	$\stackrel{>}{\sim}$	o of	Food additives: approved and		l P	00		
Food obtained from approved source    12	P/Pf/C	0		28	$b \subset$	0	Toxic substances properly ide stored & used	entified,	P/Pf/C	00		
13 C Food in good condition, safe, and unadulterated		0			+	/ (	Conformance with Approved	Procedures				
Required records available: molluscan shellfish	P/Pf/C	0	0	29 🤇			Compliance with variance/spe	ecialized	D/Df/C	00		
identification, parasite destruction	OD RE			12222			process/ROP criteria/HACCP	Plan	1 71 110			
Good Retail Practices are preventative measures t						ens, chem	ricals, and physical objects into fo	oods.				
	in appro	200 220		W			COS=corrected on-site during i		R=repeat	violation		
OUT N/A N/O Safe Food and Water  30 Pasteurized eggs used where required	٧	cos	-	OU			Proper Use of Utensils		V	COS R		
30 Pasteurized eggs used where required 31 Water and ice from approved source	P P/Pf/C	0 0	-	43 C	Ollite	use utens	sils: properly stored pment/linens: properly stored, dri	od & handlad	Pf/C	00		
32 O Variance obtained for specialized processing methods	Pf	_	ŏ				ngle-service articles: properly sto		P/C			
Food Temperature Control				46 ⊂	⊃ Glo	ves used	d properly		С	00		
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0	0		IF-		Utensils and Equipm					
34 O Plant food properly cooked for hot holding	Pf	0	0	47			on-food contact surfaces clean signed, constructed, and used	lable,	P/Pf	00		
35 O Approved thawing methods used	Pf/C	0	0	48 <	_		ng facilities: installed, maintain	ed and used;	Dilo			
Thermometers provided and accurate	Pf/C	0	0				ents, sanitizers, and test strips	available	Pf/C	00		
Food Identification  37 Food properly labeled; original container	Pf/C	0		49	No	n-tood co	ntact surfaces clean  Physical Facilities		С	00		
Prevention of Food Contamination				5D2	Но	t and cold	d water available; adequate pre		Pf	00		
Insects, rodents, and animals not present		0					stalled; proper backflow device		P/Pf/C	00		
Contamination prevented during food preparation, storage & display  40 Personal cleanliness	P/Pf/C	0					d waste water properly dispose es: properly constructed, supp			00		
Wiping cloths: properly used and stored	C	0					refuse properly disposed; facilitie		Pf/C	00		
42 Washing fruits and vegetables	P/Pf/C	0	0	(55)	Ph	ysical fac	ilities installed, maintained, an	d clean	P/Pf	00		
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ailable					entilation and lighting; designation of latex gloves not used per C		C	00		
Person in Charge (Signature) Date 5	06	13		Violat	tions	docume	nted Date con	rections due	0	#		
Person in Charge (Printed) LIS9 DOGO)	Priority Item Violations  Priority Foundation Item Violations  Core Item Violations  Priority Foundation Item Violations  P-30 - 23  I5											
Inspector (Signature) LAWUN STONIA Date 5/30		Risk Factor/Public Health Intervention Violations Repeat Risk Factor/Public Health Intervention Violations										
Inspector (Printed)		Good Retail Practices Violations  Requires Reinspection - check box if you intend to reinspect										
Appeal: The owner or operator of a food establishment aggrieved by to or dispose of unsafe food, may appeal such order to the	his orde	er to o	corre	ect any	v inst	ection v	iolation identified by the food	inspector or t	to hold, o	destroy,		

Food Establishment Inspection Report Inspection Report Continuation Sheet h HS TOWN Mancheste Establishment HALLP TEMPERATURE OBSERVATIONS Item/Location/Process Item/Location/Process Temp Item/Location/Process Temp 4/5 internal chix temer Hand Sink 115F chopped aarlic walkin iced Apples Baked Beans ucken sandwhich **OBSERVATIONS AND CORRECTIVE ACTIONS** Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 & 8-406.11 of the food code. Item Number 55c brooms stored on ground in back by handsink Fruit flies present near back door handsink in Kitchen area not clean - above 3 bay Front Kitchen area gasket of walk in cooler not clean gasket of 2 door reach in by prep table not clean Walk in cooler ceiling not clean Food containers stored on Floor in walk in Freezer/walk in cooler 150 ppm - Hist Strips available great storage of equipment + utensis available for staff Trays to be coming back next year Person in Charge (Signature) Inspector (Signature)

# Food Establishment Inspection Report Page 3 of 3

Establishment HOWELL CHUNCYTECH HS TOWN MANCHESTEV  TEMPERATURE OBSERVATIONS  Item/Location/Process  Sicled Vertex presen which 39.5 descripted in in 38.5 Hand Sill k Brock (part cheese walk in 39.5 descripted in in 39.5 shoulane cheese walk in 39.5 descripted in in 39.5 shoulane cheese walk in 39.5 shoulane cheese one door each in 41.5 shoulane cheese one door each in 39.5 shoulane of the shoula			Date_5[30]	23		
Establishment HOW Ell Ch	uney T	ech HS Town Manch	ester			
			ATIONS			
	TEMPERATURE OF Item/Location/Process Temp Item/L			Item/Location/Process	Temp	
Sliced Watermelan walking				Hand SINK Back	1(8F	
Goat Cheese walkin		2 door Freezer (desert)	39F	**		
Provolone cheese walkin						
Shicoded cheese seach in	TEMPERATURE OBSERVATIONS  atton/Process  Temp					
Sliced tomato	39F					
Sliced cheese one door reachin	TEMPERATURE OBSERVATIONS  INPROCESS  TEMP  TEMPERATURE OBSERVATIONS  TEMP REMINISCATION TEMP REMINISCATION TO THE PROCESS  TEMP REMINISCATION TO THE PROCESS					
4 door Travisen cold hold	TEMPERATURE OBSERVATIONS  Item/Location/Process Temp Item/Location/Process Temp Item/Location/Process Item/Loc					
Buffer 2 door leach in						
Malekine sike tis this	OE	SERVATIONS AND CORRECT	IVE ACTION	ONS		
1.0	report must b	e corrected within the time frames below	, or as stated	in sections 8-405.11 & 8-406.11 of th	ne food code.	
50pf no not water	rat f	ront nandsink by	dishr	nachine		
	web	and the second s	2 2			
11c dirty wipin	a clot	hon preptable	inbac	K preproom		
52c dirtustaan	ant u	later in mon buch	retn	ext to aish mad	hine,	
52c arease trap	not f	unctioning prope	erivi -	leaking an arai	ind	
49C aaskets dan	naged		er - m		7100	
	100	and the second s		Not be expressed		
100			1	Not in his	TA CAS	
- V-	1	WILD STATE MANAGEMENT			, , ,	
Mr. milk cirales	1. VICIN					
550 programa	201110	000000000000000000000000000000000000000	, , , ,	iain in Fleeze		
40						
490 drawers WI	th ut	ensils (exterior)	not (	clean		
in night discriss and as	V-1-0 :		1 0 -			
	araf	naicsiorage - 1	to be c	leaned at enac	0F	
1000	allow	agint starage				
MATER GARD LINGER	MANA	HE CONCRETATION				
THINK TOUR THEFT	TUTTU	ac available				
TO THE QUAL SANIT	141	13 pay) 150 ppm	1			
		<i>J.</i> 1.				
	7					
Person in Charge (Signature)	Les	Hartusa /	-	- 67g	199	
Inspector (Signature)	in lot	mdl		Date 5/30/	22	

Risk Category: 3 Food Establ											
Establishment type: Permanent Temporary Mobile Other					_	Date:	5-16	-2			
Establishment Junany Trale		Negari.	onne	ecticur Healt	ž.	Time In_		M/PM Time Out			AM/PM
Address 120 Chartet oak			D	H		LHD	Mana	heater			
Town/City	j	W 7				Purpose	of Inspection:	Routine	Pre-o	)	
Permit Holder	C	onnection of Pu	cut Depublic Hi	partmen lealth	t	Reinspe	ction	Other 173A			
FOODBORNE ILLNESS RISK FA	ACTO	RS	ANI	D PU	BLI	C HEAL	TH INTERVE	ENTIONS			
Risk factors are important practices or procedures identified as the most prevalent cont	tributing fa	actors c	of food	dborne il	lness d	r injury. Inter	ventions are contro	I measures to prevent foodborn	e illness o	injury.	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	tem	11	N=in	compli	ance	OUT=no	ot in compliance	N/A=not applicable	N/O=n	ot obse	erved
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark ir	appr	opria	te box	for C	OS and/or I	R COS=correc	ted on-site during inspection	n R=r	epeat	violation
IN OUT N/A N/O Supervision	V	cos	R		-	JT N/A N/O		on from Contamination	1 /		COS R
1 Person/Alternate Person in charge present,	Pf	0	0		-	- DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN	Food separated		-		00
demonstrates knowledge and performs duties				16				urfaces: cleaned & saniti		(Pf/C	00
Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17				ion of returned, previous tioned, and unsafe food	ly	Р	00
Employee Health								ture Control for Safety			-
Management, food employee and conditional employee;	P/Pf	0	0	18 <	)		Proper cooking	time and temperatures			00
knowledge, responsibilities and reporting	C 000000 0	Davide .		19 (			Proper reheatin	g procedures for hot hole	ding		00
Proper use of restriction and exclusion	P	0	0	20 0	$\frac{1}{2}$		Proper cooling	time and temperatures			00
Written procedures for responding to vomiting and diarrheal events	Pf	0	0	_	_			ing temperatures ding temperatures	<del></del>	-	00
Good Hygienic Practices								rking and disposition			00
6 Proper eating, tasting, drinking, or tobacco products us	e PC	0						c health control: procedu		FIFT	
7 O No discharge from eyes, nose, and mouth	C			24			and records	o nearth control. procedt	P	/Pf/C	00
Preventing Contamination by Hands								umer Advisory			
8	P/Pf	0	0	25				y provided: raw/undercooked	food	Pf	00
9 No bare hand contact with RTE food or a	P/Pf/C						Highly Sus	ceptible Population			
pre-approved alternative procedure properly followed	FIFIIC	0	0	26	0		Pasteurized foods	used; prohibited foods not off	ered	P/C	00
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0			Fo	od/Color Additi	ves and Toxic Substan	ces		
Approved Source				27	) (		Food additives:	approved and properly to	used	P	00
11   Food obtained from approved source	P/Pf/C			28	<b>a</b>			es properly identified,	F	P/Pf/C	00
12 O O Food received at proper temperature		0	_				stored & used			11 110	
Food in good condition, safe, and unadulterated Required records available: molluscan shellfish	P/Pf	0	0	-		C		ith Approved Procedure	es		
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29		0		h variance/specialized riteria/HACCP Plan	F	/Pf/C	00
	OD RE	TAII	PR	ACT	CES		process/NOF C	IIIEIIA/FIACOF FIAII	No. of		_
Good Retail Practices are preventative measures to							icals, and physica	I objects into foods.			
	n appro							on-site during inspection	R=r	eneat	violation
OUT N/A N/O Safe Food and Water	V	cos	_	Ol				e of Utensils			COS R
30 Pasteurized eggs used where required	Р	0	0	43	9 In	use utens	ils: properly stor				00
31  Water and ice from approved source	P/Pf/C	0	0	44	O Ut	ensils/equip	ment/linens: prop	perly stored, dried, & handle	ed		00
32 O Variance obtained for specialized processing methods	Pf	0	0	45 6	Si Si	ngle-use/sir	gle-service article	es: properly stored & used		PC)	
Food Temperature Control				46		oves used				C	00
Proper cooling methods used; adequate equipment for	Pf/C	0	0		-			and Equipment		_	L III
temperature control  Plant food properly cooked for hot holding	D6			47				surfaces cleanable,	F		00
35 O Approved thawing methods used	Pf	0			pr	operly des	igned, construct	ed, and used		2	
36 Thermometers provided and accurate		00		48		arewasnin	g racilities: insta	lled, maintained and use and test strips available	<del>;</del> a;	Pf/C	00
Food Identification	1. 1/0	19	$\subseteq$	49			ntact surfaces cl			_	00
37 Food properly labeled; original container	PfC		0	40	-	711-100G GO		ical Facilities		٣	90
Prevention of Food Contamination	1.6			50 0	OH	t and cold		; adequate pressure		Pf (	00
38 Insects, rodents, and animals not present	Pf/C	0	0	51 (	) PI	umbina ins	stalled; proper ba	ackflow devices	P		00
39 Contamination prevented during food preparation, storage & display	P/Pf/C						waste water pro				00
40 Personal cleanliness	Pf/C	0	0					structed, supplied, & clea			00
41 Wiping cloths: properly used and stored		0		54 (		rbage and	refuse properly di	sposed; facilities maintaine	ed	C	00
42 Washing fruits and vegetables	P/Pf/C	0	0					naintained, and clean	P		00
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable						nting; designated areas unot used per CGS §19a-3	used		00
Person in Charge (Signature)	6/2	2		Viola	tions	docume	nted	Date corrections of			#
Date SI	010	د	-			m Violation	tem Violations	5-19-23	+		
Person in Charge (Printed)	١.					Violations			+	13	2
2	1 1	~ -	2				ealth Intervention	n Violations	-	15	2
Inspector (Signature) \ XUMM Quille Date 5	110	hi	$\supset$	Repe	at Ri	sk Factor/l	Public Health Int	ervention Violations			_
Denice D	1.6	0.		Good	Ret	ail Practice	s Violations				7
Inspector (Printed) Den 1 Se Payne				Requ	uires	Reinspec	tion - check box	x if you intend to reinsp	ect	;	
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Direct	er to	COTTE	ect an	y ins	pection vi	olation identifie	d by the food inspector	or to he	old, de	estroy,

Foo	d Esta	blishment Inspec	ction R	Report Page 2	_ of
LHD Manchester		Inspection Report Continuation Shee	t	Date5 -	16-23
Establishment Hungry	Tiges	Town Manch	ester		
0 0	0	TEMPERATURE OBSERVA	ATIONS		A CONTRACTOR OF THE PARTY OF TH
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
A1 ( )		1 10 10	1317	110111112000111111111111111111111111111	Temp
(heese (WIC)	39 F	Hor water Helin	1017		
Chicken	37 F	, ,			
heese-shredded	39F				
	THE RESERVE OF THE PARTY OF THE				
Tomato's	41F				
J					
					1
		SERVATIONS AND CORRECT			
Item Violations cited in this	s report must be	e corrected within the time frames below	, or as stated i	n sections 8-405.11 & 8-406.11 of th	ne food code.
Number					
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
47c Non-Comme	· · · · ·	0.			
416 HOUR COMME	aux 1	Ai cowave/Refriger	www.		
		containers Auton		(Cos)	
Δ ()	$\sim$ 1		10 10		
6c Employee	Bever	age without con	ref Cos	( )	
		. ()			
47 pf Lamaged	span	ula tongs Disc	ande	l (Cos)	
550 Walls ou	مر م				
55c Walls ou	e ym	up sink unclea	ഗ		
490 angun 1 /211	crott	non yesterday	ملح ما	lear Cos)	
		1 ()	^		
49 ( 1 mtanor	S clea	ntongs unclear	Demix	od Rowash (Co	120
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16PF Interior 10	'ema	whire unclear	)		
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Person in Charge (Signature)	\ \ \ \	at		Date ≤/(₁	6/22
	<u> </u>			- 1	
Inspector (Signature)	enise	Tayne		Date 5 //	6123
		0			- 1



### TOWN OF MANCHESTER HEALTH DEPARTMENT

479 Main Street, P.O. Box 191, Manchester, CT 06045-0191 Phone Number: **(860)** 647-3173, Fax Number: **(860)** 647-3188

#### 2022 FDA Food Code Checklist

The purpose of this checklist is to inform you on the new regulations and the changes that have been made within the Food Code. The Manchester Health Department recognizes that the adoption of the 2022 FDA Food Code will be a transition for you, for inspectors and Food Establishments. We will continue to work with you to educate and implement the new regulations within this code. We understand that this may generate questions, which we are committed to working with you during this transition period and process.

