Connecticut Department of Public Health

493											
Risk Category: 2 Food Establishment Inspection Report Page 1 of 2											
Establishment type Permanent Temporary Mobile Other						_ D	ate:	91912	1		
Establishment CUMDOLONO FORMS 4668			teating connecticut Mostig			т Т	ime In	1245	M/PM Time Out		AM/PM
Address 527 North Main Street			DPF			L	HD Y	JUHA			
Town/City Naughtuck						P	urpose	e of Inspection	: Routine Pre	e-op	
Permit Holde			of Pu	ablic H		K	einspe		Other		
Risk fact	FOODBORNE ILLNESS RISK F. tors are important practices or procedures identified as the most prevalent cont									ss or injury.	
Mark design	nated compliance status (IN, OUT, N/A, N/O) for each numbered it	tem	IN	l=in d	complia	ance	OUT=r	not in compliance	N/A=not applicable N/C	not obs	served
P=Priority item	Pf=Priority foundation item	Mark in	appro	opria	te box	for COS	S and/or	R COS=correc	ted on-site during inspection	R=repeat	violation
IN OUT NA	A N/O Supervision	V	cos	R	11	N OUT	N/A N/C	Protecti	on from Contamination	V	COS R
1000	Person/Alternate Person in charge present,	Pf	0		15	0/8	00	Food separated	d and protected	P/C	00
	demonstrates knowledge and performs duties	1.1			16	V9			urfaces: cleaned & sanitized	P/Pf/C	00
2000	Certified Food Protection Manager for Classes 2,	С	0		17 0	00			ion of returned, previously	Р	00
	3, & 4								itioned, and unsafe food		1
/	Employee Health	-			10 0				ture Control for Safety	To incio	
3 00	Management, food employee and conditional employee;	P/Pf	0	0	18	_			time and temperatures		00
	knowledge, responsibilities and reporting	-							g procedures for hot holding	-	
4 00 9	Proper use of restriction and exclusion Written procedures for responding to vomiting and	Р	0	0			0		time and temperatures ing temperatures		00
5 000	diarrheal events	Pf	0	0	22				ding temperatures	P	00
	Good Hygienic Practices				23 4		00		rking and disposition	P/Pf	00
6 6	Proper eating, tasting, drinking, or tobacco products us	e P/C	10	0					c health control: procedures	T	
700	No discharge from eyes, nose, and mouth	С	0	0	24		W C	and records		P/Pf/C	00
10 10 10 10 10	Preventing Contamination by Hands							Cons	umer Advisory	2005	0.4.00
8 0	Hands clean and properly washed	P/Pf	0	0	25 🤇		0		y provided: raw/undercooked food	Pf	00
0 000	No bare hand contact with RTE food or a	DIDEIC					/	Highly Sus	ceptible Population		
9 000	pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 🤇	00	0	Pasteurized foods	used; prohibited foods not offered	P/C	00
10	Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0		1	Fo	ood/Color Additi	ves and Toxic Substances		
/	Approved Source				27	0	0	Food additives:	approved and properly used	P	00
11 0	Food obtained from approved source	P/Pf/C	0	0	28			Toxic substance	es properly identified,	P/Pf/C	00
12 0 00		P/Pf	_	0	20			stored & used		171 110	
13 0	Food in good condition, safe, and unadulterated	P/Pf	0	0			/		th Approved Procedures		
14000	Required records available: molluscan shellfish	P/Pf/C	0	0	29 🤇	00	₩ I		h variance/specialized riteria/HACCP Plan	P/Pf/C	00
	identification, parasite destruction	OD RE	TAIL	DD	ACTI	CES		process/ROP C	III. III. III. III. III. III. III. III	-	
	Good Retail Practices are preventative measures to						ns chem	nicals and physica	Lobiects into foods	The second second	
Mark OUT if		n appro								R=repeat	violation
OUT N/A N/O		V	1	R	OU		The same		e of Utensils	V	COS R
	Pasteurized eggs used where required	Р		0	-		se utens	sils: properly stor		С	00
	Water and ice from approved source	P/Pf/C	0	0					perly stored, dried, & handled		00
	Variance obtained for specialized processing methods	Pf	0	0	45 <	Sing	le-use/si	ingle-service article	es: properly stored & used	P/C	00
	Food Temperature Control				46 <	Glov	es use	d properly		С	00
33 🔾	Proper cooling methods used; adequate equipment for	Pf/C	0			-			and Equipment		
	temperature control	11/0			47				surfaces cleanable,	P/Pf/C	00
	Plant food properly cooked for hot holding	Pf	_	0		_		signed, construct			
	Approved thawing methods used	Pf/C	-	0	48	2		•	illed, maintained and used;	Pf/C	00
36	Thermometers provided and accurate	Pf/C	0	0					and test strips available		
07 0 5	Food Identification	Torio.			49	> Non-	-tood co	ontact surfaces c		С	00
37 C Food pr	roperly labeled; original container	Pf/C	0	9	50	- III-I			ical Facilities	Df	
00 0 11-	Prevention of Food Contamination	DUG							; adequate pressure	Pf	00
	, rodents, and animals not present ination prevented during food preparation, storage & display	_	0	_				stalled; proper bad waste water pro			00
40 Persona		P/Pf/C	0	_					structed, supplied, & clean	Pf/C	00
	cloths: properly used and stored	C	-	0					isposed; facilities maintained	C	00
	g fruits and vegetables	P/Pf/C	_	_					naintained, and clean	-	
To a survey of			90000000						nting; designated areas used	С	00
Permit Holder	shall notify customers that a copy of the most recent inspection repo	ort is ava	allable.						not used per CGS §19a-36f		
	A: - manh ala	12/	1		Viola	tions o	docume	ented	Date corrections due		#
Person in Charge (Signature) Quince MOLA pate 9/9/24							Violatio		-		
D	rge (Printed) Aimie Melko		1					Item Violations	12/01/20		-
Person in Cha	rge (Printed) 1 VIVIVE 11 VIVIVE	11-4	4	_			iolation		on Violations		_
Inspector (Signature)						Risk Factor/Public Health Intervention Violations Repeat Risk Factor/Public Health Intervention Violations					
Oho XIII						Good Retail Practices Violations					1
Inspector (Printed) The Durant Durant 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, d	estroy,			
	or dispose of unsafe food, may appeal such order to the										

