EHS-106-Rev. 11/05 **INSPECTION REPORT** FOOD SERVICE ESTABLISHMENTS

NAME OF **ESTABLISHMENT** STREET **ADDRESS** OWNER or **OPERATOR**

STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

POUTINE INSPECTION
☐ PREOPERATIONAL

REINSPECTION
OTHER

410 Capitol Avenue, MS#11FDP, Hartford, CT 06134

ESTABLISHMENT 3	
TOWN Fairfuld	
INSPECTION DATE and TIME 5/5//	

Based on an inspection this day, the items marked below identify the violations in operation or facilities v

so	URCES OF FOOD	
1	Approved source, wholesome, nonadulterated	4
2	Original container, properly labeled	1
	OD PROTECTION	
3	Potentially hazardous food meets temperature requirements during storage, preparation, display, service, and transportation	4
#- <u>-</u>	Adequate facilities to maintain product (2
	temperature, thermometers provided	
5	Potentially hazardous food properly thawed	2
6	Unwrapped or potentially hazardous food not re-served	4
7	Food protected during storage, preparation, display, service & transportation	2
8	Food containers stored off floor	_
9	Handling of food minimized	2
10	Food dispensing utensils properly stored	1
11	Toxic items properly stored, labeled, used	4
PE	RSONNEL	
12	Personnel with infection restricted	4
	EANLINESS OF PERSONNEL	T -
13	Handwashing facilities provided, personnel hands washed, clean	4
14	Clean outer clothes, effective hair restraints	1
15	Good hygienic practices, smoking restricted	2
CO	UIPMENT & UTENSILS: DESIGN, NSTRUCTION & INSTALLATION	<u></u>
16	Food-contact surfaces designed, constructed, maintained, installed, located	2
7		1
17	Nonfood-contact surfaces designed, constructed, maintained, installed, located	1
		2
18	Single service articles, storage, dispensing	J 2
	No reuse of single service article	2

	DEMERI'	T SCORE
4	3	27 1
TOTAL	RATING	Date Corrections Due
GW)	96	NAP

EQ	UIPMENT & UTENSILS: CLEANLINES	SS
21	Preflushed, scraped, soaked and racked	
22	Wash water clean, proper temperature	1
23	Accurate thermometers provided, dish basket, if used	1
24	Sanitization rinse (hot water - chemical)	2
25	Clean wiping cloths	1
26	Food-contact surfaces of utensils & equipment clean	2
27	Nonfood-contact surfaces of utensils & equipment clean	1
28	Equipment/utensils, storage, handling	1
w	ATER SUPPLY	
29	Water source adequate, safe	4
30	Hot and cold water under pressure,	2
	provided as required	
SE	WAGE DISPOSAL	
31	Sewage disposal approved	4
		, ,
32	Proper disposal of waste water	1
	Proper disposal of waste water UMBING Location, installation, maintenance	-
PL	UMBING	1
PL 33 34	UMBING Location, installation, maintenance	1
PL 33 34	UMBING Location, installation, maintenance No cross connection, back siphonage, backflow PLET FACILITIES Adequate, convenient, accessible, designed, installed	1
PL 33 34 TC	UMBING Location, installation, maintenance No cross connection, back siphonage, backflow PILET FACILITIES Adequate, convenient, accessible, designed, installed Toilet rooms enclosed with self-closing door	1 1 4
PL 33 34 TC 35	UMBING Location, installation, maintenance No cross connection, back siphonage, backflow PLET FACILITIES Adequate, convenient, accessible, designed, installed	1 4
PL 33 34 TC 35 36 37	UMBING Location, installation, maintenance No cross connection, back siphonage, backflow PILET FACILITIES Adequate, convenient, accessible, designed, installed Toilet rooms enclosed with self-closing door	1 4
PL 33 34 TC 35 36 37	UMBING Location, installation, maintenance No cross connection, back siphonage, backflow NLET FACILITIES Adequate, convenient, accessible, designed, installed Toilet rooms enclosed with self-closing door Proper fixtures provided, good repair, clean	1 4
PL 33 34 TC 35 36 37 HA 38	UMBING Location, installation, maintenance No cross connection, back siphonage, backflow NLET FACILITIES Adequate, convenient, accessible, designed, installed Toilet rooms enclosed with self-closing door Proper fixtures provided, good repair, clean NDWASHING FACILITIES Suitable hand cleaner and sanitary towels or approved hand drying devices provided, tissue waste receptacles provided	1 4 4
PL 33 34 TC 35 36 37 HA 38	UMBING Location, installation, maintenance No cross connection, back siphonage, backflow PILET FACILITIES Adequate, convenient, accessible, designed, installed Toilet rooms enclosed with self-closing door Proper fixtures provided, good repair, clean NDWASHING FACILITIES Suitable hand cleaner and sanitary towels or approved hand drying devices provided,	1 4 4
PL 33 34 TC 35 36 37 HA 38	UMBING Location, installation, maintenance No cross connection, back siphonage, backflow PLET FACILITIES Adequate, convenient, accessible, designed, installed Toilet rooms enclosed with self-closing door Proper fixtures provided, good repair, clean NDWASHING FACILITIES Suitable hand cleaner and sanitary towels or approved hand drying devices provided, tissue waste receptacles provided RBAGE/RUBBISH STORAGE & DISPOS Approved containers, adequate number,	1 4 4 - 1 1 SAL

VE	RMIN CONTROL
42	Presence of insects/rodents
43	Outer openings protected against entrance of insects/rodents
FL	OORS, WALLS & CEILINGS
44	Floors: floor covering installed, constructed as required, good repair, clean
45	Floors, graded, drained as required
46	Floor, wall juncture covered
47	Mats removable, good repair, clean
48	Exterior walking, driving surfaces, good repair, clean
49	Walls, ceilings attached, equipment properly constructed, good repair, clean. Wall & ceiling surfaces as required.
50	Dustless cleaning methods used, cleaning equipment properly stored
LIC	GHTING & VENTILATION
51	Adequate lighting provided as required
52	Room free of steam, smoke odors
53	Room & equipment hoods, ducts, vented as required
DF	RESSING ROOMS & LOCKERS
54	Rooms adequate, clean, adequate lockers provided, facilities clean
нс	DUSEKEEPING
55	Establishment and premises free of litter, no insect/rodent harborage, no unnecessary articles
56	Complete separation from living/sleeping quarters and laundry
57	Clean/soiled linens stored properly
58	No live birds, turtles, or other animals (except guide dogs)
SN	OKING PROHIBITED
59	Smoking prohibited, signs posted at each entrance
QL	JALIFIED FOOD OPERATOR
_	
60	Qualified Food Operator
60 61	Qualified Food Operator Designated alternate

62 Written documentation of training program

2

RISK FACTOR VIOLATIONS IN RED

SIGNED (Inspector)

Signature of Person in charge