Facility: Hungry liges	
Violations Documentation  No Numerical Scoring Grade-3 Violation Levels  PRIORITY – 72 hours for correction PRIORITY FOUNDATION – 10 days for correction  CORE – 90 days for correction or determined by inspector  Corrections and ReInspections Corrected on site violations Reinspection – case by case Repeat violations No Bare Hand Contact – Correction Required 9 P/Pf/C	CFPM/PIC on every shift during operating hours 1 Pf   Implementing Date Marking (Sec. 3-501.17) 23 P/Pf   Signage/Posters required
Resources:	
2022 FDA Food Code: https://www.fda.gov/food/fda-food-cod	de/food-code-2022
Town of Manchester Health Dept: https://www.manchesterct	gov/Government/Departments/Health-Department
FDA Handbook: https://www.fda.gov/food/retail-food-induprotection-employee-health-and-personal-hygiene-handbook	stryregulatory-assistance-training/retail-food- ook
Environmental Health Inspector:	
Signature of Inspector: Denise Payne	
Print Name: Denise Payne	Date: 5-16-23
Person In Charge:	
Signature of Person In Charge:  Print Name:  Deroley  Email  Miger 120 2 406 ° Con	Date: S/15/23

Risk Cate	gory:	3	2.0	Foo	d Establ	ishn	nen	t Ir	ISD	ect	ioi	n Re	port		Page 1	of <u>Z</u>	_	
Establishr		e: Pe	rmanent Tem	porary Mobile					_		T	ate: F	7/17/2					
Establishr	nent J	0 e i	y Garli	0			+geris	og Conne	schar Hea	<u> </u>	Ti	me In	11 0	AM/PM	Time Out	12	_AI	//PM
Address	311	eds	itore F	Rol			D	P	LHD Manchestia									
Town/City	MC	mi	nester	9		j			Purpose of Inspection: Routine Pre-op									
Permit Ho	lder	Ga	ru 6.			C	of Pe	ublic H	Reinspection Other									
Diek	factors or	a imports	FOODBO ant practices or procedu	ORNE ILLNES						_						ness or init	m/	
10725254			ance status (IN, OU						comp			and the second	not in compliance		1 - De Arthur Constitution	N/O=not o	and relative	ved
P=Priority i		7500 00	y foundation item		A TOP OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN	- NO. 17		-	-		110		The second second		during inspection		_	
IN OUT	N/A N/O		St	pervision		٧	cos	R		IN C	TUC	N/A N/O	Protect	ion from C	ontamination	V	100	S R
100	( )		n/Alternate Persor		100	Pf	0	0					Food separate			P	C Ø	50
2 800		Certifie	nstrates knowledged and Food Protection			C	0	0	17	න් ල	0		Proper disposi	tion of return	eaned & sanitize ned, previously			000
		3, & 4	F	1114L							_		served, recond	The second second	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLU			
	Contract Contract	Manag	ement, food employ	ee Health	employee:	400			18	1	_	06	Proper cooking			D/Df	CC	00
3 6 0			edge, responsibilit		employee,	P/Pf	0	0	19	0	<u></u>	00	Proper reheating	ng procedur	es for hot holdir			50
4000	Contract of Section 2		r use of restriction			Р	0	0	20	0	0	00	Proper cooling	time and te	mperatures			0
500		Writte	n procedures for r	esponding to vom	iting and	Pf	0	0	21				Proper hot hold					0
	and the same	diarrne	eal events pr	nic Practices					23				Proper cold ho				_	00
600	6	Prope	r eating, tasting, d		o products us	e P/C	0						Proper date mag	ic health co	ntrol: procedure	P/P		10
700			charge from eyes			C	0		24	9	0		and records	io noditir oo	maon procedure	P/Pf/	C	0
			Preventing Conta	mination by Har						/				umer Advis	sory			
8 8 0	-		clean and proper			P/Pf	0	0	25	0	0	0			w/undercooked for	od P	f	00
9 0 ,0	16 316 31		re hand contact w proved alternative		rly followed	P/Pf/C	0	0	26			6		ceptible P	opulation ted foods not offere	- D		
10 000			ate handwashing si			Pf/C	0	0	20	$O_{\Gamma}$	0	- Paris	ood/Color Addit				0 0	
/	- In the second	, ,,,,,,,		ed Source	Cura Cocoonini	1. 1/0	1		27	010	0	_			and properly us		PIC	00
11 00			obtained from app	roved source		P/Pf/C	0	0	28	1	0	0	Toxic substance					
1200			received at proper				0	0	28	8	$\overline{}$	100	stored & used	0 5 8			C	
13 00 0	THE PERSON NAMED IN COLUMN 2 IS NOT		n good condition,			P/Pf	0	0	-				Conformance w					
14 0			red records availa ication, parasite d		emsn	P/Pf/C	0	0	29	0	0	0	Compliance wi			P/Pf/	C	00
			outer, paraette a		GO	OD RE	TAIL	- PR	RACT	ICE	S		processino	anchan ino	OI TIGHT			
			Good Retail Pract	ices are preventat	ive measures t	o contro	ol the a	additi	ion of	patho	oger	s, chen	micals, and physic	al objects into	o foods.			
	The second second	ered ite	em is not in complia		type Mark i	n appro	_	-	for CO	OS ar	nd/o	R	COS=corrected			R=repe	at vi	olation
OUT N/A				and Water		٧	cos		-	UT				se of Utens	ils	V		S R
30 🔾	Avenue 1		d eggs used where ice from approved			P P/Pf/C	00	_					sils: properly sto ipment/linens: pro		ما ما ۵ اما ما ما	0	_	0
32 0 0			otained for special		nethods	Pf	-	0					ingle-service artic			Pi/		00
				rature Control					-				d properly	oc. p. opo.ij	0.0.00 0.000	8	/	00
33 🔾	The state of the s		ling methods used		ment for	Pf/C	0							s and Equi				
5000			e control				(0 to 10 to		43				on-food contact			P	60	0 9
			properly cooked for hawing methods u			Pf	00	0	$\vee$				signed, constructing facilities: instruction			_ ~	31	, –
36 🔾			ters provided and			Pf/C	0	8	48				rig lacililles, iristi jents, sanitizers,			Pf/0		0
			Food Ide	entification				114	49				ontact surfaces		ipo avaliabie	1/0	) (	
37 S F00	d properl	y label	led; original contait	ner		Pt/C	Ø	0	0	-			Phy:	sical Facilit		9	,	
			Prevention of Fo		on				(50)	Ø( -	lot a	and col	ld water available	e; adequate	pressure	(P		0
38/© Inse	ects, rode	ents, ar	nd animals not pre nted during food pre	sent	0 -1:1		0						nstalled; proper b					0
40 O Per				eparation, storage	& display	P/Pf/C	0						d waste water pr ties: properly cor					000
			erly used and sto	red		C	0						d refuse properly of					30
42 O Was	shing frui	ts and	vegetables			P/Pf/C							cilities installed,			P/Pf/		0
Permit Hol	lder shall r	notify c	ustomers that a copy	y of the most recent	inspection repo	ort is av	ailable	. 3					rentilation and lig			ed Ĉ		
		98	15	<b>\</b>		/	1					locum	ber latex gloves ented		orrections du		#	
Person in (	Charge (	Signat	ture	احــــــــــــــــــــــــــــــــــــ	Date 5/	17/	23	3	Prio	rity It	tem	Violati	ons		this day		1	
Dorner in	Chara - "	ر کے دور	1 1.00	04 5	. 166-1	- /-	1						Item Violations	5/7	27/23		2	
Person in 0	Griarge (	rinte	3036	(11500000000000000000000000000000000000	- CO	رجا	0	9				olation	s Health Interventi		7/23	_	A	
Inspector (	Signatur	re) 🏋	aww	207111111111	Date 5/17	117	3						r/Public Health Ir			-	0	
		11	HIVAN	-MANAY	1	1			Goo	d Re	etail	Practic	ces Violations				7	
Inspector (		W	WITH	MILLE	1		- 2						ction - check bo					
Appeal: T			perator of a food	establishment ag										ed by the fo	od inspector o	r to hold	, des	stroy,

F00	a Esta	ibiisnment inspe	sction i	Report -	Page	_of		
LHD Manchester		Inspection Report Continuation Sh	ieet		Date 5/17	173		
Establishment JOCU 60	lilic	Town_ Man	chest	EX		4		
Cook line		TEMPERATURE OBSER	VATIONS					
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Lo	ocation/Process	Temp		
Raum Chicken	38F	sliced tomatos cookline	e 41f	Quat saniti	zer bucket 20	8 PPM		
Butter	41F	Chicken wings Par Walki	n 38F	Hand sink	in kitchen	115F		
Raw sausage	38F	chicken breast cooked "	* 38F		k customer Bathroo	m 70F		
Raw Shrimp	37F	Meatballs hot holding	175F		endovee Bathroo			
Rammuscles	38F	Mozzesella ball 5 cold holding	9 40F		nk sonitizer			
Raw Sovid	38F	Mozzerdla ball 5 cold holdig Reprani cold hold Pizza Stati	m 39 F		Temp▶Rite, §	to bli		
Chicken soup Hot holding	197F			V	Date:			
Chicken Broth Hot hading	203F				Fecha Emp: Empleado			
		SERVATIONS AND CORRE			PASS WHEN BLUE BAR TURNS ORANGE SE ACCEPTABLE CHANDO LA BARRA			
Item Number Violations cited in this	report must b	e corrected within the time frames bel	ow, or as stated	in sections 8-2	160°F/71°C of the	e food code.		
490 unclean gas	ikets o	n refrigeration througho	vt					
550 Floor filegro	out miss	ing or damaged alon	a cookli	ne				
660 reasonal items/	airpods).	stored on shelf at gar	tic bread	Station -	- 005			
47pF Wood Pizza	paddle	has wood splintering o	along the	edges -	COS			
560 Unclean air	to Unclean air intake vent over Pizza station							
15P Ice not covere								
450 unwrapped drin	50 unwrapped drink stirers not protected in Bar							
37c unlabeled conf	ainers	of food						
	8C Fruit-Ays present in bar area							
490 pan cover in								
		be stored in des	1910 ato	N NVON 1	14 11710			
TWICK DETECTION	reray 1	DESTRICT THE OFFI	Joinico	1 WICA C	4 WIL			
Person in Charge (Signature			•		Date 5/13	7/23		
Inspector (Signature)	TIN	In all			Date 5/17	172		
1,000					- Jule	1-1		



#### TOWN OF MANCHESTER HEALTH DEPARTMENT

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Facility: 1000 Garic						
Violations Documentation No Numerical Scoring Grade-3 Violation Levels  o PRIORITY - 72 hours for correction o PRIORITY FOUNDATION - 10 days for correction	CFPM/PIC on every shift during operating hours 1 Pf Implementing Date Marking (Sec. 3-501.17) 23 P/Pf Signage/Posters required Handwashing sign at all handwash sinks (section 6-301.14) 10c 9 Major Allergens 37c					
○ CORE — 90 days for correction or determined by inspector  Corrections and ReInspections ○ Corrected on site violations ○ Reinspection — case by case ○ Repeat violations	Outdoor Allowance for dogs -preapproval and sign required. 38 Pf  Employee Assessment Form Vomiting/Diarrhea Written clean-up Policy Mop Sink Required (Sec. 5-203.13) CORE -90 day					
No Bare Hand Contact – Correction Required 9 P/Pf/C  Resources:  2022 FDA Food Code: <a href="https://www.fda.gov/food/fda-food-co">https://www.fda.gov/food/fda-food-co</a>	✓ Temperature: Final Cook Temperatures  de/food-code-2022					
Town of Manchester Health Dept: <a href="https://www.manchesterct.gov/Government/Departments/Health-Department">https://www.fda.gov/food/retail-food-industryregulatory-assistance-training/retail-food-protection-employee-health-and-personal-hygiene-handbook</a>						
Environmental Health Inspector:						
Signature of Inspector:						
Print Name: Lauren Arangu	Date: 5/17/23					
Person In Charge:	ı*					
Signature of Person In Charge:	Title: Owner					
Print Name: Gary Gello	Date: <u>5/17/23</u>					
Email Garygello Cgmail.com						

Risk Category: 3 Food Establishment Inspection Report Page 1 of 2									
Establishment typer Fermanent Temporary Mobile Other					Date	5	116/23		
Establishment La Toavilla	The stand Connecticut Mealing			Time		0	N/PM Time Out_	AM/PM	
Address ZI Oak Street	DPH)			LHD	LHD Manchester				
Town/City Manchester				Purp	Purpose of Inspection: Routine Pre-op				
Permit Holder Luis Gabrill Zambrano		102/10/2016	c Health			Reinspection Other			
FOODBORNE ILLNESS RISK FA									
Risk factors are important practices or procedures identified as the most prevalent contri					1				
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it			in com	_		_	in compliance		O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type				1					R=repeat violation
IN OUT N/A N/O Supervision	V	COS R			OUT N/A			on from Contamination	V COS R
1 Person/Alternate Person in charge present,	Pf	00	0 15	-		The second	Food separated		P/C O O
demonstrates knowledge and performs duties			16	3	00	THE REAL PROPERTY.	The second secon	rfaces: cleaned & sanitized	P/Pf/C O
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	2 17	8	0	Marie Control	9,	on of returned, previously tioned, and unsafe food	P 0 0
Employee Health								ture Control for Safety	
Management, food employee and conditional employee;	P/Pf	00	18	30				time and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting			19	90				g procedures for hot holding	POO
4 Ø Proper use of restriction and exclusion	Р	00	2 20		00	00	Proper cooling t	ime and temperatures	POO
5 Written procedures for responding to vomiting and	Pf	00						ng temperatures	P 0 0
diarrheal events 13 Y 3 V 10 EO			22					ding temperatures	POO
Good Hygienic Practices	- 20		23	3	$\circ$		Proper date mai	rking and disposition	P/Pf O O
6 O Proper eating, tasting, drinking, or tobacco products use 7 O No discharge from eyes, nose, and mouth				10	00	0	i ime as a public	health control: procedures	P/Pf/C O O
7 O No discharge from eyes, nose, and mouth Preventing Contamination by Hands	С	00	41-			1	and records	imer Advisory	
8 © Hands clean and properly washed	D/Df	1010	25	500	00		The second secon	provided: raw/undercooked food	Pf OO
No here hand contact with RTE food or a	EVEL		4	ارفار	0 0	THE REAL PROPERTY.		ceptible Population	17100
9 pre-approved alternative procedure properly followed	P/Pf/C	00	26	100				used; prohibited foods not offered	P/C 00
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	00		0				es and Toxic Substances	1.10
Approved Source	1		27	70	00			approved and properly used	POO
11 O Food obtained from approved source	P/Pf/C	00				10000		es properly identified,	
12 O O Food received at proper temperature		00	- //	3 3	00		stored & used	os property identifica,	P/Pf/C O
13 Ø O Food in good condition, safe, and unadulterated	-	00	-					th Approved Procedures	
14 O Required records available: molluscan shellfish	P/Pf/C	00	29	90	0 0	1		n variance/specialized	P/Pf/C O O
identification, parasite destruction							process/ROP cr	iteria/HACCP Plan	PIFIIC O
	OD RE								
Good Retail Practices are preventative measures to									
					and/or R			on-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	V	COS F	_	OUT				e of Utensils	V COS R
30 Pasteurized eggs used where required Water and ice from approved source	P	0					s: properly store		C 0 0
32 O Variance obtained for specialized processing methods	P/Pf/C Pf	00						erly stored, dried, & handled es: properly stored & used	Pf/C O O
Food Temperature Control							properly	s. properly stored & used	c 0 0
Proper cooling methods used; adequate equipment for		TTT		, _	Gioves	useu		and Equipment	1000
temperature control	Pf/C	0	기는		Food an	nd nor		urfaces cleanable,	
34 O Plant food properly cooked for hot holding	Pf	00	5 47				gned, constructe		P/Pf/C O
35 O Approved thawing methods used		00	51 [					lled, maintained and used;	
36 C Thermometers provided and accurate	Pf/C	00	5 48	3				and test strips available	Pf/C
Food Identification	THE REAL PROPERTY.		49	X (			tact surfaces cl		1000
37 Food properly labeled; original container	Pf/C	00	5	_				ical Facilities	
Prevention of Food Contamination				00	Hot and	cold		adequate pressure	Pf OO
38 Insects, rodents, and animals not present	Pf/C	100					talled; proper ba		P/Pf/C O O
39 Contamination prevented during food preparation, storage & display		00		20	Sewage	and	waste water pro	perly disposed	P/Pf/C O O
40 Personal cleanliness	Pf/C	00	5	30	Toilet fa	cilitie	s: properly cons	structed, supplied, & clean	Pf/C O O
41 O Wiping cloths: properly used and stored	С							sposed; facilities maintained	(0)00
42  Washing fruits and vegetables	P/Pf/C	0						naintained, and clean	P/M/C O O
Permit Holder shall notify customers that a copy of the most recent inspection report is available.    S6									
Viol					ons doc			Date corrections due	#
Person in Charge (Signature) ANOKAGO Date 05 /16	123		_	_	Item Vio				
Person in Charge (Printed)					Foundat em Viola		em Violations	8111/2073	
Course of the country of the	- Indiana	-					ealth Interventio		2
								ervention Violations	1
							s Violations		2
Inspector (Printed) L/W L ( ) L/W L/W R				equire	es Reins	spect	ion - check box	k if you intend to reinspect	-
Appeal: 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,					o hold, destroy.				
or dispose of unsafe food, may appeal such order to the	Direct	or of H	ealth	not l	ater that	n fort	v-eight hours a	ffer issuance of such order	r

1st - White: Health Department

Food Establishment Inspection Report Page 2 of 7

LHD Manchester Inspection Report Continuation Sheet			Date 5/16/23				
Establishr	nent La ToqViI	la	Town_Manch	rester			
			TEMPERATURE OBSERV	ATIONS			
	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp	
Front			I restrann hot mater	100F	reach in Freezer	1-9F	
tomoti	ý	36 F	HAT WATER DANGING	1/45			
Fish		38F	1101 0001 31 110031111	1,0			
CNIM	7)	39F	convicte, / FISh	301 F			
2MILLE		01	reachin				
Comple Di	ecan Isin i A		regerini	37F			
	y Marie	0.05		2/-			
Tomat	5	385	reach in	36F			
stak		39F	BIHTEN	AIF			
			SSERVATIONS AND CORREC				
Item Number	Violations cited in this	report must b	e corrected within the time frames below	w, or as stated	d in sections 8-405.11 & 8-406.11 of th	e food code.	
54 C	no trash bin	under	handsink				
490	Lids Of Soy GO	avce lo	I on Front line not i	clean	lexterior)		
MOTEX	Food thermor						
notex	dish machin	€ 50-1	10 ppm - Test stru	os ava	ilable		
M)HON	good hierarch	MOFFO	nool product				
notix	summit che	st Free	zer being used	for F	rench Fries		
	4 WILL CHECK IF COMMERCIAN						
notex							
	- drill top outdoor not in use - take removed						
notex	ex very citan + arganized						
notex	not open@	time	Or Visit - no co	oling	, cooking temp	5.	
	<u> </u>			<i>J</i>	J	2	
					- II		
				.,			
Person in	Charge (Signature)	is TAYE	capsi		Date 5 /14/2	3.	
Inspector	Charge (Signature) (Signature) LW	uns	7 M dw		Date 5/16/		



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Facility: 10 TO QUILLO							
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No Bare Hand Contact – Correction Required	Temperature: Final Cook Temperatures						
9 P/Pf/C  Resources:  2022 FDA Food Code: <a href="https://www.fda.gov/food/fda-food-co">https://www.fda.gov/food/fda-food-co</a>	de/food-code-2022						
Town of Manchester Health Dept: <a href="https://www.manchesterct.gov/Government/Departments/Health-Department">https://www.manchesterct.gov/Government/Departments/Health-Department</a>							
FDA Handbook: <a href="https://www.fda.gov/food/retail-food-industryregulatory-assistance-training/retail-food-protection-employee-health-and-personal-hygiene-handbook">https://www.fda.gov/food/retail-food-industryregulatory-assistance-training/retail-food-protection-employee-health-and-personal-hygiene-handbook</a>							
Environmental Health Inspector:							
Signature of Inspector: Law Hawy							
Print Name: LUVEN Grand	Date: 5/11/23						
Person In Charge: Signature of Person In Charge:							
	Title: 6 OUNTE.						
Print Name:	Date: < 1/6/2.3 .						
Email							

