


Connecticut Department of Public Health

Risk Category:	Food Establishment Inspection Report				Page 1 of ____	
Establishment type: Permanent Temporary Mobile Other _____			Date: _____			
Establishment			Time In _____ AM/PM		Time Out _____ AM/PM	
Address			LHD			
Town/City			Purpose of Inspection:		Routine	Pre-op
Permit Holder			Reinspection		Other _____	
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS						
<i>Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Interventions are control measures to prevent foodborne illness or injury.</i>						
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered item IN=in compliance OUT=not in compliance N/A=not applicable N/O=not observed						
P=Priority item Pf=Priority foundation item C=Core item V=violation type Mark in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation						
		Supervision		Protection from Contamination		
	IN	OUT	N/A	N/O	V COS R	
1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Person/Alternate Person in charge present, demonstrates knowledge and performs duties Pf <input type="radio"/> <input type="radio"/>	
2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Certified Food Protection Manager for Classes 2, 3, & 4 C <input type="radio"/> <input type="radio"/>	
		Employee Health		Time/Temperature Control for Safety		
3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Management, food employee and conditional employee; knowledge, responsibilities and reporting P/Pf <input type="radio"/> <input type="radio"/>	
4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper use of restriction and exclusion P <input type="radio"/> <input type="radio"/>	
5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Written procedures for responding to vomiting and diarrheal events Pf <input type="radio"/> <input type="radio"/>	
		Good Hygienic Practices		Consumer Advisory		
6	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper eating, tasting, drinking, or tobacco products use P/C <input type="radio"/> <input type="radio"/>	
7	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	No discharge from eyes, nose, and mouth C <input type="radio"/> <input type="radio"/>	
		Preventing Contamination by Hands		Highly Susceptible Population		
8	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Hands clean and properly washed P/Pf <input type="radio"/> <input type="radio"/>	
9	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	No bare hand contact with RTE food or a pre-approved alternative procedure properly followed P/Pf/C <input type="radio"/> <input type="radio"/>	
10	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Adequate handwashing sinks, properly supplied/accessible Pf/C <input type="radio"/> <input type="radio"/>	
		Approved Source		Food/Color Additives and Toxic Substances		
11	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food obtained from approved source P/Pf/C <input type="radio"/> <input type="radio"/>	
12	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food received at proper temperature P/Pf <input type="radio"/> <input type="radio"/>	
13	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food in good condition, safe, and unadulterated P/Pf <input type="radio"/> <input type="radio"/>	
14	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Required records available: molluscan shellfish identification, parasite destruction P/Pf/C <input type="radio"/> <input type="radio"/>	
		Conformance with Approved Procedures		GOOD RETAIL PRACTICES		
29	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Compliance with variance/specialized process/ROP criteria/HACCP Plan P/Pf/C <input type="radio"/> <input type="radio"/>	
<i>Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.</i>						
Mark OUT if numbered item is not in compliance V=violation type Mark in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation						
		Safe Food and Water		Proper Use of Utensils		
	OUT	N/A	N/O	V COS R	OUT	
30	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Pasteurized eggs used where required P <input type="radio"/> <input type="radio"/>	
31	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Water and ice from approved source P/Pf/C <input type="radio"/> <input type="radio"/>	
32	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Variance obtained for specialized processing methods Pf <input type="radio"/> <input type="radio"/>	
		Food Temperature Control		Utensils and Equipment		
33	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Proper cooling methods used; adequate equipment for temperature control Pf/C <input type="radio"/> <input type="radio"/>	
34	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Plant food properly cooked for hot holding Pf <input type="radio"/> <input type="radio"/>	
35	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Approved thawing methods used Pf/C <input type="radio"/> <input type="radio"/>	
36	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Thermometers provided and accurate Pf/C <input type="radio"/> <input type="radio"/>	
		Food Identification		Physical Facilities		
37	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Food properly labeled; original container Pf/C <input type="radio"/> <input type="radio"/>	
		Prevention of Food Contamination		Violations documented		
38	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Insects, rodents, and animals not present Pf/C <input type="radio"/> <input type="radio"/>	
39	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Contamination prevented during food preparation, storage & display P/Pf/C <input type="radio"/> <input type="radio"/>	
40	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Personal cleanliness Pf/C <input type="radio"/> <input type="radio"/>	
41	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Wiping cloths: properly used and stored C <input type="radio"/> <input type="radio"/>	
42	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Washing fruits and vegetables P/Pf/C <input type="radio"/> <input type="radio"/>	
		Permit Holder shall notify customers that a copy of the most recent inspection report is available.		Date corrections due		
				#		
Person in Charge (Signature)		Date		Priority Item Violations		
Person in Charge (Printed)				Priority Foundation Item Violations		
Inspector (Signature)		Date		Core Item Violations		
Inspector (Printed)				Risk Factor/Public Health Intervention Violations		
				Repeat Risk Factor/Public Health Intervention Violations		
				Good Retail Practices Violations		
				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, or dispose of unsafe food, may appeal such order to the Director of Health, not later than forty-eight hours after issuance of such order.						