

#6168

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|--|-------------------------------------|---|--|--|--------------------------|--|-------------------------------------|--------------------------|--|--------------------------|--------------------------|--------------------------|--------------------------|
| Risk Category: <u>3</u> | | Food Establishment Inspection Report | | | Page 1 of <u>2</u> | | | | | | | | |
| Establishment type: <u>Permanent</u> Temporary Mobile Other | | | | Date: <u>9/18/24</u> | | | | | | | | | |
| Establishment <u>Corner Deli of Seymour</u> | | | | Time In <u>125</u> AM/PM Time Out <u>215</u> AM/PM | | | | | | | | | |
| Address <u>132 New Haven Rd</u> | | | | LHD <u>NVHD</u> | | | | | | | | | |
| Town/City <u>Seymour</u> | | | | Purpose of Inspection: <u>Routine</u> Pre-op | | | | | | | | | |
| Permit Holder <u>Michelle Deangelo</u> | | | | Reinspection Other | | | | | | | | | |
| FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS | | | | | | | | | | | | | |
| <small>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.</small> | | | | | | | | | | | | | |
| <small>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</small> | | | | | | | | | | | | | |
| <small>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</small> | | | | | | | | | | | | | |
| Supervision | | | Protection from Contamination | | | | | | | | | | |
| IN | OUT | N/A/N/O | V | COS | R | V | COS | R | | | | | |
| 1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Pf | <input type="checkbox"/> | <input type="checkbox"/> | 15 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | |
| Person/Alternate Person in charge present, demonstrates knowledge and performs duties | | | Food separated and protected | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| 2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | C | <input type="checkbox"/> | <input type="checkbox"/> | 16 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | |
| Certified Food Protection Manager for Classes 2, 3, & 4 | | | Food-contact surfaces: cleaned & sanitized | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| Employee Health | | | Proper disposition of returned, previously served, reconditioned, and unsafe food | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| 3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | P/Pf | <input type="checkbox"/> | <input type="checkbox"/> | Time/Temperature Control for Safety | | | | | | | |
| Management, food employee and conditional employee; knowledge, responsibilities and reporting | | | Proper cooking time and temperatures | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| 4 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | P | <input type="checkbox"/> | <input type="checkbox"/> | 18 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | |
| Proper use of restriction and exclusion | | | Proper reheating procedures for hot holding | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| 5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Pf | <input type="checkbox"/> | <input type="checkbox"/> | 19 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | |
| Written procedures for responding to vomiting and diarrheal events | | | Proper cooling time and temperatures | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| Good Hygienic Practices | | | Proper hot holding temperatures | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| 6 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | P/C | <input type="checkbox"/> | <input type="checkbox"/> | 20 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | |
| Proper eating, tasting, drinking, or tobacco products use | | | Proper cold holding temperatures | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| 7 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | C | <input type="checkbox"/> | <input type="checkbox"/> | 21 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | | | |
| No discharge from eyes, nose, and mouth | | | Proper date marking and disposition | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| Preventing Contamination by Hands | | | Time as a public health control: procedures and records | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| 8 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | P/Pf | <input type="checkbox"/> | <input type="checkbox"/> | Consumer Advisory | | | | | | | |
| Hands clean and properly washed | | | Consumer advisory provided: raw/undercooked food | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| 9 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | P/Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | Highly Susceptible Population | | | | | | | |
| No bare hand contact with RTE food or a pre-approved alternative procedure properly followed | | | Pasteurized foods used; prohibited foods not offered | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| 10 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | Food/Color Additives and Toxic Substances | | | | | | | |
| Adequate handwashing sinks, properly supplied/accessible | | | Food additives: approved and properly used | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| Approved Source | | | Toxic substances properly identified, stored & used | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| 11 | <input type="checkbox"/> | <input type="checkbox"/> | P/Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | Conformance with Approved Procedures | | | | | | | |
| Food obtained from approved source | | | Compliance with variance/specialized process/ROP criteria/HACCP Plan | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | |
| 12 | <input type="checkbox"/> | <input type="checkbox"/> | P/Pf | <input type="checkbox"/> | <input type="checkbox"/> | GOOD RETAIL PRACTICES | | | | | | | |
| Food received at proper temperature | | | <small>Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.</small> | | | | | | | | | | |
| 13 | <input type="checkbox"/> | <input type="checkbox"/> | P/Pf | <input type="checkbox"/> | <input type="checkbox"/> | <small>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</small> | | | | | | | |
| Food in good condition, safe, and unadulterated | | | Safe Food and Water | | | Proper Use of Utensils | | | Utensils and Equipment | | | | |
| 14 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | P/Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | OUT | V | COS | R | OUT | V | COS | R |
| Required records available: molluscan shellfish identification, parasite destruction | | | 30 | <input type="checkbox"/> | <input type="checkbox"/> | P | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 43 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Good Retail Practices | | | 31 | <input type="checkbox"/> | <input type="checkbox"/> | P/Pf | <input type="checkbox"/> | <input type="checkbox"/> | 44 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 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 | | | 32 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Pf | <input type="checkbox"/> | <input type="checkbox"/> | 45 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Safe Food and Water | | | 33 | <input type="checkbox"/> | <input type="checkbox"/> | Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | 46 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Pasteurized eggs used where required | | | Food Temperature Control | | | Proper Use of Utensils | | | Utensils and Equipment | | | | |
| Water and ice from approved source | | | 34 | <input type="checkbox"/> | <input type="checkbox"/> | Pf | <input type="checkbox"/> | <input type="checkbox"/> | 47 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Variance obtained for specialized processing methods | | | 35 | <input type="checkbox"/> | <input type="checkbox"/> | Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | 48 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Food Temperature Control | | | 36 | <input type="checkbox"/> | <input type="checkbox"/> | Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | 49 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Proper cooling methods used; adequate equipment for temperature control | | | Food Identification | | | Physical Facilities | | | Physical Facilities | | | | |
| Plant food properly cooked for hot holding | | | 37 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | 50 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Approved thawing methods used | | | Prevention of Food Contamination | | | 51 | <input type="checkbox"/> | <input type="checkbox"/> | 51 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Thermometers provided and accurate | | | 38 | <input type="checkbox"/> | <input type="checkbox"/> | Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | 52 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Food Identification | | | 39 | <input type="checkbox"/> | <input type="checkbox"/> | P/Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | 53 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Food properly labeled; original container | | | 40 | <input type="checkbox"/> | <input type="checkbox"/> | Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | 54 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Prevention of Food Contamination | | | 41 | <input type="checkbox"/> | <input type="checkbox"/> | C | <input type="checkbox"/> | <input type="checkbox"/> | 55 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Insects, rodents, and animals not present | | | 42 | <input type="checkbox"/> | <input type="checkbox"/> | P/Pf/C | <input type="checkbox"/> | <input type="checkbox"/> | 56 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Contamination prevented during food preparation, storage & display | | | Personnel | | | Personnel | | | Personnel | | | | |
| Personal cleanliness | | | Person in Charge (Signature) <u>Michelle Deangelo</u> Date <u>9/18/24</u> | | | Person in Charge (Signature) <u>Michelle Deangelo</u> Date <u>9/18/24</u> | | | Person in Charge (Signature) <u>Michelle Deangelo</u> Date <u>9/18/24</u> | | | | |
| Wiping cloths: properly used and stored | | | Inspector (Signature) <u>Laurel Ashaw</u> Date <u>9/18/24</u> | | | Inspector (Signature) <u>Laurel Ashaw</u> Date <u>9/18/24</u> | | | Inspector (Signature) <u>Laurel Ashaw</u> Date <u>9/18/24</u> | | | | |
| Washing fruits and vegetables | | | 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. | | | 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. | | | 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. | | | | |
| Violations documented | | | Date corrections due | | | # | | | Violations documented | | | | |
| Priority Item Violations | | | 10 days COS | | | 4 | | | Priority Item Violations | | | | |
| Priority Foundation Item Violations | | | 90 days COS | | | 7 | | | Priority Foundation Item Violations | | | | |
| Core Item Violations | | | | | | 6 | | | Core Item Violations | | | | |
| Risk Factor/Public Health Intervention Violations | | | | | | 1 | | | Risk Factor/Public Health Intervention Violations | | | | |
| Repeat Risk Factor/Public Health Intervention Violations | | | | | | | | | Repeat Risk Factor/Public Health Intervention Violations | | | | |
| Good Retail Practices Violations | | | | | | | | | Good Retail Practices Violations | | | | |
| Requires Reinspection - check box if you intend to reinspect | | | | | | | | | Requires Reinspection - check box if you intend to reinspect | | | | |