Risk Category: 3	Food Establ	ishm	ien	t In	spe	cti	on Re	port		Page 1 o	<u>f_}/</u>	
Establishment type: Permanent Temporary	Mobile Other					_	Date: 1	May 5,2	013			
Establishment MACC Kitcher			*Septe	Connecti	CMF Health		Time In_	•	M/PM Time O	ut		AM/PM
Address 466 Main St		Ī	DI	PI	4		LHD /	Manche	oter			
Town/City Marchester							Purpose	of Inspection:	Routine	Pre	-op	
Town/City Manchester Permit Holder MACC Charities		Co	of Pu	cut Depo	artment alth		Reinspe	ction	Other FDA	-		
FOODBORNE	ILLNESS RISK FA	ACTO	RS	AND	PU	BLI	C HEAL	TH INTERVE	NTIONS			
Risk factors are important practices or procedures identif	lied as the most prevalent conti	ributing fa	ctors o	of foodb	ome ill	ness c	or injury. Inte	rventions are control	measures to prevent for	odborne illnes	ss or injury.	
Mark designated compliance status (IN, OUT, N/A, I	N/O) for each numbered it	em	IN	N=in co	omolia	ance	OUT=n	ot in compliance	N/A=not applical	ble N/C	=not obse	erved
P=Priority item Pf=Priority foundation item C=Core					4				ed on-site during ins		R=repeat	
IN OUT N/A N/O Supervis		V	cos			and the same	JT N/A N/C		on from Contamin	-		COS R
Doman/Alternate Daman in abou			000							lauon		
		Pf	0					Food separated	A SANGER CONTRACTOR OF THE SANGE CONTRACTOR OF THE SAN	142 1		00
demonstrates knowledge and pr		4			16	7			rfaces: cleaned &		P/P/C	
2 Certified Food Protection Manage	ger for Classes 2,	С	0		17			M	on of returned, pre-		Р	00
Employee Hea	lth		$\vdash$			-			ioned, and unsafe ure Control for Sa			
No. of the second secon		-			10	7/	100				חוחנוס	
3   O   Management, food employee and o knowledge, responsibilities and		P/Pf	0		10		200	Proper cooking i	time and temperate	ures	P/Pf/C	
4 O Proper use of restriction and ex		+-							g procedures for he			99
the state of the s	STUDING THE STATE OF THE STATE	P	0						ime and temperatu	ıres		90
5 O Written procedures for respondi	ng to vomiting and	Pf	0		21 (	2	200	Proper hot holdi	ng temperatures			00
diarrneal events		0.0							fing temperatures			
Good Hygienic Pra					23 <	2		Proper date mar	king and disposition	on	P/Pf	00
6 O Proper eating, tasting, drinking,			0		24		000	Time as a public	health control: pro	ocedures	P/Pf/C	00
7 O No discharge from eyes, nose,	and mouth	С	0		24			and records			FIFIIC	
Preventing Contamination	on by Hands							Consu	mer Advisory			
8 O O Hands clean and properly wash	ed	P/Pf	0	0	25 (	00	00	Consumer advisory	provided: raw/undero	ooked food	Pf	00
No bare hand contact with RTE	food or a							Highly Susc	ceptible Population	on		
9 pre-approved alternative process	lure properly followed	P/Pf/C	0		26 (	00			used; prohibited foods		P/C	00
10 O Adequate handwashing sinks, prop		Pf/C	0	0					es and Toxic Sul		11,101	00
Approved Sour		1			27 (	710			approved and prop		П	00
11 O Food obtained from approved so		DIDNO			21	4					P	99
		P/Pf/C	_		28				s properly identifie	ea,	P/Pf/C	00
		P/Pf	_					stored & used			10000000	
13 O Food in good condition, safe, ar	nd unadulterated	P/Pf	0				(		th Approved Proc			
14 O O Required records available: mol		P/Pf/C	0		29	00			variance/specializ		P/Pf/C	00
identification, parasite destruction								process/ROP cr	iteria/HACCP Plan	1		
		OD RE										
Good Retail Practices are												
	/=violation type Mark i	n approp	oriate	box fo	or CO	S and	l/or R	COS=corrected o	on-site during inspec	ction 1	R=repeat	violation
OUT N/A N/O Safe Food and W		V	cos	R	OL	IT		Proper Use	e of Utensils		V	COS R
30 Pasteurized eggs used where require		P	0	0	43		use utens	sils: properly store	ed		С	00
31 O Water and ice from approved source		P/Pf/C	0	0	44	D Ut	ensils/equi	pment/linens: prop	erly stored, dried, &	handled	P(C)	90
32 O Variance obtained for specialized pro	cessing methods	Pf	0	0	45	Si	ngle-use/si	ngle-service article	s: properly stored &	used	PC	
Food Temperature							oves used					00
Desperance and the control of the state of									and Equipment		TATE OF	
temperature control	expose control of the analytic control of the contr	Pf/C	0		7987 V	Fo	ood and no		urfaces cleanable,			
34 O Plant food properly cooked for hot ho	lding	Pf	0		47	201		signed, constructe			P/P/C	
35 O Approved thawing methods used	3		0			IM			led, maintained an	nd used.	<del>                                     </del>	
36 Thermometers provided and accurate	2		0		48				ind test strips avail		Pf(C)	
Food Identificat		1-1/0			10					Idule		
37 Food properly labeled; original container	iOil	Desc			43	- INC	JII-1000 CC	ontact surfaces cle			C	00
		PT/C	0			- III			cal Facilities			
Prevention of Food Cor	itamination								adequate pressur	e		00
38 O Insects, rodents, and animals not present			0	-				stalled; proper ba			P/Pf/C	
39 Contamination prevented during food preparation	n, storage & display	P/Pf/C						d waste water pro			P/Pf/C	00
40 Personal cleanliness			0		53	O To	ilet faciliti	es: properly cons	tructed, supplied,	& clean	Pf/C	00
41  Wiping cloths: properly used and stored			0						sposed; facilities ma		C	00
42  Washing fruits and vegetables		P/Pf/C	0		55 <	O Pr	nysical fac	ilities installed, m	aintained, and clea	an	P/Pf/C	00
Permit Holder shall notify customers that a copy of the n	nost recent increation	ort in m	ilahl-		56	Ac	dequate ve	entilation and ligh	ting; designated ar	reas used		00
Total diam total data depty of the in	Coche inspection repo	Ji Cis ava	mable						ot used per CGS §			
	/						docume		Date correction			#
Person in Charge (Signature)	Date 5	1217	23		Priori	ty Ite	m Violatio	ons	COS		1	
	17.	-	-		Priori	ty Fo	undation	Item Violations	7		C	5
Person in Charge (Printed) - erdinand	2 ChuZ						Violations		COS/AUG	5,22	6	
		1						lealth Intervention			-	
Inspector (Signature)	ne Date 5	12/2	3	[	Repe	at Ri	sk Factor/	Public Health Inte	ervention Violation	S		_
2		/						es Violations			5	
Inspector (Printed) Denise Hayne					Requ	ires	Reinspec	ction - check box	if you intend to re	einspect		
Appeal: The owner or operator of a food establish	shr aggrieved by the	his orde	er to	corre	ct an	y ins	pection v	iolation identified	by the food insp	ector or to	hold, de	estroy,
or dispose of unsafe food, may ar	order to the	Directo	or of l	Healt	h, no	t late	er than for	rty-eight hours at	fter issuance of s	uch order		THE STATE OF

FC	ou esta	ibiisnmei	nt inspec	tion R	eport	Page _	_ of
10 Marchester			t Continuation Sheet			Date May	5,2023
tablishment_MACC	Litcher	Town	Manche	stes		- 4	
			URE OBSERVA		_	Kathanasasaa sa waki k	
Item/Location/Process	Temp	Item/Location	COOL STREET, S	Temp	Item/Lo	cation/Process	Temp
rulate HS	95F	Cheese		38F			
4		Hummus		37F			
		Butter		40F			
		Pune	***************************************	101			
		Cooling in Pro	cess				
			lad prepped	1He Dio	,		
			53F	MIZFIO			
			J				
	OE	SERVATIONS A	AND CORRECT	IVE ACTIO	NS		
	this report must b	e corrected within the	e time frames below,	or as stated in	sections 8-405	5.11 & 8-406.11 of the	e food code.
mber							
10 1 1		_ \					
to Jumbled			COS				
Spray noz	re una	lean (	Cos				
c Unclear		Car -					
- uncean	/	<u>Cos</u>		9	. 1		
10 Damage	1 cutton	g boards	(Cas)	disca	ded		
5c Single - u	se stor		ns T				
+ 10						1/.	
	ice ma	chène u	ndean	cos)	unphic	ged/empt	ed + clu
2P Oatmilk	@ 47F	Discar	ded (Ca	5	1		onsch
Coc Intake of	56 20-1	over Kettle					
I mare a	u vent	over Kenne	maleur	•			
6							
			_				
			^ ^			C1.5	100
son in Charge (Signature)			110	No		Date 5/12	1123
pector (Signature)	Romino	Dinas 5	JACK TO THE STATE OF THE STATE	10/	·	Det -   10	12
ector (Signature)	Venise	tuyre	TW	14/		Date 5 12	23



479 Main Street, P.O. Box 191, Manchester, CT 06045-0191 Phone Number: **(860)** 647-3173, Fax Number: **(860)** 647-3188

#### 2022 FDA Food Code Checklist

5 5	
Facility: MACC Charities - Kitchen as	nd Community Catering
√ Violations Documentation	CFPM/PIC on every shift during operating hours 1 Pf
No Numerical Scoring Grade-3 Violation Levels	Implementing Date Marking (Sec. 3-501.17) 23 P/Pf
<ul> <li>PRIORITY – 72 hours for correction</li> </ul>	
PRIORITY FOUNDATION — 10 days for	<ul> <li>Handwashing sign at all handwash sinks</li> </ul>
correction	(section 6-301.14) 10c
o <u>CORE</u> – 90 days for correction or	Outdoor Allowance for dogs -preapproval
determined by inspector	and sign required. 38 Pf
Corrections and ReInspections	
Corrected on site violations	Employee Assessment Form
O Reinspection – case by case	Vomiting/Diarrhea Written clean-up Policy
o Repeat violations	Mop Sink Required (Sec. 5-203.13) CORE -90 day
No Bare Hand Contact – Correction Required	Temperature: Final Cook Temperatures
Insp. Rpt. Avail.	
Resources: 24 Hrs.	
2022 FDA Food Code: https://www.fda.gov/food/fda-food-co	de/food-code-2022
Town of Manchastar Harlth Dark http://	10
Town of Manchester Health Dept: https://www.manchesterc	t.gov/Government/Departments/Health-Department
FDA Handbook: https://www.fda.gov/food/retail-food-indu	astryregulatory-assistance-training/retail-food-
protection-employee-health-and-personal-hygiene-handb	
	von.
Environmental Health Increase.	
Environmental Health Inspector:	
Signature of Inspector:	100
- Service Tax	
Print Name: De rise Par	ne Date: 5/12/23
Person in Charge:	
	$\bigcirc$
Signature of Person In Charge:	Title: Vulf
Fa la T	
Print Name: Terdinand L. Cm7	Date: 5 12 23
Email Cruz 09fc@amai	l. Com.

isk Category: 2 Food Establishment Inspection Report Page 1 of											
Establishment type: Permanent Temporary Mobile Other					5.00	5-17-2	3				
Establishment Manchester Chinese Chisine		espin	Canno	ections as	ime In		M/PM Time Out		AM/PM		
Address 956 Main St		7	D	H)	.HD IV	anches	3				
Town/City Manchester						of Inspection:		re-op			
Permit Holder LAA LIA XIU	Co	onnectic	cut De	epartment R	Reinspect	tion	Other_FDA				
FOODBORNE ILLNESS RISK FA	ACTO	RS /	ANI	D PUBLIC	HEALT	H INTERVE	NTIONS				
Risk factors are important practices or procedures identified as the most prevalent cont											
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if  P=Priority item Pf=Priority foundation item C=Core item V=violation type			_	compliance		in compliance	N/A=not applicable N ed on-site during inspection	I/O=not obs R=repeat	William School		
IN OUT N/A N/O Supervision	v	cos	_	O IN OUT			n from Contamination		COS R		
Person/Alternate Person in charge present	Pf					ood separated		200			
demonstrates knowledge and performs duties	Pi	0		<b>6</b> €			faces: cleaned & sanitize	T PC	<b>#</b> C		
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 00	200000		on of returned, previously oned, and unsafe food	Р	00		
/ Employee Health	16 172				The second second		ure Control for Safety				
Management, food employee and conditional employee;	P/Pf			18 0 0	001	Proper cooking t	ime and temperatures		00		
knowledge, responsibilities and reporting					901	roper reheating	procedures for hot holdin		00		
Proper use of restriction and exclusion  Written procedures for responding to vomiting and	P	0	0	20 00			me and temperatures		00		
diarrheal events	Pf	0	0	22 00			ng temperatures ing temperatures	P	00		
Good Hygienic Practices				23 00			king and disposition	P/Pf	00		
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0	24 0 0	10	Time as a public	health control: procedure	e			
7 9 No discharge from eyes, nose, and mouth	С	0	0	24 0		and records		P/Pf/C	00		
Preventing Contamination by Hands					1 - 1		mer Advisory				
8 Hands clean and properly washed No bare hand contact with RTE food or a	P/Pf	0	9	25 🐼 🔾	0		provided: raw/undercooked foo	d Pf	00		
9 pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0 0	F		eptible Population sed; prohibited foods not offere	d DIC	00		
Adequate handwashing sinks, properly supplied/accessible	Pic	0	0	2000	The state of the s		es and Toxic Substance				
Approved Source				27 0 D	-		approved and properly use		00		
11 C Food obtained from approved source	P/Pf/C	0	0	28 0			s properly identified,	P/Pf/C			
12 C Food received at proper temperature		0	-	28		stored & used		P/PI/C	00		
Food in good condition, safe, and unadulterated	P/Pf	0	0				h Approved Procedures				
14 C Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29 0 0			variance/specialized teria/HACCP Plan	P/Pf/C	00		
	OD RE	TAIL	. PR	RACTICES	- British F	DIOCESS/ITOT CIT	terian iAOOF Flair				
Good Retail Practices are preventative measures to					ns, chemic	als, and physical	objects into foods.				
	in approp	oriate	box	for COS and/o	or R	COS=corrected o	n-site during inspection	R=repeat	violation		
OUT N/A N/O Safe Food and Water	V	cos		OUT			of Utensils		COS R		
30 Pasteurized eggs used where required 31 Water and ice from approved source	P	-	0			s: properly store		С	00		
32 Variance obtained for specialized processing methods	P/Pf/C Pf	-	3				erly stored, dried, & handled s: properly stored & used		00		
Food Temperature Control	1			46 O Glov			s. property stored & used		00		
Proper cooling methods used; adequate equipment for	DEIO						and Equipment		0		
temperature control	PI/C	0	$\circ$	47 Foo	d and non		ırfaces cleanable,	Ansa			
34 O Plant food properly cooked for hot holding	Pf	0	_	O prop		gned, constructe		G/Pf/O	00		
35 Approved thawing methods used Thermometers provided and accurate		0	_				ed, maintained and used;	Pf/C	00		
Thermometers provided and accurate  Food Identification	Pf/C	0	9			its, sanitizers, ai tact surfaces cle	nd test strips available	32	00		
37 Food properly labeled; original container	Pf/C	0	0	Hay NOIT	-1000 0011	THE PARTY OF THE PARTY OF THE PARTY.	cal Facilities				
Prevention of Food Contamination	11 110		$\stackrel{\smile}{\dashv}$	50 O Hot	and cold		adequate pressure	Pf	00		
38 Insects, rodents, and animals not present	Pf/C	0	0			alled; proper ba			00		
39 Contamination prevented during food preparation, storage & display	P/Pf/C			52 O Sew	rage and v	waste water prop	perly disposed		00		
40 Personal cleanliness		0		53 O Toile			ructed, supplied, & clean		00		
Wiping cloths: properly used and stored  42 Washing fruits and vegetables	DIDE	•	의				posed; facilities maintained		00		
	P/Pf/C		-				aintained, and clean	P/Pf/C	00		
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ilable		O Natu	ural rubbe	r latex gloves no	ing; designated areas use at used per CGS §19a-36f	ed C	00		
Person in Charge (Signature) Xin an In Date 5	7/23	3		Violations of Priority Item	documen	ted	Date corrections due	9	#		
Person in Charge (Printed) Xiulanin 5/	11/2	<u>.</u>		Priority Four Core Item V	ndation Ite iolations	em Violations	6-4-23 8-25-23	1	5 C		
Inspector (Signature) Danie Payne Date 5	- 17-	23		Repeat Risk	Factor/P	alth Intervention ublic Health Inte	Violations ervention Violations	Mr. O	2/1		
Inspector (Printed)				Good Retail			76	6	3		
Appeal The owner or exercise of a food establishment against duty	hin and			Requires R	einspecti	on - check box	if you intend to reinspec	t l	Contract Contract		
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Directo	or of	Hea	ect any inspe	than fort	reight hours of	by the food inspector or	to hold, d	iestroy,		