1st - White: Health Department

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LHD	HD			Continuation She		Date	9 9 2	4			
Establish	ment UM berny	nd Farm	Town_	navar	HUCK						
TEMPERATURE OBSERVATIONS											
Item	/Location/Process	Temp	Item/Location	/Process	Temp	Item/Location/	Process	Temp			
Shan	ch though ambient	29 - 101	NOV FLORE	BOH	901						
FATT	MATINE	95 F	or mag	20011	50 1						
Walkin	ambient	39 F									
HOTO	OGS HH	139 F									
HO+ DO	stine	101									
COLUT	IVOATION	1941									
LOOU	7107 8-01				TIVE ACTIO						
Item	Violations cited in this	report must be correct	cted within the t	ime frames belo	w, or as stated in	n sections 8-405.11 & 8	3-406.11 of the f	food code.			
Number	CHOW: HA	mid mt	110	127/4	Q.	2 ()			
	FOH hams	ink Stock	Pol Sic	mager	not hi	20- BOH	hs 90	od			
	Single Seri	11 (PHPM)	1 / di	UDS + (antaint	is invert	edis				
	POGS ODLY	HOM			/						
	Tush o the	ermame	LAUV VI	inul a	Oves						
	KINT CAN	ili7 Dem	2000	ono		HIPS					
	WHI SUI	MEGV	1000	Ollin	TUTO	71115					
	ary Hurage	e area gi	uua —								
		J									
								16			
47	microwave	a) SPH	SPYLIC	e avea	uncle	an					
	THOTOUR	Cogen	001010	c on cor	Orient						
							0101	-1:			
Person in	Charge (Signature)	rime n	10 LRa			Da	te 7/9/	24			
	(Signature)	N CLUT	and			Da	te 9191	24			
	VIIIV	1	1100				7 1	15			