Food Establishment Inspection Report

LHD NVHD

Inspection Report Continuation Sheet

Date 9/18/24

Establishment Corner Deli of Seymour Town Seymour

TEMPERATURE OBSERVATIONS

| Item/Location/Process | Temp | Item/Location/Process | Temp | Item/Location/Process | Temp |
|----------------------------|-------|-----------------------|------|---|------|
| Hot hold meatball/sauce | 143°F | Reach in focella | | Reach in (breakfast sandwich) cooked | |
| forkellini | 158°F | whipped butter | 41°F | mushroom | 40°F |
| | | Rgt beef | 38°F | Sausage patty | 38°F |

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 | Observations and Corrective Actions |
|-------------|---|
| 10c | Hand wash signage required for employee not posted <u>provided</u> <u>COS</u> |
| 15c | Handless cup used to scoop granular product <u>COS</u> removed |
| 15pf | Produce boxes stored on floor (onions) <u>COS</u> put on shelf |
| 16pf | Procedure for manual warewashing inadequate → discussed wash, rinse, sanitize, air dry <u>COS</u> |
| 28pf | Sanitizer buckets not labeled/identified <u>COS</u> |
| 28pf | Spray bottles with liquids not labeled/identified <u>COS</u> |
| 37c | Granular bins, containers not labeled with common name <u>COS</u> labeled castanhes sugar, salt etc. |

Form I-B ✓

Food prep sink air gap maintained ok.

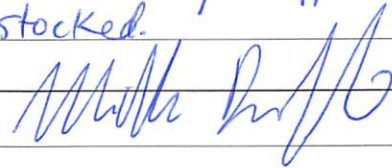
Interiors/exteriors equipment, refrigeration clean/maintained.

Food prep area/slicers/sts table clean, maintained

Stourguard Plus Quat Sanitizer @ 3bay 200ppm test strip available

handwashing sinks properly stocked.

Hot water 120°F + prep area



Person in Charge (Signature)

Date 9/18/24

Inspector (Signature) Daniel Ashman

Date 9/18/24