Foo	d Esta	ablishment lı	nspection Re	eport Page 2	
LHD Manchester	ii.	Inspection Report Contin			1-23
Establishment Manches	er Chi	rese Ciysine	Marcheste		
		TEMPERATURE (			
Item/Location/Process	Temp	Item/Location/Prod		Item/Location/Process	Temp
Chicken	36F	Chicken	168F		
Egrous	37F	Spring roll	145F		
Port	37F	Soup	1085		
Wings	30F	200	1201		
Wordstones	40 F				
3 8					
	OE	SERVATIONS AND C	ORRECTIVE ACTION	S	
Item Violations cited in this	report must b	e corrected within the time fr	ames below, or as stated in s	sections 8-405.11 & 8-406.11 of th	e food code.
Number					
10 PF Papertour	1_				
1014 raperious	disper	ner required			
41c wet goth	notin	sasitner 1	(cos)		
		ed as Scoop			
- 100,70					
17c Non comm	ercial	velogerati	v - Hut. Er	nployee only lat	sel an uni
			chest unclea		0
/	0//	/		by Niijswow	
16 Per Bldupoj de			<u>(COS)</u>		
47c Interior W	11Cd	por damag	L		
19c Interior um	115/00	ilma imal	in Cooles under	PA 0	
1000	my ce	sing week	In Cooks will be	<i>w</i> ·	
	nears	in R/1 freey	e ,		
ATP Trash bags	with	n foodsturac	re (ancer	y bags)	
		(	1 (7)	1 1	
			, 0		
					-
					I
Demon in Change (C)	\/ 1	1210		+11	1/2
Person in Charge (Signature)	Xinlar	ICINC		Date 5	145
nspector (Signature)	use to	uju		Date 5 17	23

Risk Category: 2 Food Establ	sk Category: 2 Food Establishment Inspection Report Page 1 of										
Establishment type: Permanent Temporary Mobile Other					_	Date:	May a	13,23			
Establishment Marchester Regional acad  Address 665 Wetherall St		4eet	od Count	cicut Health	1	ime In_	, J AI	M/PM Time Out	AM/PM		
Address 665 Wetherall St			D	H)	1	LHD Manchester					
Town/City Manchestes	J				F	urpose	of Inspection:	Routing P	re-op		
Permit Holder	icut Dej ublic Hi	partment ealth	F	Reinspe	ction	Other					
FOODBORNE ILLNESS RISK FA	ANI	D PU	BLIC	HEAL	TH INTERVE	NTIONS					
Risk factors are important practices or procedures identified as the most prevalent conti	ributing fa	ctors o	of food	borne ill	lness or	injury. Inte	rventions are control	measures to prevent foodborne ill	ness or injury.		
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	tem	- 11	N=in	complia	ance	OUT=n	ot in compliance	N/A=not applicable	I/O=not observed		
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appr	opria	te box	for CC	S and/or	R COS=correcte	ed on-site during inspection	R=repeat violation		
IN OUT N/A N/O Supervision	V	cos	R	I	N QU	N/A N/C	Protection	on from Contamination	V COS R		
1 Person/Alternate Person in charge present,	Pf		0	15 (	3/0	00	Food separated	and protected	P/C O O		
demonstrates knowledge and performs duties	FI	0		16 @	00	0	Food-contact su	rfaces: cleaned & sanitize	d P/Pf/C O		
2 Certified Food Protection Manager for Classes 2,	C	0	0	17				on of returned, previously	POO		
3, & 4		L						ioned, and unsafe food			
Employee Health		_				1-14		ure Control for Safety			
Management, food employee and conditional employee;	P/Pf	0	0		$\bigcirc$	00	Proper cooking t	ime and temperatures	P/Pf/C O O		
knowledge, responsibilities and reporting	-			-		0 9	Proper reheating	procedures for hot holding			
Proper use of restriction and exclusion	Р	0	$\bigcirc$	20 (	22		Proper cooling ti	me and temperatures	P 0 0		
Written procedures for responding to vomiting and	Pf	0	0	21 (	1		Proper hot holdi		P 0 0		
diarrheal events  Good Hygienic Practices				22 0			Proper cold hold	king and disposition	POO		
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0			2		Time se e public	health control: procedure	P/Pf O O		
7 O No discharge from eyes, nose, and mouth	C	0		24		(A)	and records	nealth control, procedure	P/Pf/C O		
Preventing Contamination by Hands			$\subseteq$	-				mer Advisory			
8  Hands clean and properly washed	P/Pf	0		25 0	510	1		provided: raw/undercooked for	od Pf OO		
No hare hand contact with DTE food as a				20	7	40	***************************************	eptible Population	4 11 00		
9 pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0	0			sed; prohibited foods not offere	d P/C OO		
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0		1	The state of the s		es and Toxic Substance			
Approved Source				27 @	510	0		approved and properly use			
11 O O Food obtained from approved source	P/Pf/C	0	0			305	W	s properly identified,			
12 O O Food received at proper temperature		0		28		0	stored & used	a property recrimines,	PPf/C 🗢 🔾		
13 6 C Food in good condition, safe, and unadulterated		0	-			/		h Approved Procedures			
14 O Required records available: molluscan shellfish	P/Pf/C	0	0	29				variance/specialized	DIDGO O		
identification, parasite destruction	STANDAR STANDARD			1000			process/ROP cri	teria/HACCP Plan	P/Pf/C O		
	OD RE					h. T.	return virus (				
Good Retail Practices are preventative measures to											
	n appro	-		_		or R	The state of the s	n-site during inspection	R=repeat violation		
OUT N/A N/O Safe Food and Water	V	cos		OL				of Utensils	V COS R		
30 O Pasteurized eggs used where required	P		0				sils: properly store		C 0 0		
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C	_	0					erly stored, dried, & handled	Pf/C O O		
Food Temperature Control	Pf	10	0	10 0	201			s: properly stored & used	P/C O O		
Decree and line mother de conducto de contra de la fermante del la fermante de la		_		40	ا الحال	ves used	properly				
temperature control	Pf/C	0	0	-	Ear	od and n		and Equipment urfaces cleanable,			
34 O Plant food properly cooked for hot holding	Pf	0		47			signed, constructe		P/Pf/C O O		
35 O Approved thawing methods used		0			11/12			led, maintained and used:			
36 C Thermometers provided and accurate		0		48				nd test strips available	Pf/C O O		
Food Identification	1. 1/0			49	3 No	n-food co	ontact surfaces cle	ean	(8)		
37 Food properly labeled; original container	Pf/C	0			- 1140	11000 00		cal Facilities	COO		
Prevention of Food Contamination	1	10		50 0	) Hot	and cold		adequate pressure	Pf 00		
38 Insects, rodents, and animals not present	Pf/C	0	0				stalled; proper ba		P/Pf/C O O		
39 Contamination prevented during food preparation, storage & display	P/P/C	0	0				waste water pro		P/Pf/C O O		
40 Personal cleanliness	Pfic	0	0					tructed, supplied, & clean	Pf/C O O		
41  Wiping cloths: properly used and stored	С	0	0					sposed; facilities maintained	000		
42 Washing fruits and vegetables	P/Pf/C	0	0	55 <	⊃ Phy	sical fac	ilities installed, m	aintained, and clean	P/Pf/C O O		
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is av	ailable						ting; designated areas use	ed COO		
Ha /h					⊃ Nat	ural rubb	per latex gloves no	ot used per CGS §19a-36f			
Person in Charge (Signature)	13 L	₹				docume		Date corrections du	e #		
Person in Charge (Signature)	<del>- D</del>		_			n Violation		(COS)			
Person in Charge (Printed)	1					indation /iolations	Item Violations	COS	2		
	1	=	-				s   Health Intervention	(COS')	سابع ا		
Inspector (Signature) Haum Date 5 2	3/23	3						ervention Violations			
$\sim$	-1-		$\neg$				es Violations	The state of the s	2		
Inspector (Printed) Denise Yaune				Requ	uires F	Reinsped	ction - check box	if you intend to reinspec	t l		
Appeal: The owner or operator of a food establishment aggrieved by the	his ord	er to	corre	ect an	y inst	ection v	iolation identified	by the food inspector of	to hold, destroy		
or dispose of unsafe food, may appeal such order to the	Directo	or of	Hea	lth, no	t late	than for	rty-eight hours at	ter issuance of such ord	er.		

	Food	d Esta	blishment I	nspec	tion F	Report	Page <u></u>	of
LHD Manche			Inspection Report Contin				5-23-6	23
Establishment Mor	chestert	egional	Acad Town N	arche	oter			
		0	TEMPERATURE	OBSERVA	TIONS			
Item/Location/Pro	ocess	Temp	Item/Location/Pro		Temp	Item/Location/F	rocess	Temp
Milk/milkCo	okr)	35F	No Hor Holding	201		HS Hot water	1	98F
						Kitchen Si		118F
Margain		39F	Reheated:			A 1. 100 100 1. Ot.	V/C	1,0,
Straudbern		39F	Mozarellatu	rete	196F			
Cheen Slices		400	11/04ce wa	237.5	1100			
J. 1000.		101						
		ОВ	SERVATIONS AND	CORRECTI	VE ACTIO	NS		
Item Violation	s cited in this re	eport must be	corrected within the time f	frames below,	or as stated i	n sections 8-405.11 & 8-	-406.11 of the fo	ood code.
Number						==		
4100	^^ •	1	1 1	1	(500	)}		
Tic und	أالالحف	xer b	lade suppor	<u>`</u>	(Cos	1		
39c Food1	Curron no	ed) St	ned in floor	- intre	2000	(05)		
	co. agri-	, ,	01-100		<u> </u>			
28P Sout	TW/ 50	mul	staff tover	Strong	۵- سر ۱۵	Liusted +	his day	200000
300	0		. 11 ) 5	- 0	7			
		retrain:	staff tover	yy cor	centra	liôn (	005	
			70	0 1				
A. A.								1
							Pate	P▶ Rite. g
							Fecha-	
							PASS WIN	HEN BLUE
			_				ES ACEPTARIE C AZUL CAMBIA A	NS ORANGE DIAMED IA BARRA COLOR MARKA
			1				1600	F/71°C -
		_/h	//					
Porcon in Charac (C'	matural 2	1/h	1/20					
Person in Charge (Sig	nature)	11/1	1/1/			Date		,
nspector (Signature)	DIPA	when I	0			Date	5/23/	122
	J	0				_ 440	7001	
	Distribution	: 1st - White	- Health Department 2nd	d - Yellow - Ow	ner/Operator	/Person in Charge		

				-	Ke-insp	ection
Foo	d Esta	ablishment Ins	pection F	Report P	age_2 of 2	2
LHD Manchester		Inspection Report Continuation	on Sheet	Date	4/27/2:	3
Establishment Landa K	1000	Town May	nchester	RI	5-3-23	DRIM
	0	TEMPERATURE OBS				
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Pr	ocess 7	Гетр
Spicy Lina	38F 37F	Shamp	YOF	3 Bay Sink	Chlor 1	DODOM
Chicaning !	011	CKO	415	Horwater	-@HS >	DSF
Chicken - Wholesal	39 F	Beal	375	Sani buck	et 10	SOPPIN .
Deiven	34	Dumplies	416			_
J		Egg-511)	39F			
	OE	SERVATIONS AND COR	RECTIVE ACTIO	NC SIA	III ON O PARTIE AND THE PARTIE AND	
Item Violations cited in this	report must b	e corrected within the time frames	s below, or as stated i	n sections 8-405.11 & 8-4	06.11 of the food o	ode.
Number * Continue wor	Kas de	scribed during A	JOV 1. 22 Me	etina		111/2/27/68 00
47c Sushi cuttin	a boou	d cut/damag	ed and up	cledo C	01 1 5 2	
		Iclean in Kitche			ctcd 5-3	
- man				Cor	rected 5-3	
		werage over Hon		station. Co	rrected 5-3	3
	is equ	ipment uncle	an _	Cor	rected 5-3	3
15 P Meats in K	eachi	s freezer / Wa	ekin Ju	mbled *Cor	rected with	th
456 Ke-use of	singl	use container			ception of	Soysau
75/100	۸/	nclean		Re-ju	15p 5-8-2	3
a. D 1					1.5	2
3 DE M. a. d	pop .	stored on und			ected 5.	~ 1
38 PF Mice dropp			- Owner-	to call Exteri	ninator	Notscher
12 Moldy mu	1 ( ora	nges) in box is	1 WIC	(COS) Ver	ified. B	s-insp
H9C Grease sp	ill or	How aroun	dAGRU			
	W					
Much Ton	h sicon	- A 1 ·	1	1 0	7.1.	
THERE	rovea	- Continue or	details	discussed	11/1/22	
				15P/38PF	> Re-insp	
					The second second second second	
				45c,47c,4		
				- GUT OF CO	ompliance	<u></u>
				Kert All		
C. 10. T	· .					
Sofe: Translator o	nsite	17.7.				
Person in Charge (Signature)		Wedlinker	· WENHU	UTEN Date	4/27/23	}
nspector (Signature)	ise Par	Me			1/27/22	
- 19000	1	1.		Date	7/01/00	

Risk Category: 3 Food Estab	lishn	nen	t Ir	nspecti	on Re	port	Page 1	of 2	4	
Establishment type: Permanent, Temporary Mobile Other					Date:	123/23		***************************************		
Establishment RANQU'S WIOSTER ST.		4687	O CODING	ecicat Healing	Time In_	3:00 AI	WPM Time Out 4	30 u	$\eta_{AM}$	I/PM
Address 1000 Tolland TPhe		וֹת	D	H	LHD M	nanche	STER	7		
Town/City Manchester					Purpose	of Inspection:	Routine F	re-op		
Permit Holder (5+0)	C	of Pe	ıblic H		Reinspe		Other			
FOODBORNE ILLNESS RISK F. Risk factors are important practices or procedures identified as the most prevalent cont								lance or ini	ın.	D. P.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	tem	18	N=in	compliance	OUT=n	ot in compliance	Section 19 April 19 A	N/O=not o	IES .	ed
P=Priority item Pf=Priority foundation item C=Core item V=violation type  IN OUT N/A N/O Supervision	Mark ir	cos					ed on-site during inspection	R=repe	-	
Person/Alternate Person in charge present				15 Ø	UT N/A N/O	Food separated	on from Contamination	P/		S R
demonstrates knowledge and performs duties	Pf	0	0	(16) O x			rfaces: cleaned & sanitize		c	
Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 0			on of returned, previously ioned, and unsafe food		PC	0
Employee Health					/	Time/Temperate	ure Control for Safety	-		1 X
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	0	0		200	Proper cooking t	ime and temperatures	P/Pf	C	_
4 Proper use of restriction and exclusion	P	0	0			Proper reneating	procedures for hot holding me and temperatures		P C	0
5 Written procedures for responding to vomiting and	Pf	200	0		000	Proper hot holding	ng temperatures		PC	
diarrheal events				(22)0/	00	Proper cold hold	ing temperatures		P)X	
Good Hygienic Practices  6 Proper eating, tasting, drinking, or tobacco products us	e P/C			23 00 0	00	Proper date mari	king and disposition	P/P	f C	0
7 No discharge from eyes, nose, and mouth	C	0		24 0		and records	health control: procedure	P/Pf/	c	0
Preventing Contamination by Hands							mer Advisory			
8 Hands clean and properly washed	P/Pf	0	0	25 🗷 🤇		Consumer advisory	provided: raw/undercooked for	od P	f C	0
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	0	0	20 0 0			eptible Population	1-		
10 Adequate handwashing sinks, properly supplied/accessible	DFIC		0	26 0			sed; prohibited foods not offere es and Toxic Substance			
Approved Source	JFIIC			27 0 0			approved and properly use		PO	
11 Ø O Food obtained from approved source	P/Pf/C	0	0				s properly identified,		_	_
12 Food received at proper temperature		0		28		stored & used		P/Pf/		0
Food in good condition, safe, and unadulterated	P/Pf	0	0		e		h Approved Procedures			
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29 🔾	) <b>&amp;</b>		variance/specialized teria/HACCP Plan	P/Pf/	co	0
	OD RE	TAIL	. PR	RACTICES		process/NOP cir	teria/FACCE Flam		_	_
Good Retail Practices are preventative measures to						icals, and physical	objects into foods.			
		-		for COS and	d/or R	COS=corrected or	n-site during inspection	R=repe	at viol	ation
OUT N/A N/O Safe Food and Water  30 Pasteurized eggs used where required	٧	cos		OUT		Proper Use	of Utensils	V	-	R
31 Pasteurized eggs used where required Water and ice from approved source	P/Pf/C	0 0	9	43 O In	use utens	ils: properly store	erly stored, dried, & handled	C		0
32 Variance obtained for specialized processing methods	Pf	_	0	45 X Si	nale-use/sir	nale-service articles	s: properly stored & used	PI		0
Food Temperature Control					loves used		or proporty diored a about	, c		0
Proper cooling methods used; adequate equipment for	Pf/C	0	0				and Equipment	and the little		
temperature control  Plant food properly cooked for hot holding	200 0000						urfaces cleanable,	PP	0	0
35 O Approved thawing methods used	Pf	0				igned, constructe	d, and used ed, maintained and used;		7	_
36 C Thermometers provided and accurate		0					nd test strips available	Pf/C		0
Food Identification				(49) X N	on-food co	ntact surfaces cle	ean	/c	10	0
37 Food properly labeled; original container	Pf/C	0	0			Physic	cal Facilities			
Prevention of Food Contamination  38 Insects, rodents, and animals not present	7	0		50 O H	ot and cold	water available;	adequate pressure	P	0	0
39 Contamination prevented during food preparation, storage & display	P/Pf/C			51 00 PI	umbing ins	stalled; proper bad waste water prop	ckflow devices	P)Pf/0		
40 Personal cleanliness		0		53 O To	ilet facilitie	es: properly const	ructed, supplied, & clean	P/Pf/0		00
41 Wiping cloths: properly used and stored	С	0	0	54 O G	arbage and	refuse properly dis	posed; facilities maintained	C	_	0
42 Washing fruits and vegetables	P/Pf/C	0	0	(55) CP PI	nysical faci	ilities installed, ma	aintained, and clean	P/Pf/		0
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable		56 O A	dequate ve	entilation and light	ing; designated areas use	ed C	0	0
CRIMING DO	10	1	R		docume		ot used per CGS §19a-36f  Date corrections due		#	
Person in Charge (Signature)	di	50	(		m Violatio		5/27/23		3	
Person in Charge (Printed)	229 8	1		Priority Fo	undation I	tem Violations	6/3/23		1	
Person in Charge (Printed)	210	_	-		Violations	lealth Intervention	8/23/23		3	
Inspector (Signature) Author Lamin Date 5/2	3/2	5					rvention Violations		4_	_
LAUNCH Erandul	1			Good Ret	ail Practice	es Violations			9	
Inspector (Printed) UV VI DIVIOLO				Requires	Reinspec	tion - check box	if you intend to reinspec	t		
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Directo	or of I	corre Heal	ect any ins Ith, not late	pection vi er than for	olation identified ty-eight hours aff	by the food inspector or ter issuance of such ord	to hold, er.	dest	roy,

Food Es	stablishment Ins	pection R	Report	Page	of 2
Homanchester	Inspection Report Continuation			Date 5/23/	23
Establishment Randy's WOOS	ter St. Pizza Man	chester			
	TEMPERATURE OBS	ERVATIONS			
ehicken Wings unlkin 39		Temp		ation/Process	Temp
Ment balls walkin cooler 381				Stones handsin	
Sliced tomatos reline 39.			- way sanifi	izer quat	200ppm
Diced cooked chicken Replie 38	Ė				
Sliced tomato born marie top 374					
Cheese lizza Pression 40f					
Sauce Hot holding 1604					
Marinara cold holding 56f	OBSERVATIONS AND COR	RECTIVE ACTIO	NS		
Item Violations cited in this report mu	ust be corrected within the time frames	s below, or as stated in	n sections 8-405.	11 & 8-406.11 of the	e food code.
Number					
490 Walk in cooler	Shelves unclea	<b>γ</b> Ω ·			
470F Wooden Pizza Pc	ddle Splinterina				
49c Shelves above Pizz					
Ibc Unclean under	counter reach in a	of Bain Macik	e exteri	ior	
	each in cooler by				
	reachin cooler by				
45c Reuse of single	, , ,			an and an analysis of the second	
45C PIZZa boxes S	fored in utility cla	oset under	personal	items.co	)S-
38c Open back door w	oithout Screen Co	5-door class	Sed.		
490 Gaskets unclean r				1.	
550 Unclean Floor behin					
51p Hot water in cust	omer Bathroom 118	3F			
22 p Marinara Sauce at 8	lizza cold prep 56 F.	COS discar	rded		
490 Exterior of figer und	clean.				
55c Walls, Floors, ceiling f	hroughout unclean				
160 unclean deli slicer	section			2	
47c Sandwhich cold prep und	bercounter gaskets a	lanaged.			
		ے 			
				E	
	7				

Person in Charge (Signature)

Inspector (Signature)



479 Main Street, P.O. Box 191, Manchester, CT 06045-0191 Phone Number: **(860)** 647-3173, Fax Number: **(860)** 647-3188

#### 2022 FDA Food Code Checklist

Facility: Randy's WOOSTER ST p12700	
Violations Documentation No Numerical Scoring Grade-3 Violation Levels  PRIORITY - 72 hours for correction PRIORITY FOUNDATION - 10 days for correction CORE - 90 days for correction or determined by inspector Corrections and ReInspections Corrected on site violations Reinspection - case by case	CFPM/PIC on every shift during operating hours 1 Pf Implementing Date Marking (Sec. 3-501.17) 23 P/Pf Signage/Posters required O Handwashing sign at all handwash sinks (section 6-301.14) 10c O 9 Major Allergens 37c O Outdoor Allowance for dogs -preapproval and sign required. 38 Pf  Employee Assessment Form Vomiting/Diarrhea Written clean-up Policy
O Repeat violations  No Bare Hand Contact – Correction Required  9 P/Pf/C	Mop Sink Required (Sec. 5-203.13) CORE -90 day  Temperature: Final Cook Temperatures
Resources:	
2022 FDA Food Code: <a href="https://www.fda.gov/food/fda-food-code">https://www.fda.gov/food/fda-food-code</a> Town of Manchester Health Dept: <a href="https://www.manchesterct">https://www.manchesterct</a> FDA Handbook: <a href="https://www.fda.gov/food/retail-food-induction">https://www.fda.gov/food/retail-food-induction</a>	.gov/Government/Departments/Health-Department
protection-employee-health-and-personal-hygiene-handbo	ook
Environmental Health Inspector:	
Signature of Inspector:	W
Print Name:	Date: 5/23/23
Person In Charge:	
Signature of Person In Charge: State Service  Print Name: State Service  Pr	Title: 0010)  Date: 05/23/23
Email Starway gaal.com	

	1-21 BOOK 1-10						. 7	
Risk Category: 2 Food Establi	shm	ent ir	rspect	on Report		Page 1	of <u>Z</u>	-:
Establishment type: Permanent Temporary Mobile Other				Date: 5/2/2	023			
Establishment ROOSFER'S CHICKEN + WAFHES		Heeping Conne	Sicor Banks	Time In 10	AM/PM	Time Out	11	<u>AM)PM</u>
Address 394 MIDDLE TOKE WEST		OP	H)	LHD MANCK	rester			
TOWN/City Manchester				Purpose of Inspe	ection:	Routine P	re-op	
Permit Holder Ricardo Francois	Cor	of Public H	partment ealth	Reinspection	Othe	r		
FOODBORNE ILLNESS RISK FA	CTO	RS AN	D PUBL	IC HEALTH INT	ERVENTIO	NS		
Risk factors are important practices or procedures identified as the most prevalent contri-	ibuting fac	ctors of food	dborne illness	or injury. Interventions a	re control measure	s to prevent foodborne ill	ness or injury	<i>r</i> .
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered ite			compliance				N/O=not ob	
P=Priority item Pf=Priority foundation item C=Core item V=violation type								
IN OUT N/A N/O Supervision	V	COS R				n Contamination	V	
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	00		Food-cor		otected cleaned & sanitize		00
Certified Food Protection Manager for Classes 2				Proper d		eturned, previously		
2 S C Cettilled 1 ood 1 totection Wariager for Classes 2,	С	00	17	- Indontrion		and unsafe food	P	00
Employee Health						entrol for Safety		
Management, food employee and conditional employee;	P/Pf	00		O Proper c	ooking time an	nd temperatures	P/Pf/C	00
knowledge, responsibilities and reporting			19 0	O Proper re	heating proce	dures for hot holdir		
Written procedures for responding to vemiting and	Р	00	21 0	O Proper o			P	
diarrheal events DYOV (C &d	Pf	00		O Proper c			, P	
Good Hygienic Practices				O Proper d	ate marking ar	nd disposition d ISC		00
6 O Proper eating, tasting, drinking, or tobacco products use	P/C	00				control: procedure		
7 O No discharge from eyes, nose, and mouth	C	00	24	and reco			F/FI/C	
Preventing Contamination by Hands  8	Dine		05 15		Consumer A			1010
No hare hand contact with RTE food or a	P/Pf	00	25 🕏		ly Susceptible	d: raw/undercooked for	od Pf	100
pre-approved alternative procedure properly followed	P/Pf/C	00	26 0			phibited foods not offere	ed P/C	00
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	00				d Toxic Substance		
/ Approved Source			27 0			ed and properly use		00
		00	28		bstances prop	erly identified,	P/Pf/C	00
12  Food in good condition, safe, and unadulterated	_	00	20 0	stored &				
		00				roved Procedures nce/specialized		
14   O   O   Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	00	29 🔾			IACCP Plan	P/Pf/C	00
GOO			RACTICE	S				
Good Retail Practices are preventative measures to					physical objects	into foods.		
			for COS ar			during inspection	And Property and Park	t violation
OUT N/A N/O Safe Food and Water  30 Pasteurized eggs used where required	V P	COS R	OUT	Pro n-use utensils: prope	per Use of Ut	ensils	V C	COS R
	P/Pf/C	00		tensils/equipment/line		red dried & handled		00
32 O Variance obtained for specialized processing methods	Pf	00	(49 XX) S	ingle-use/single-service	e articles: prope	erly stored & used		00
Food Temperature Control			46 0	Sloves used properly			5	00
Proper cooling methods used; adequate equipment for	Pf/C	0			tensils and E			
temperature control				ood and non-food co			P/Pf/C	00
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf	00		roperly designed, co				1
36 Thermometers provided and accurate		000	IAXIC	Varewashing facilitie leaning agents, sani		[ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [	Pf/C	00
Food Identification	1	0,0		lon-food contact surf		ourpo avallable		00
37 C Food properly labeled; original container	Pf/C	00	01/1		Physical Fa	cilities		
Prevention of Food Contamination			50 O F	lot and cold water av	ailable; adequ	ate pressure	Pf	
38 O Insects, rodents, and animals not present		00		Plumbing installed; pr				00
39	-	00		Sewage and waste wa			P/Pf/C	00
41 Wiping cloths: properly used and stored	C	00		oilet facilities: prope arbage and refuse pro			C Pt/C	00
		00		hysical facilities inst				00
Permit Holder shall notify customers that a copy of the most recent inspection repo	100	-	56 O A	dequate ventilation	and lighting; de	esignated areas use	ed C	00
1 100 A	it is ava	mable.		latural rubber latex g				
Person in Charge (Signature) Therefore Date 5-2	~ 2	カンフ		ns documented em Violations	Dat	te corrections du	е	#
		1191		em violations oundation Item Viola	tions 5/	12/23 .		2
Person in Charge (Printed) RICLAROS FRAN	0	ı's		n Violations		HELPPY 8/2/	23	4
Lowaria Himadill Flat	2/12	2	Risk Fac	tor/Public Health Inte	ervention Viola	tions		3
Inspector (Signature) Julian Date 7/2	WL3			Risk Factor/Public He		on Violations		
Inspector (Printed)				tail Practices Violation Reinspection - che		intend to reinence	3	5
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to corr						destroy
or dispose of unsafe food, may appeal such order to the	Directo	or of Hea	alth not la	ter than forty-eight h	nours after ice	uance of such or	ler	accircy,

1st - White: Health Department

Food Establishment Inspection Report

2 2 Page 6 9

-		u ESL	abiisiiiieiil iii	spection R	eport Page	OI SE
LHD_M	inchester		Inspection Report Continua	tion Sheet	Date <u>5/</u> 2	2/2073
Establish	ment_ROUSTER'S 1	Chicker	1 + WaHlestown Mar	nchester		
			TEMPERATURE OF	BSERVATIONS		
	HOV MANUS INK	Temp 100 F	Item/Location/Proces	ss Temp	Item/Location/Proces	ss Temp
1101 000	101110011001111	1001	Chick co	39 F		
4 d00r	Freezer	OF	Tamat n	38F		
			101			
20001	reach in	38F	pepsicoller	40F		
CHICK	en raw	38F	12 fan soda onus			
0.101	0.11,000					
10.00	Violations cited in this		BSERVATIONS AND CO be corrected within the time fram			1 of the food code
Item Number	The state of the s					
notex	notoperating	at tim	le OF Visit			
notex	discussed FD					I
			Freezer not in u	se at this ti	mø.	Ti .
16C.	interior Ad	oorse	ach in not clea	an		
			ot CHan-proffe		r to be schedule	dby
			son in charge	2.01.01	1 10 pc s c. 7500 s	,,,,
160F	ari11 +00 008					
16 C	interior 2 doc					
47 c	non commer	cial ci	ontainers used f	or wickliz +	chicken	I,
	4 discussed f	ood ar	ade containers			
45 C	single use con	ntaine	rs in box stored	on floor +s	ingle service sil	vermare
	stored on Floo	r - cor	rected on site		J v v v v v v v v v v v v v v v v v v v	
						P
hotex	no cooling, co	inklna	observed			
			at time of vis	i+		
	Thermometer					V <sub>a</sub>
	test stripe av					
	1 20 3 3 3 47 020	V				
						l'
			1			io
Person in	Charge (Signature)	B	une		Date 5	/2/2023
	(Signature) LUUI	un &	maur.			211023



479 Main Street, P.O. Box 191, Manchester, CT 06045-0191 Phone Number: **(860)** 647-3173, Fax Number: **(860)** 647-3188

#### 2022 FDA Food Code Checklist

racinty: Known & Chicken + Wartles	
Violations Documentation No Numerical Scoring Grade-3 Violation Levels  ○ PRIORITY - 72 hours for correction ○ PRIORITY FOUNDATION - 10 days for correction ○ CORE - 90 days for correction or determined by inspector  Corrections and ReInspections ○ Corrected on site violations ○ Reinspection - case by case ○ Repeat violations  No Bare Hand Contact - Correction Required 9 P/Pf/C	CFPM/PIC on every shift during operating hours 1 Pf Implementing Date Marking (Sec. 3-501.17) 23 P/Pf Signage/Posters required Handwashing sign at all handwash sinks (section 6-301.14) 10c 9 Major Allergens 37c Outdoor Allowance for dogs -preapproval and sign required. 38 Pf Employee Assessment Form Vomiting/Diarrhea Written clean-up Policy Mop Sink Required (Sec. 5-203.13) CORE -90 day Temperature: Final Cook Temperatures
Resources:	
2022 FDA Food Codes bittes //www.fd- // // // //	
2022 FDA Food Code: https://www.fda.gov/food/fda-food-cod	<u>de/food-code-2022</u>
Town of Manchester Health Dept: https://www.manchesterct	.gov/Government/Departments/Health-Department
FDA Handbook: https://www.fda.gov/food/retail-food-induprotection-employee-health-and-personal-hygiene-handbook	Strviegulatory-assistance training/rotail food
Environmental Health Inspector:	
Signature of Inspector:	į.
Print Name: LAUYEN Franch	Date: 5/2/2013
Person in Charge:	
Signature of Person In Charge:	<del>-</del>
Print Name: Riccardo François	Title: MANAGER
Email (oosterschickenmancheste	Date: <u>5-2-2023</u>
The second section is the second section in the second sec	a Cagmail. com

Risk Category: 7 Food Establ	lishn	nen	t In	specti	tion Report Page 1 of 2				
Establishment type: Permanent Temporary Mobile Other Date: 5/74/73									
Establishment Shadu Gen Time In 9 AMPM Time Out 11:30 AM/PM									
Address 840 MIDDLE TOKE FAST	H)	LHD Manchester							
Town/City Manchester	j				Purpose of Inspection: Routine Pre-op				
Permit Holder Connecticut Department of Public Health Reinspection Other									
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS  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.									
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it									
P=Priority item Pf=Priority foundation item C=Core item V=violation type				compliance					
	V	cos							
Person/Alternate Person in charge present	-	003			OUT N/A N/O Protection from Contamination V COS R  PC PC COS R				
demonstrates knowledge and performs duties	Pf	0	0		Food separated and protected  Food-contact surfaces: cleaned & sanitized FFITC C				
Continue Food Destruction Management Classes 2	-				Proper disposition of returned previously				
2 Certified Food Protection Warrager for Classes 2,	C	0	0	17 0	served, reconditioned, and unsafe food				
Employee Health				/	Time/Temperature Control for Safety				
Management, food employee and conditional employee;	P/Pf			18 0	O Proper cooking time and temperatures P/Pf/C O				
knowledge, responsibilities and reporting		0	$\circ$	19 0	O O Proper reheating procedures for hot holding POO				
4 Ø Proper use of restriction and exclusion	P	0	0	20 0	Proper cooling time and temperatures				
5 Written procedures for responding to vomiting and	Pf	0		21 0/	Proper hot holding temperatures				
diarrheal events				22 0	Proper cold holding temperatures				
Good Hygienic Practices	- 15:0	101		23	Proper date marking and disposition				
6 Proper eating, tasting, drinking, or tobacco products us 7 No discharge from eyes, nose, and mouth		-		24 0	Time as a public health control: procedures P/Pf/C				
/ Preventing Contamination by Hands	С	0	$\subseteq$		and records				
8	D/Df	10		25 0	Consumer Advisory  Consumer advisory provided: raw/undercooked food Pf Consumer advisory provided: raw/undercooked food Pf Consumer Advisory				
No have hand content with DTE food on a			$\subseteq$	25	Consumer advisory provided: raw/undercooked food Pf Consumer advisory				
9 pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0	Pasteurized foods used; prohibited foods not offered P/C O				
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	20 0	Food/Color Additives and Toxic Substances				
Approved Source				27 0 0	Food additives: approved and properly used POO				
11 O Food obtained from approved source	P/Pf/C	10	0		Toxic substances properly identified				
12 O O Food received at proper temperature		Ö		28 💇 🤇	stored & used				
13 Ø C Food in good condition, safe, and unadulterated		0	-		Conformance with Approved Procedures				
14 O Required records available: molluscan shellfish	P/Pf/C	0		29 0	Compliance with variance/specialized				
identification, parasite destruction	Dates and			/tse / 1 == 1	process/ROP criteria/HACCP Plan				
				ACTICES					
Good Retail Practices are preventative measures to	production in the	10.10	7						
			-	or COS and					
OUT N/A N/O Safe Food and Water  30 Pasteurized eggs used where required	٧	cos		OUT	Proper Use of Utensils V Cos R				
	P	0			In-use utensils: properly stored C O				
31   Water and ice from approved source   32   Variance obtained for specialized processing methods	P/Pf/C	00	_		Utensils/equipment/linens: properly stored, dried, & handled Pf(C) Single-use/single-service articles: properly stored & used PfC XX				
Food Temperature Control		191	9						
Drange angling weeklands would add a set as it was a few				40 0	Gloves used properly  Utensils and Equipment				
temperature control	Pf/C	0	0	A. F	Food and non-food contest aufores already)				
34 O Plant food properly cooked for hot holding	Pf	0	0		properly designed, constructed, and used				
25 O O Approved thawing methods used	-	0	_	I W	Warewashing facilities: installed, maintained and used:				
Thermometers provided and accurate		O			cleaning agents, sanitizers, and test strips available				
Food Identification	_				Non-food contact surfaces clean (C)				
37 C Food properly labeled; original container	Pf/C	0	0		Physical Facilities				
Prevention of Food Contamination	_			50 O H	Hot and cold water available; adequate pressure Pf O				
Insects, rodents, and animals not present	(Pf/C	0	0	51 O PI	Plumbing installed; proper backflow devices P/Pf/C O				
Contamination prevented during food preparation, storage & display	PIFIC	10	0		Sewage and waste water properly disposed P/Pf/C O				
40 O Personal cleanliness		10			Toilet facilities: properly constructed, supplied, & clean Pf/C O				
41 Wiping cloths: properly used and stored	C	0		54 O G	Sarbage and refuse properly disposed; facilities maintained C O				
42   Washing fruits and vegetables	P/Pf/C		0	(25) SO PI	Physical facilities installed, maintained, and clean P/PC O Adequate ventilation and lighting; designated areas used				
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable		200 X A	Adequate ventilation and lighting; designated areas used				
1 (1 nM. / - ta	1 1	_			Natural rubber latex gloves not used per CGS §19a-36f ns documented  Date corrections due #				
Person in Charge (Signature) WW Date 5 12	1/2	3			ns documented Date corrections due # tem Violations 5 1 2 7 1 7 3				
	150	175			Soundation Item Violations				
Person in Charge (Printed) Rilty Schaeffel, 5	14	23			m Violations 8/24/23 14				
Parinon Charalle -10	110			Risk Fact	ctor/Public Health Intervention Violations				
Inspector (Signature) Date 5 7	412	3		Repeat R	Risk Factor/Public Health Intervention Violations				
MINON SIMMAL	l	waren.			etail Practices Violations				
Inspector (Printed)		-		Requires	s Reinspection - check box if you intend to reinspect				
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Direct	er to	Corre	th not let	respection violation identified by the food inspector or to hold, destroy,				
or diopoco or directio tood, may appear such order to the	חווים	01 01 1	ical	ui, not idle	ner man forty-eight hours after issuance of such order.				

\*re-inspection 5/30/23

	FUU	u Esta	blishmer	it inspe	ction	Report	Page _	of <u>~</u>
LHD Marchester Inspection Report Continuation Sheet							Date 5/24	123
Establishi	ment Shady Gle	Λ	Town	Marches	ster		,	1
		48 ALSO 1815	TEMPERAT	URE OBSERV	ATIONS			
Item	/Location/Process	Temp	Item/Location		Temp	Item/Lo	cation/Process	Temp
lobster	Salad	38F				Hand SI	k basement	1125
cartelo		38F				THE SHI	7 0000 1011	1100
Sliced	tomato	37F						
walkin	cooler basement	408					Temp▶Rite. §	
walkin	Freezer basement	-18F					Date: Fecha	
Shredded	carrots basement confa	37F					Emp:	
Cheese	Piel line	418					BAR TURNS ORANGE  ES ACEPTABLE CUANDO LA BARRA AZUL CAMBUA A COLOR MARAULA	
	tomato repline	40F					160°F/71°C	
	Violations sited in this	OBS	SERVATIONS A	ND CORRECT	TIVE ACTION	SNC		
Item Number	Violations cited in this	report must be	corrected within the	time frames below	, or as stated	in sections 8-405	5.11 & 8-406.11 of the	food code.
Number								
55C	Tiles on Flo	or in a	dishwash.	asea da	Maged			
55C	Cove base	Missi	na dishw	195h area	٦,			
47 pF	Ice Machin	e cove	J damage	ed				
47c	MICTONAVE L						b	
A7C	Microwave und	clean	exterior					
45C	(euse si	igle us	e confail	185 a5	Scoop:	5		
45c/44C	Utensil5 sta	ored on	floor j	n afficl	to go conta	iners, Plate	25, CUPS)	
38 pF	Mouse dropping	nas on	food and	Shelving	in base	ement <	totaco	
38 pF	Cereal boxes Bus Zapper	chewed	open by	pest with	mouse a	Lopping 5	inside confo	aines
38 pF	Bug Zapper	in base	ment not	holding o	lead fl	lies (dead	flies observed i	on table alow zappa
16 pr	VII clean de i	Sicers	s in bas	ement				
45 C	Single Service	5poon	5 not prote	cted or inv	verted a	tice cre	am station	-005
<b>1900</b>	Raw chicken s	stored ab	ove soup i	n walk in	cooler	in basem	ent.	
47C	Rusted Shelvi	ng in w	valk in fr	cetes in	basem	ent.		
56C	Unclean lights	over co	ookline.					
440	Fryer exterior	unclea	nalong Coo.	kline.		1		
41C	Milk crates u	<u>5ed as</u>	Shelving in	walk in	coole	5 in bas	ement.	
2010	Walkin coolers	Shelve:	5, thoru	nclean.				
2775	Ice cream sto	red on	floor in we	NK in tro	ezec.	. 7. 1.		
2000	well water re	-port to	be emailed	d Lgrand	y @ Mano	hesterct.c	gov	
2/100	Ice build up	in walk	sin ice cre	an freeze	er.			
	No thermometer			in baseme	nt.			
	Charge (Signature)	rom Jeh	JULY DEMONSTA				Date 5/24	123
nspector (	Signature)	WIX	PUNIUS				Date 5/24/7	72



479 Main Street, P.O. Box 191, Manchester, CT 06045-0191 Phone Number: **(860)** 647-3173, Fax Number: **(860)** 647-3188

#### 2022 FDA Food Code Checklist

Facility: SMAAU GLEN	
Violations Documentation No Numerical Scoring Grade-3 Violation Levels  ○ PRIORITY - 72 hours for correction ○ PRIORITY FOUNDATION - 10 days for correction ○ CORE - 90 days for correction or determined by inspector  ✓ Corrections and ReInspections ○ Corrected on site violations ○ Reinspection - case by case ○ Repeat violations  No Bare Hand Contact - Correction Required 9 P/Pf/C	CFPM/PIC on every shift during operating hours 1 Pf Implementing Date Marking (Sec. 3-501.17) 23 P/Pf Signage/Posters required  Handwashing sign at all handwash sinks (section 6-301.14) 10c  9 Major Allergens 37c  Outdoor Allowance for dogs -preapproval and sign required. 38 Pf  Employee Assessment Form  Vomiting/Diarrhea Written clean-up Policy  Mop Sink Required (Sec. 5-203.13) CORE -90 day  Temperature: Final Cook Temperatures
Resources:	
2022 FDA Food Code: <a href="https://www.fda.gov/food/fda-food-code">https://www.fda.gov/food/fda-food-code</a> Town of Manchester Health Dept: <a href="https://www.manchesterct">https://www.manchesterct</a>	
FDA Handbook: https://www.fda.gov/food/retail-food-indusprotection-employee-health-and-personal-hygiene-handbook	strvregulatory-assistance-training/retail-food-
Environmental Health Inspector:	
Signature of Inspector:	
Print Name: AUTEN GRANDE	Date: 5/14/1013
Person In Charge:	47-11-06-7
Signature of Person In Charge:	Title: MAN SGI
Print Name: Brent ZAKouski	Date: 5 - 24 - 2023
Email brentzakousks 801 60 smart. Co	o ny

Risk Category: 3 Food Estab	lishm	nen	t In	specti	on Re	port		Page	1 of <u>3</u>	_
Establishment type: Permanent Temporary Mobile Other Date: 5/2/1/1/3										
Establishment SNEQ'S p127Q + Sport Bar		apin	o Connec	ctican Healt	Time In	1:30	AM/PM)	Time Out	3:15	AM/PM
102 - 11000 of FIRE			LHD	mana		er				
0.00.100.10.0.540.0						e of Inspecti	1109	outine	Pre-op	
	Co			partment	Reinspe	50	Other			
Permit Holder JACK MAINLY FOODBORNE ILLNESS RISK F.	ACTO	0.10	ANI	Lorus	(7)			S		
Risk factors are important practices or procedures identified as the most prevalent con-									e illness or ii	njury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered i	item	11	N=in	compliance	OUT=	not in complian	ce N/A=n	ot applicable	N/O=no	t observed
P=Priority item · Pf=Priority foundation item C=Core item V=violation type	Mark in	appr	opria	te box for C	OS and/or	R COS=cor	rrected on-site	during inspection	n R=re	peat violation
IN OUT N/A N/O Supervision	v	cos	R		JT N/A N/			Contamination		V COS R
1 Person/Alternate Person in charge present,	Pf			15 6	000	Food separa	ated and prote	ected	1	P/C 0 0
demonstrates knowledge and performs duties	FI	0		$16) \bigcirc \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	20	Food-contac	ct surfaces: cl	eaned & saniti	zed P/I	900
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17				rned, previousl d unsafe food	y	P 00
Employee Health						/Time/Temp	erature Cont	rol for Safety		
Management, food employee and conditional employee;	P/Pf	0	0			Proper cook	ing time and	temperatures		Pf/C O O
knowledge, responsibilities and reporting				19 0		Proper rehe	ating procedu	ires for hot hold	ding	POO
Proper use of restriction and exclusion	P	0	0	-	200	Proper cooli	ng time and to	emperatures		POO
5 Written procedures for responding to vomiting and	Pf	0	0	21		Proper hot h				P 0 0
diarrheal events  Good Hygienic Practices		_	Н	22 0 0		Proper cold Proper date				P 0 0
6 Proper eating, tasting, drinking, or tobacco products us	se P/C	0	0					ontrol: procedu	ires	
7 O No discharge from eyes, nose, and mouth	C	0		24 00 0		and records		ontroi. procede	P/F	Pf/C 0 0
Preventing Contamination by Hands				/		Co	nsumer Adv	isory	NI DE	
8  Hands clean and properly washed	P/Pf	0	0	25 0		and the same of th		raw/undercooked	food	Pf OO
9 No bare hand contact with RTE food or a	P/Pf/C	0	0		/		Susceptible F			
pre-approved alternative procedure properly followed			41-12	26 0	1			oited foods not offe		P/C   O   O
Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	07/0				oxic Substan		
Approved Source  Food obtained from approved source	P/Pf/C			27 0	0			l and properly u	usea	POO
12 Food received at proper temperature		0		28		stored & use	ances properly	y identified,	P/F	Pf/C O O
13 9 Food in good condition, safe, and unadulterated	-	0	-					ved Procedure	95	
14 O Required records available: molluscan shellfish	P/Pf/C	0	0	29 0			with variance			Pf/C O O
identification, parasite destruction					100	process/RO	P criteria/HAC	CCP Plan	PI	-1/0
				ACTICES						
Good Retail Practices are preventative measures  Mark OUT if numbered item is not in compliance V=violation type Mark						the second contract of	ACTION AND ADDRESS OF THE PARTY	With a strategy and the		
Mark OUT if numbered item is not in compliance V=violation type Mark OUT N/A N/O Safe Food and Water	v v	cos	-	for COS and	I/OF R		ted on-site duri	The second secon	K=re	v cos R
30 Pasteurized eggs used where required	P	0	-		use uten	sils: properly	ALC: U.S. C. LENGTH ST. C.	3113		C 00
31 Water and ice from approved source	P/Pf/C	-	0					l, dried, & handle	ed F	(C) 0
32 O Variance obtained for specialized processing methods	Pf	0	0	45 <b>☆</b> Si	ngle-use/s	ingle-service a	rticles: properly	y stored & used		000
Food Temperature Control				46 O GI	oves use	d properly				00
Proper cooling methods used; adequate equipment for	Pf/C	0	0	0		-	sils and Equ			
temperature control  34 O Plant food properly cooked for hot holding	Pf	0				on-food conta signed, const			P/P	100
35 O Approved thawing methods used		0	_	W				sed tained and use	ed.	
36 C Thermometers provided and accurate		0						trips available	, P	f/C 00
Food Identification						ontact surface			(	00
37 C Food properly labeled; original container	Pf/C	0	0	0			hysical Facili	ities	- 1	
Prevention of Food Contamination	^	24				ld water availa	ble; adequate	e pressure		Pf OO
38 (S) Insects, rodents, and animals not present	(Pfic	0	0	② ∞ PI	umbing ir	nstalled; prope	er backflow de	evices		
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness	P/Pf/C					d waste water				
41  Wiping cloths: properly used and stored	C Pt/C	00	_					supplied, & clea cilities maintaine		C 0 0
42 Washing fruits and vegetables	P/Pf/C	_				cilities installe				000
Permit Holder shall notify customers that a copy of the most recent inspection rep				56 O Ac	dequate v	entilation and	lighting; design	gnated areas u	ised	000
				Violations				er CGS §19a-3 corrections of		#
Person in Charge (Signature) (2013) The Date S/d	1900	3	_	Priority Ite		ons Item Violation		<u> </u>		3
Person in Charge (Printed) Cody / Fuhunday and	,		_	Core Item	Violation	s	812	212023		18
Inspector (Signature) ZWW AMM Date 5/2	2/20	23		Repeat Ri	sk Factor	Health Interver/Public Health	Intervention			
Inspector (Printed) 1 1 1 1 PM A MANUM	ι					ces Violations		tand to		20
Appeal: The owner or operator of a food establishment aggrieved by t	hio and	nr +0	00	requires	Reinspe	ction - check	DOX If you in	tend to reinsp	ect	ما ما ما
or dispose of unsafe food, may appeal such order to the	Direct	or of	Heal	th not late	pection v	riveight hou	rs after issue	ood inspector	or to not	a, aestroy,

1st - White: Health Department

Food Establishment Inspection Report Page 2 of 3

LHD_MAMCHUSTEY		Inspection Report Continuation Si	heet	Date_6	Date <u>5/2/23</u>				
Establishment Shlas	pizzeria.	TOWN MANCH	uster						
Item/Location/Process	7	TEMPERATURE OBSER							
PROPERONA	Temp	Item/Location/Process	7emp ∂∓	reach in Fred					
Chile		marinara hot		1 505017 177 7 7 5 5 1					
MILL CLOSS	quat bucket	- 200 ppm							
tomato									
Chille		chicken wing	40 F						
11		VICE JOSEPH	407						
	OE	TURKEY ( de l'i MEAT)	CTIVE ACTI	ONS					
illoin		e corrected within the time frames be			3.11 of the food code.				
Number									
notex hood not	<u> Ciean – com</u>	ning out sunday ni	gnt						
49C exterior o	t oven not	-Ciran	J						
1	above pr	zza cold prep not	Clean						
55c Wallbehty	ndiu m	achine not clean							
47c seal/cavi	k benind	3 bay sink							
·55c grout floo	r tile by	dish machine							
5/pf reaking p	ripe beni	nd grease trap							
55'c Chippina	paint ben	ind prepsink we	211						
		a not clean							
notex can opene	rrusted -	new can opener	tamina						
47c wood use	d as shelv	ing Indry storage	For Food	d loss duch					
49c aasket of	walk in (	joter not clean	<del>&gt; 1 U1 1 U (</del>	A PROCEEDED					
49c sped raci									
38 DF COCKYOACH	observed	in reach in Freeze	V bu dr	UStarame.					
11c Beer Keg v	ualk in cool	er Floor damaged	r ky cu	gororacp					
		lev Fancover not	CIPAN						
	- walls no		Cicoli						
550 basement									
		de-cluttering ba	cemant	-					
100 550 hold in w			YCHICILI						
		enser by cottee	CHUTION						
47/49c internicles	itchin Val	sulving by coff	1 CHALLA	N NAI AL.					
	1) 1-4	Overview by COVIC	C)10[10	- Q-C/	E/2/13.22				
Person in Charge (Signatur	77	hand IN		Date	5/2/2023				
Inspector (Signature)		andy		Date	5/2/2023				

Food Establishment Inspection Report Page 3 of 3

LHD MANCH ESTEV		Inspection Report Continuation She	Date_5/2/2023			
Establishment Shea's proza + 800		1ts Bar Town Manche				
			TEMPERATURE OBSERV			
Item	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
					2	
				-		
		OB	SERVATIONS AND CORREC	TIVE ACTION	NS .	
Item Number	Violations cited in this	report must be	e corrected within the time frames belo	w, or as stated in	sections 8-405.11 & 8-406.11 of the	e food code.
45 C.	notion stire	err nt	bararea not pro	+pn+pd		
44C	dish racks s	tared o	n floor - correct	ed on cit	٠,	
notext	thermomen	ex calib	prated w/ person	in Chai	Me: 32-37	
notex	nuevall areat	Impr	evenient from pr	Ministr	knection, unti	niu
(Dece	+ work on /	renera	1 cleanliness thr	MIMMAILT	-	1100
notex	great active			oogrio o		
52 p F			isposed in outdoor	baran	e A	
notex			ng observed at the			
			J			
			=			
		01/				
Person in	Charge (Signature)	w lun			Date 5/2/2	3
Inspector	(Signature) A WW	NI STO	nay		Date 5/2/7	73



479 Main Street, P.O. Box 191, Manchester, CT 06045-0191 Phone Number: **(860)** 647-3173, Fax Number: **(860)** 647-3188

### 2022 FDA Food Code Checklist

Facility: Shea's pizzeria + sports Bar	
Violations Documentation No Numerical Scoring Grade-3 Violation Levels  o PRIORITY – 72 hours for correction	CFPM/PIC on every shift during operating hours 1 Pf Implementing Date Marking (Sec. 3-501.17) 23 P/Pf Signage/Posters required
<ul> <li>PRIORITY FOUNDATION – 10 days for correction</li> <li>CORE – 90 days for correction or</li> </ul>	<ul> <li>Handwashing sign at all handwash sinks (section 6-301.14) 10c</li> <li>9 Major Allergens 37c</li> <li>Outdoor Allowance for dogs -preapproval</li> </ul>
determined by inspector  Corrections and ReInspections  Corrected on site violations  Reinspection – case by case	and sign required. 38 Pf Prot doing Employee Assessment Form Vomiting/Diarrhea Written clean-up Policy
Repeat violations  No Bare Hand Contact – Correction Required  9 P/Pf/C	Mop Sink Required (Sec. 5-203.13) CORE -90 day  Temperature: Final Cook Temperatures
Resources:  2022 FDA Food Code: <a href="https://www.fda.gov/food/fda-food-cod">https://www.fda.gov/food/fda-food-cod</a> Town of Manchester Health Dept: <a href="https://www.manchesterct">https://www.manchesterct</a>	
FDA Handbook: https://www.fda.gov/food/retail-food-indusprotection-employee-health-and-personal-hygiene-handbook	strvregulatory-assistance-training/retail-food-
Environmental Health Inspector: Signature of Inspector:	'W
Print Name: [AUTEN GRANGU Person In Charge:	Date: 5/2/2073
Signature of Person In Charge:	Title: GM
Email Sheas Americana@agmail.com	Date: <u>5/2/2023</u>

Risk Category: 3 Food Establishment Inspection Report Page 1 of									
Establishment type: Permanent Temporary Mobile Other					Date:	5-4-8	13		
Establishment Texas Roadhouse		NEW THE	d Cohme	chica Meanly	Time In	Ipm A	M/PM Time Out_	230	AM/RM
Address 21 Road house Redstone Rd			P	H)	LHD /	Jasche	ster		
Town/City Manchester	<u></u>				Purpose	of Inspection:	Routine	Pre-op	•
Permit Holder Earnie Richards	Co	ormection of Pu	cut Depublic H	partment colth	Reinspe	ection	Other FDA		
FOODBORNE ILLNESS RISK FA	ACTO	RS.	ANI	D PUBL	IC HEAL	TH INTERVE	ENTIONS	1	RULES EVI
Risk factors are important practices or procedures identified as the most prevalent cont	ributing fa	actors o	of food	lborne illness	or injury. Inte	erventions are contro	I measures to prevent foodborn	e illness or	injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	tem	11	N=in	compliance	e OUT=r	not in compliance	N/A=not applicable	N/O=n	ot observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appr	opria	te box for	COS and/or	R COS=correc	ted on-site during inspection	on R=r	epeat violation
IN OUT N/A N/O Supervision	V	cos	R	IN C	OUT N/A N/C	Protecti	on from Contamination	1	V COS R
Person/Alternate Person in charge present,	-			15		Food separated	and protected		P/C 0 0
demonstrates knowledge and performs duties	Pf	0		160			urfaces: cleaned & sanit	ized P	Pf/COO
Certified Food Protection Manager for Classes 2				12 0			ion of returned, previous		
2 <b>V</b> O 3, & 4	С	0	0	17		The second secon	tioned, and unsafe food	-	POO
Employee Health						Jime/Tempera	ture Control for Safety		
Management, food employee and conditional employee;	P/Pf	0		18 🔾			time and temperatures		P/Pf/C O O
knowledge, responsibilities and reporting	CALI			19 😿			g procedures for hot hol	ding	POO
4 Proper use of restriction and exclusion	Р	0	0	20 0			time and temperatures		POO
Written procedures for responding to vomiting and	Pf	0					ing temperatures		POO
diarrheal events				22 0			ding temperatures		POO
Good Hygienic Practices				23 🐼			rking and disposition		P/Pf O O
6 Proper eating, tasting, drinking, or tobacco products us			_	24 0	000		c health control: procedo	ures P	/Pf/C O
7 No discharge from eyes, nose, and mouth  Preventing Contamination by Hands	С	0	$\circ$			and records		1	
8  Hands clean and properly washed	Dipo			05			umer Advisory	I BY THE	
No bare hand contact with RTE food or a	P/Pī	0	9	25 0	0 0		y provided: raw/undercooked	food	Pf O O
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0			ceptible Population used; prohibited foods not off		0/0
10 S Adequate handwashing sinks, properly supplied/accessible	Pf		0	20 0			ves and Toxic Substan		P/C O O
Approved Source				27 6	00		approved and properly		TRICIO
11 O Cood obtained from approved source	P/Pf/C	0					es properly identified,		P 0 0
12 O Food received at proper temperature	P/Pf			28 0	00	stored & used	es property identified,	P	P/Pf/C O
13 O Food in good condition, safe, and unadulterated	P/Pf	-	_		1		ith Approved Procedur	06	
Doguired records available mally seen shallfish							h variance/specialized		
14 O o identification, parasite destruction	P/Pf/C	0		29	0 0		riteria/HACCP Plan	P	P/Pf/C O O
	OD RE	TAIL	PR	ACTICE	S			1	
Good Retail Practices are preventative measures to	o contro	l the a	additi	on of patho	ogens, chen	nicals, and physica	l objects into foods.		
				for COS ar			on-site during inspection	R=r	epeat violation
OUT N/A N/O Safe Food and Water	V	cos	R	OUT			e of Utensils		V COS R
30 Pasteurized eggs used where required	Р	0	0	43 O II	n-use uten:	sils: properly stor	ed		c 00
31 O Water and ice from approved source	P/Pf/C	0	0	44 00 L	Jtensils/equi	pment/linens: prop	perly stored, dried, & handl	ed	P(0)00
32 O Variance obtained for specialized processing methods	Pf	0	0	45 🔾 S	Single-use/si	ingle-service article	es: properly stored & used		P/C 0 0
Food Temperature Control				46 0	Gloves use				c 0
Proper cooling methods used; adequate equipment for	Pf/C	0					and Equipment	PUR	
periperature control		1000					surfaces cleanable,	D	/PCO 0
34 O Plant food properly cooked for hot holding	Pf			p		signed, construct			. 6
35 O Approved thawing methods used		0					lled, maintained and use	ed;	Pf/C O O
36 Thermometers provided and accurate	Pf/C	0	0	2			and test strips available		
Food Identification				49 🐼 N	Non-food co	ontact surfaces c	1000 2000		(0)00
37 Food properly labeled; original container	Pf/C	0	0				ical Facilities		
Prevention of Food Contamination							; adequate pressure		Pf O O
38 Insects, rodents, and animals not present		0				stalled; proper ba			(P(C)O O
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness	P/Pf/C					d waste water pro			/Pf/C O O
41 Wiping cloths: properly used and stored		00					structed, supplied, & cleaning structed, supplied, & cleaning structured in the structure of the structure o		Pf/C O O
42 Wishing fruits and vegetables	P/Pf/C	1	$\leq$				sposed; facilities maintain naintained, and clean		c 00
							nting; designated areas	USOC P/	
Permit Holder shall notify customers that a eapy of the most recent inspection repo	ort is ava	ailable			Natural ruhl	per latex aloves r	not used per CGS §19a-	36f	
	11	<u> </u>		Violation	ns docume	ented	Date corrections		#
Person in Charge (Signature) Date	41	23	,		tem Violatio		2210 0011 00110113		Ö
	1/					Item Violations	5-10-23		25
Person in Charge (Printed) Frail (h97)	(2			Core Iter	n Violation	S	5-19-23		F
Instruction (Simulation)		2		Risk Fac	tor/Public I	lealth Intervention	on Violations		33
Inspector (Signature) 1 Jenus Payhe Date 5-1	4-2-	ح					tervention Violations	1	
Inchestor (Brinted) Den ice Paris a						es Violations			8/
Inspector (Printed) Denise Payne				Requires	s Keinsper	ction - check bo	x if you intend to reinsp	ect	V
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to	COTT	ect any in	spection v	iolation identifie	d by the food inspector	or to ho	old, destroy,
or dispose of unsafe food, may appeal such order to the	Directo	OF OT	пеа	ith, not la	ter than fo	rty-eight hours a	inter issuance of such of	order.	

1st - White: Health Department

Food Establishment Ins	pection F	Report Pag	ge of
LHD Manchester Inspection Report Continuation			5-4-23
Establishment lexas Kaahouse Town Ma	nchesta		
TEMPERATURE OBS	SERVATIONS		
Item/Location/Process Temp Item/Location/Process	Temp	Item/Location/Prod	cess Temp
SOUT cream, service line 36F law chicken cost li	ine 37F	Hotwater K	itches 112F
butter, service line 37f raw Salmon coak	ine 35f	Restro	om list
ribelle, arill 38f lark ribs cook 1	line 40f	LacticAcid	
best kelpab, grill 37f Whole charry tomoro count /	ine 39f		
hamburger, grill 32 f Green bons cooling	1201		
Chicken branstian, grill 38f My Strip in walking	36F		
tomato sliced cook line 39 F Milk	39F		
UBSERVATIONS AND COR	RECTIVE ACTIO	NS	
Item Violations cited in this report must be corrected within the time frames	s below, or as stated i	n sections 8-405.11 & 8-406	3.11 of the food code.
Number			
10 PF No paper towels available at han	1 sin Ls(	Co S Polinger	
Anc unclean Shelving above PDS 545	Las Quaite	CO Spelivally to	रवास्त्र वयगानुगानुह
APICKS COLOR IN II TO I TO SYSTEM	Jeri e waitr	esstation	
MACSS unclean Wall behind POS Syste	M II	/	
17c Caulk damaged and Missing at c	ounter/wal	Lunduce, gene	ray
vote floor file on order for repair; was	Kin tileson	order	,
51c Drain under hand sink full agrilling	n.e.		
55c Ceiling tiles above cook line unclean, lic	Not con use	-1	
44c Culting board stored on floor	ntcovesu	nclean	
16 PF Can opener unclean (blade+holder	`	0	
49c unclear gaskets on walk in coolers	)		
The state of the s			
155c cracked sliding door on ice machine			
Dry strage bins, exterior unclea	table.		
Dry strage bins, exterior unclea	5 A9C		
7.0			
FDA Review-generally all new regulational Allergy Sign at	lations are	setin place	
Discussed additional Allergy Sign at	"To-90" se	Vice Counter	
Person in Charge (Signature)		Date	
nspector (Signature)		Date	5/4/93
		Date	J 1163

sk Category: 3 Food Establishment Inspection Report Page 1 of								
Establishment type: Permanent Temporary Mobile Other Date: 5-3-23								
Establishment The Gathering	sino	Connect	icus Moss	Date:		M/PM Time Out	AM/PM	
Address 471 Hartford Rd					-	Manch		AWIFW
Town/City Manchester						of Inspection:		Pre-op
1 1 7 1	0		ut Depa	artment	Reinspe		Other FDA INT	DURING NAMES
FOODBORNE ILLNESS RISK F	ACTO							
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.								illness or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered in				ompliance		ot in compliance	N/A=not applicable	N/O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type			priate	e box for C	OS and/or	R COS=correc	ted on-site during inspection	R=repeat violation
IN OUT N/A N/O Supervision	V	cos	R		JT N/A N/C		on from Contamination	V COS R
1 Person/Alternate Person in charge present,	Pf	0				Food separated		PC O
Gemonstrates knowledge and performs duties			$\exists$	16 0 0	80		urfaces: cleaned & sanitiz	
2 3, & 4	С	0		17 1			on of returned, previously tioned, and unsafe food	POO
Employee Health							ture Control for Safety	
3 Management, food employee and conditional employee;	P/Pf	0		18 0	000	Proper cooking	time and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting				19 @	000	Proper reheatin	g procedures for hot hold	ing POO
Proper use of restriction and exclusion	P	0		20 0	200	Proper cooling	time and temperatures	POO
Written procedures for responding to vomiting and diarrheal events	Pf	0	)   -	21 6 0	200	Proper hot hold	ing temperatures	POO
Good Hygienic Practices					300	Proper date ma	ding temperatures rking and disposition	P/Pf O O
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0	$\neg$	Control on		7	c health control: procedur	29
7 O No discharge from eyes, nose, and mouth	С			24 0	ت اصار	and records	a masian admiran procedu.	P/Pf/C O
Preventing Contamination by Hands						Const	umer Advisory	
8 C O Hands clean and properly washed	P/Pf	0	의	25 0		Consumer advisor	y provided: raw/undercooked fo	ood Pf O O
No bare hand contact with RTE food or a	P/Pf/C	0		00/0		Highly Sus	ceptible Population	
pre-approved alternative procedure properly followed  Adequate handwashing sinks, properly supplied/accessible	Dir	0		26 🗭 🤇			used; prohibited foods not offer	
Approved Source	PI/C			27 0 0			ves and Toxic Substanc approved and properly us	
11 Food obtained from approved source	P/Pf/C	0		1			es properly identified,	
12 O O Food received at proper temperature		0		28		stored & used	es property identified,	P/Pf/C O
13 O Food in good condition, safe, and unadulterated	P/Pf	0	o l	الألاثع	۶		th Approved Procedures	3
14 O O Required records available: molluscan shellfish	P/Pf/C	0		29 0 0			h variance/specialized	P/Pf/C O O
identification, parasite destruction	District Character			ACTICES		process/ROP ci	riteria/HACCP Plan	1111000
Good Retail Practices are preventative measures to					ens chem	icale and physica	I objects into foods	
				or COS and			on-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	V		R	OUT			e of Utensils	V COS R
30 Pasteurized eggs used where required	Р	0	0		use utens	sils: properly stor		000
31  Water and ice from approved source	P/Pf/C	0	$\supseteq \lfloor$	44 Ø Ute	ensils/equi	pment/linens: prop	erly stored, dried, & handled	PAOO
32 O Variance obtained for specialized processing methods	Pf	0					es: properly stored & used	F(C)O O
Food Temperature Control Proper cooling methods used; adequate equipment for	-			46 O G	oves used			000
temperature control	Pf/C	0	$\supset \mid \cdot \mid$	E	od and no		and Equipment urfaces cleanable,	
34 O O Plant food properly cooked for hot holding	Pf	0	511			signed, construct		P/Pf(C)(C)(C)
35 O Approved thawing methods used		0		1//			lled, maintained and used	
36 Thermometers provided and accurate		0	5	216	aning age	ents, sanitizers, a	and test strips available	P1/C 0 0
Food Identification				49 OF No	n-food co	ontact surfaces cl	ean	000
37   Food properly labeled; original container	Pf/C	0					ical Facilities	
Prevention of Food Contamination 38 Insects, rodents, and animals not present	Def			50 O Ho	t and cold	d water available	adequate pressure	Pf 00
39 Contamination prevented during food preparation, storage & display	P/Pf/C			52 O So	mbing in	stalled; proper ba d waste water pro	acktiow devices	P/Pf/C O O
40  O Personal cleanliness	Pf/C	0		53 O To	ilet facilitie	es: properly cons	structed, supplied, & clear	P/Pf/C O O
41  Wiping cloths: properly used and stored	C	0		54 O Ga	rbage and	refuse properly di	sposed; facilities maintained	
42 Washing fruits and vegetables	P/Pf/C	0	<b>5</b>	55 O Ph	ysical fac	ilities installed, m	naintained, and clean	P/Pf/C O O
Permit Holder shall notify customers that a copy of the most recent inspection repo		-		56 Ø Ad	equate ve	entilation and ligh	iting; designated areas us ot used per CGS §19a-36	sed (c)00
Demonis Champion of Martin 3	a-2	2(4	ヒル	Violations	docume	nted	Date corrections du	
	0 0	// (	1	Priority Ite	n Violatio	ns	may 10	
Person in Charge (Printed) AL Felic ZIM ei						Item Violations	1000	0
	_			Core Item		lealth Interventio	n Violations	3
Inspector (Signature) Densetayn Date 5-	3-2	3	F	Repeat Ris	k Factor/	Public Health Int	ervention Violations	3
				Good Reta	il Practice	es Violations		10/
Inspector (Printed) Denise Payne		2000		Requires	Reinspec	tion - check box	if you intend to reinspe	ct
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Directo	er to cor of H	orrected	ct any insp h, not late	r than for	iolation identified ty-eight hours a	d by the food inspector of fter issuance of such or	or to hold, destroy, der.

1 00	U LSIC	misimient map	ection ve	PUIL rage 2	
LHD Manchester		Inspection Report Continuation S	Date_ <i>5</i> -	C 2 2)	
Establishment The Gat	henna	Town Man	chester	_	
	)	TEMPERATURE OBSER	RVATIONS		
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Tomp
Hotwate	101			item/Location/Frocess	Temp
	IBIP	Egg-hadis	138F		
Sanityes bucket	100ppm	,,			
Diced Tomats	381-	Dishmachin	(coppm		
Han	38=	Chippen	100 pri		
1194)	201-	William			
00.		1			
Milk Buttr	38F	1/2 1/2	415		
Butter	38F				
	OB	SERVATIONS AND CORRE	CTIVE ACTIONS		
Item Violations cited in this Number	report must be	e corrected within the time frames be	elow, or as stated in se	ections 8-405.11 & 8-406.11 of	the food code.
15c Coffee fitter	s not Di	otected /with co	Hee) (Co	25)	
47c Non Comme	scial e	quipment Notab	proved Hoast	ers - Microwaves	
79C tots Extenor	cuncle	ian			
44c Pots not inve	rtd.				
49c Gasketson	Cold	prep heavily s	oiled		
49c COOKline w	oalls.	unclean			
16C Slicer unc		-\ (C			
G*** 127 17		Storedon-Hoor		1	
44c Plates, bo	wls, i	containers not			
38c Improper fil	onto	ol - swatter (C	os)		
56C Lighting SI 51& Horwaterin	nellas D. L.	Without caps			
P P Water	KOSTVO	um @ 150			
		la la			
Person in Charge (Signature)	10/6	3		Date	
nspector (Signature)	me to	Segue		Date 5-3	-23
		U			

0	-36 38					78_81		
Risk Category: 3 Food Establishment Inspection Report Page 1 of								
Establishment type: Permanent Temporary Mobile Other					_ [	Date:	5-16-23	
Establishment Wendys			Healing Connecticus Healing			Time In_	AM/PM Time Out	AM/PM
Address Broad St			DPH)			HD M	Manchester	
Town/City Manchester				F	Purpose	of Inspection: Routine I	Pre-op	
Permit Holder	Co	of Pub	t Depar	rtment th	F	Reinspe	ction Other DA	
FOODBORNE ILLNESS RISK FA	ACTO	RS A	ND	PUI	BLIC	HEAL	TH INTERVENTIONS	
Risk factors are important practices or procedures identified as the most prevalent cont		379.5	25	1.0				
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it  P=Priority item Pf=Priority foundation item C=Core item V=violation type			=in co	-	_			N/O=not observed
IN OUT N/A N/O Supervision	V	cos	_			T N/A N/O		R=repeat violation
Person/Alternate Person in charge present		, market	750				Food separated and protected	P/C 0 0
demonstrates knowledge and performs duties	Pf	0	) I I	_	3 0		Food-contact surfaces: cleaned & sanitize	
Certified Food Protection Manager for Classes 2.	С	0			90	STATE STATE	Proper disposition of returned, previously	
3, & 4				17			served, reconditioned, and unsafe food	POO
Employee Health							Time/Temperature Control for Safety	Bright Street
Management, food employee and conditional employee;	P/Pf	0	. ⊃ I ⊢				Proper cooking time and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting  4 Proper use of restriction and exclusion	Р	0					Proper reheating procedures for hot holdi Proper cooling time and temperatures	ng POO
Written procedures for responding to vemiting and							Proper hot holding temperatures	P 0 0
diarrheal events	Pf		) I  -	22	9 0	00	Proper cold holding temperatures	P 0 0
Good Hygienic Practices	- *					00	Proper date marking and disposition	P/Pf O O
6 Proper eating, tasting, drinking, or tobacco products us		0		24 (			Time as a public health control: procedure	es P/Pf/C O O
7 O No discharge from eyes, nose, and mouth	C	0	⊃   <u>'</u>	24			and records	17/1/0
Preventing Contamination by Hands  8  Hands clean and properly washed	DIDE			25 6			Consumer Advisory	1 18100
No hard hand contact with DTE food or a	T *	0	4	25 6		, 0	Consumer advisory provided: raw/undercooked for Highly Susceptible Population	od Pf OO
pre-approved alternative procedure properly followed	P/Pf/C	0		26	<b>D</b>	0	Pasteurized foods used; prohibited foods not offer	ed P/C O O
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0					ood/Color Additives and Toxic Substance	
Approved Source				27 (			Food additives: approved and properly us	
11 Pood obtained from approved source	P/Pf/C	0	5 .	28	3 0	0	Toxic substances properly identified,	P/Pf/C O O
12 O O Food received at proper temperature	P/Pf		ᆀᆫ	20 5			stored & used	
Food in good condition, safe, and unadulterated	P/Pf	0	2			C	Conformance with Approved Procedures	
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	$ \cdot $	29 🤇		0	Compliance with variance/specialized process/ROP criteria/HACCP Plan	P/Pf/C O O
	OD RE	TAII	PRA	CTIC	CFS	100	process/NOF chiefla/HACCF Flair	
Good Retail Practices are preventative measures to						ens, chem	nicals, and physical objects into foods.	
	in approp						COS=corrected on-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	V	cos		OU			Proper Use of Utensils	V COS R
30 Pasteurized eggs used where required	Р	0					sils: properly stored	000
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C Pf						pment/linens: properly stored, dried, & handled	
Food Temperature Control	J	0			7 0:	Towns at 10 years of	ngle-service articles: properly stored & used d properly	P/C O O
Desperance in a mostly and a series of the s	(3			10		700 0000	Utensils and Equipment	0 00
temperature control	Pf/c	0	211	47 C	Foo	od and no	on-food contact surfaces cleanable,	DIDITIO O O
34 O Plant food properly cooked for hot holding	Pf		$\supset      $	41	pro	perly des	signed, constructed, and used	P/Pf/C O O
35 O Approved thawing methods used	Pf/C	0	의[.	48 <			ng facilities: installed, maintained and used	i; Pf/C O O
36 Thermometers provided and accurate	Pf/C	0	21		cle		ents, sanitizers, and test strips available	
Food Identification  37 Food properly labeled; original container	Pfic	0		49 6	INOI	1-TOOG CO	ontact surfaces clean Physical Facilities	(0)00
Prevention of Food Contamination	15110			50 0	Hot	and cold	d water available; adequate pressure	Pf OO
38 Insects, rodents, and animals not present	Pf/C	0					stalled; proper backflow devices	P/Pf/C 0 0
39 Contamination prevented during food preparation, storage & display	P/Pf/C						d waste water properly disposed	P/P(10)00
40 Personal cleanliness		0		53 <	⊃ Toi	let faciliti	ies: properly constructed, supplied, & clear	Pf/C O
41 Wiping cloths: properly used and stored		0					refuse properly disposed; facilities maintained	
42 O Washing fruits and vegetables	P/Pf/C						cilities installed, maintained, and clean	P/Pf/C O O
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ilable.					entilation and lighting; designated areas us per latex gloves not used per CGS §19a-36	
0.1						docume		
Person in Charge (Signature) Woell L. Date 5 1	<u>(0 - Z</u>	5	F	Priorit	ty Iten	n Violatio	ons	ie #
~ '				Priorit	ty Fou	indation l	Item Violations	1
Person in Charge (Printed) Lebella Lourolle						Violations		3
Inspector (Signature) We must aught Date 5	16/2	23					Health Intervention Violations /Public Health Intervention Violations	0
Good Retail Practices					3/			
Inspector (Printed) Den 1 Se Payre.			F	Requ	ires F	Reinspec	ction - check box if you intend to reinspe	ct 🗸
Appeal: 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								

Foo	d Esta	blishment Inspe	ction F	Report Page 2	of		
LHD Manchester		Inspection Report Continuation She		_	16-23		
Establishment Wendys		Town Manch	resto.				
TEMPERATURE OBSERVATIONS							
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp		
Lange Hr	380	( ) T. O'e.	166F	Quatbucket	200 ppm		
10000	404	Chicken softy	194EI	Cara Sucre	200 pgs.c		
N WOR		Lamburger	155P	Hotwater HS	90F		
Lamburges	41F	Tanasa Sa	1231	2600	>110F		
Flation des	711			Jan	/ (		
. 0							
Walk-in Cooler Ambie	1 117F		-				
WWW. IN COURT FAVIBLE	nt 42		1.				
	OB	SERVATIONS AND CORRECT	TIVE ACTIO	ONG			
Violations cited in this	report must be	e corrected within the time frames belo	ow, or as stated	in sections 8-405.11 & 8-406.11 of t	he food code		
item							
Number 49 C Walkin Free 52 C Standing w 52 C Standing w							
49C Walkin tree	ner to	ocs unclean					
Enc Shada	0,	a 1 3 cs 1/2 C	1.561-	11.			
Jec standing i	Ittles (	Ganvetine -s	TOTT TO	mop until service	ه ا		
			all cos	resleted Coke to come	5/17		
52C Standing 1	2	at Diago was	7==	La Dunal La E. L	1		
see studeny	ulle	a point of voint of	1001 0	1111 lumber tixed pm 5	116		
A.W.							
33 PF Walk in a	malaina	tair increasing	Dod	10 USE			
call to be made. leave all product in WIC to Keep door Closed. Relocate back ups to Reach in so that temps in Walkin are maintained Repair 5/16 on Routop, munitor temps							
Closed	0.10	cota back was t	7 D	1 ' so that st	8 01 0 1		
CAD SEC.	- reco	all sact ups !	o Dear	Chin SU May 7	crys		
un wal	Hin as	empiralized K	epair 5 11	e on Kouftop, munitur	temps		
		l.		17	4		
. /							
Vitchen	Oucla	Cleaner + Ora	11111	J			
	+ Juch	Crost Cry					
			<u> </u>				
	$-\!\!/$		<i>.</i>				
		VIII VIII VIII VIII VIII VIII VIII VII					
	10 1	ĭ			- Control		
Person in Charge (Signature)	Moure	- Debecca L	aroche	Date 5-16	-23		
nspector (Signature)	-5 D			_ )	102		
inspector (Signature)	wera	ight		Date 5   i	10125		

*pre-	operation	U					
.00.	Foo	d Esta	blishment Ins <sub>l</sub>	pection R	eport Page	of	
LHD	nchester		Inspection Report Continuation	Sheet	Date 5/25	123	
Establishi	ment_STATOUC	1s - Den	NING TOWN MAY	ichester			
Item	/Location/Process	Temp	TEMPERATURE OBS  Item/Location/Process	ERVATIONS Temp	Item/Location/Process	Temp	
170+ U	ater	110F					
restro	oms:						
men	0 in	110F					
VVOIT		917					
quats	anitizer	200 ppm					
			SERVATIONS AND CORP				
Item Number	Violations cited in this	report must be	corrected within the time frames	below, or as stated in	sections 8-405.11 & 8-406.11 of the	e food code.	
	manar + Millel	naede	d at all handw	racio cubico			
intex	1		employee use	\$500 pt			
KStoni			ts laccessible to				
KHON			in/cold prepuni				
,			- Strips require		1 me process		
X	sneeze ava	rd reau	ired at front se	ervice are	â		
	4 to emai	× 2	rements				
	4 sean @	palco	n.US				
	4 mark @	parcon	. US				
	4 email Do	Wid (M	lanager)				
noitext	looking to	open i	0/16/23				
	Hoors, wall	i, ceiling	15/	N.			
*Ston							
	Grandy@manchesterct.gov						
	<u>igranaya</u>	manch	esterct.gov				
	HAMILLO DON	++1 10	MA AUT DAL A	10 Al 120 a m		4	
	a 2 nm	1100	me out for fl	nou mst	OCCTION 6/14/2	13	
	0) Z p111			**			
		Taget"					
		$\overline{}$					

Person in Charge (Signature)

Inspector (Signature)



479 Main Street, P.O. Box 191, Manchester, CT 06045-0191 Phone Number: **(860)** 647-3173, Fax Number: **(860)** 647-3188

### 2022 FDA Food Code Checklist

Facility: Starbucks - Demina	
Violations Documentation  No Numerical Scoring Grade-3 Violation Levels  PRIORITY - 72 hours for correction PRIORITY FOUNDATION - 10 days for correction CORE - 90 days for correction or determined by inspector  Corrections and ReInspections Corrected on site violations Reinspection - case by case Repeat violations  No Bare Hand Contact - Correction Required 9 P/Pf/C	CFPM/PIC on every shift during operating hours 1 Pf Implementing Date Marking (Sec. 3-501.17) 23 P/Pf Signage/Posters required  Handwashing sign at all handwash sinks (section 6-301.14) 10c  Major Allergens 37c  Outdoor Allowance for dogs -preapproval and sign required. 38 Pf  Employee Assessment Form  Momitting/Diarrhea Written clean-up Policy  Mop Sink Required (Sec. 5-203.13) CORE -90 day  Temperature: Final Cook Temperatures
Resources:	
2022 FDA Food Code: https://www.fda.gov/food/fda-food-co	de/food-code-2022
Town of Manchester Health Dept: https://www.manchesterci	t.gov/Government/Departments/Health-Department
FDA Handbook: https://www.fda.gov/food/retail-food-induprotection-employee-health-and-personal-hygiene-handbook	stryregulatory-assistance-training/retail-food-
Environmental Health Inspector:	
Signature of Inspector: <u>Lawrin</u>	10UJ
Print Name: ICUTEN FRANCE	Date: 5/24/23
Person In Charge:	)
Signature of Person In Charge: Dund Von	Title: Store Manusly
Print Name: <u>bund</u> Ledony	Date: 5 25 23
Email US2337069 @ Starbucks.com	

#reinspection 5/30/23

Risk Category: 3 Food Establ	ishment lı	nspecti	on Report	Page 1 of 2
Establishment type: Permanent Temporary Mobile Other			Date: 5/24/23	
Establishment Shadu GEN	in Com	COS He	0	out 11:30 ANIPM
SAN INCIDENTAL TOKO FAST	DD		100 010 01 1 L	i Angrew
MANIOCIONELA	UP	n)	Purpose of Inspection: Routine	Pre-op
Town/City IVI UT LEATU	Comedicat D	partment	ers of any of the state of the	, rie-op
Permit Holder KINV FOODBORNE ILLNESS RISK FA	ACTORS AN	D DIIRI I	Reinspection Other	Mossilla a
Risk factors are important practices or procedures identified as the most prevalent contri	nbuting factors of foo			foodbarne iliness or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it		compliance		
P=Priority item Pf=Priority foundation item C=Core item V=violation type IN OUT NA NO Supervision				
Person/Alternate Person in charge present	1 11	15	UT N/A N/O Protection from Contam	ination V COS R
demonstrates knowledge and performs duties	Pf OO	60	Food-contact surfaces: cleaned	
2 Certified Food Protection Manager for Classes 2,	c 00		Proper disposition of returned, pr	
3, & 4 Employee Health		1111	served, reconditioned, and unsat	E 1000
Management food employee and conditional employee:		18 0	Time/Temperature Control for  Proper cooking time and temperature	
knowledge, responsibilities and reporting	P/Pf O O	191010	O O Froper reheating procedures for	hot holding POO
Proper use of restriction and exclusion	P 00	20 0	Proper cooling time and tempera	tures POO
Written procedures for responding to vomiting and diarrheal events	Pf O O	22 00 0	Proper hot holding temperatures Proper cold holding temperatures	
Good Hygienic Practices	Market all 1	-	Proper date marking and disposi	
6 Proper eating, tasting, drinking, or tobacco products use			Time as a public health control:	rmcedures
7 O No discharge from eyes, nose, and mouth Preventing Contamination by Hands	000	24	/ and records	P/Pf/C O
8	P/Pf OO	25 0	Consumer Advisory  Consumer advisory provided: raw/unde	rcooked food Pf OO
No bare hand contact with RTE food or a	P/Pf/C O O	30 10	Highly Susceptible Populat	
pre-approved alternative procedure properly followed	100	26 0	Pasteurized foods used; prohibited food	s not offered P/C O
Approved Source	Pf/C   O   O	07/01/0	Food/Color Additives and Toxic St	
11 Crood obtained from approved source	P/Pf/C O O	27 0 0	Food additives: approved and properly identification	Fod
12 O O Food received at proper temperature	P/Pf O O	28 8	stored & used	P/Pf/C
13 Ø C Food in good condition, safe, and unadulterated	P/Pf O O		Conformance with Approved Pro	
14 O Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C O O	29 0	Compliance with variance/special process/ROP criteria/HACCP Pla	
GOO	DD RETAIL PE	RACTICES		- Wak is a second
Good Retail Practices are preventative measures to				
Mark OUT if numbered item is not in compliance V=violation type Mark in OUT N/A N/O Safe Food and Water	appropriate box			ection R=repeat violation
30 Pasteurized eggs used where required	V COS R	00T	Proper Use of Utensils  -use utensils: properly stored	V COS R
31 O Water and ice from approved source	P/Pf/C O O	A) XX U	tensils/equipment/linens: properly stored, dried,	& handled P(C)
32 O O Variance obtained for specialized processing methods	Pf OO	(45) X Si	ngle-use/single-service articles: properly stored	& used PC 000
Food Temperature Control  Proper cooling methods used; adequate equipment for		46 O G	loves used properly	000
temperature control	Pf/C O O	A. F	Utensils and Equipment ood and non-food contact surfaces cleanable	
34 O O Plant food properly cooked for hot holding	Pf CO	47 X p	operly designed, constructed, and used	F(P(C) ♥ ○
25 O Approved thawing methods used 36 Thermometers provided and accurate	PIC OO	18	arewasting racinties: installed, maintained a	and used;
36 50 Thermometers provided and accurate Food Identification	PC SO	A . C	eaning agents, sanitizers, and test strips ava	
37 Food properly labeled; original container	Pf/C   O   O	E MANIN	on-food contact surfaces clean Physical Facilities	(c)
Prevention of Food Contamination	~ .	50 O H	ot and cold water available; adequate pressi	ure Pf O O
Six Sinsects, rodents, and animals not present	(B)C (O) (C)	51 O P	umbing installed; proper backflow devices	P/Pf/C   O   O
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness	FFVC Ø C	52 O S	ewage and waste water properly disposed	P/Pf/C O O
41  Wiping cloths: properly used and stored	000	54 O G	bilet facilities: properly constructed, supplied arbage and refuse properly disposed; facilities m	
	P/Pf/C O O	(53) XX P	nysical facilities installed, maintained, and d	ean P/PICOO
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is available.	(56) SO A	dequate ventilation and lighting; designated	areas used (C) O
( 1 ) ( C   D ( ) = 120	1 1	Violation	atural rubber latex gloves not used per CGS s documented Date correct	
Person in Charge (Signature) WWW 2000 Date ) 1	1/23		em Violations 5/27/7	
Person in Charge (Printed) Rilty Schaeffler, 5	24/23		oundation Item Violations 6/4/23	
founded boardill -10	010	Risk Fact	Violations 9/24/13 or/Public Health Intervention Violations	14
Inspector (Signature) Date 5 7	1123	Repeat R	sk Factor/Public Health Intervention Violations	ns 2
Inspector (Printed) 11.1VP N GIMMAL	1	Good Ret	ail Practices Violations	120
Appeal: The owner of operator of a food establishment aggrieved by the	nis order to com	ect any in	Reinspection - check box if you intend to	roinonant
or dispose of unsafe food, may appeal such order to the	Director of Hea	ith, not late	er than forty-eight hours after issuance of	pector or to noid, destroy, such order.

\*re-inspection 5/30/23



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Food Establishment Inspection Report LHD Marcheste Inspection Report Continuation Sheet Date Establishment Shady Glen Town /Vanhos **TEMPERATURE OBSERVATIONS** Item/Location/Process Temp Item/Location/Process Temp Item/Location/Process Temp 38F nhster Salad Hand SINK basement Temp▶Rite. 41 line tomato repline **OBSERVATIONS AND CORRECTIVE ACTIONS** Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 & 8-406.11 of the food code. Item Number \* emai 55C Person in Charge (Signature) 23 Date Inspector (Signature) Date 0

\*re-inspection

Food Establishment Inspection Report LHD Manch ester Inspection Report Continuation Sheet Town Manchester Establishment COLV COF TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Process Temp Item/Location/Process waik in cooler interna 175F general to chix nicken loooked nondies chicken 177F OBSERVATIONS AND CORRECTIVE ACTIONS Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 & 8-406.11 of the food code. Item Number 10 pf no paper towel dispenser at front handsink 49c handsink fixtures not clean 39 pF soy sauce containers Stored on Floor gasket not clean in undercounter reach in cooler or Walk in cooler spices on cart not labeled exterior of rart not clean an cookline. walls, ceiling + Floors not clean along cookline shelving above microwave not clean pF boxes of oil stored on floor dry storage snelving not clean large bins not protected/covered indry storage discussed discarding strainer w/ wood nandie - not easily cleanable extenor of oven + grill area - corrected 5/1/23 - continue to work on cleaning cookline equipment shelving in walk in cooler clean, - corrected 5/1/23 continue to organize Shelving - corrected 5/1/23 cracked plastic 11ds - corrected 5/1/23 - no pest observed 5/1/23 pest control report emailed reinspection to occur 6/1/2022

Person in Charge (Signature)

Inspector (Signature) 📈