EHS-106-Rev. 11/05

INSPECTION REPORT FOOD SERVICE ESTABLISHMENTS

STATE OF CONNECTICUT **DEPARTMENT OF PUBLIC HEALTH**

PROUTINE INSPECTION | REINSPECTION PREOPERATIONAL

□ OTHER

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

•	
NAME OF ESTABLISHMENT R. Shoving Schart	ESTABLISHMENT CLASS
STREET ADDRESS 250 FEV T	TOWN SS
OWNER or OPERATOR	INSPECTION DATE and TIME 4 Warf 1/21
Based on an inspection this day, the items marked below identify the violations in operation	or facilities which must be corrected by the date specified below

SC	DURCES OF FOOD	
1	Approved source, wholesome, nonadulterated	4
2	Original container, properly labeled	1
FC	OOD PROTECTION	
3	Potentially hazardous food meets temperature requirements during storage, preparation, display, service, and transportation	4
4	Adequate facilities to maintain product temperature, thermometers provided	2
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	1
9	Handling of food minimized	2
10	Food dispensing utensils properly stored	1
11	Toxic items properly stored, labeled, used	4
	RSONNEL	
12	Personnel with infection restricted	4
CL	EANLINESS OF PERSONNEL	
13	Handwashing facilities provided,	4
4.7	personnel hands washed, clean	
14	Clean outer clothes, effective hair restraints	1
15	Good hygienic practices, smoking restricted	2
	UIPMENT & UTENSILS: DESIGN, NSTRUCTION & INSTALLATION	
16	Food-contact surfaces designed, constructed, maintained, installed, located	2
17	Nonfood-contact surfaces designed, constructed, maintained, installed, located	1
18	Single service articles, storage, dispensing	2
19	No reuse of single service article	
20	Dishwashing facilities approved design, adequately constructed, maintained, installed, located	2

DEMERIT SCORE			
4	3	2 1	
TOTAL	RATING	Date Corrections Due	

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	QUIPMENT & UTENSILS: CLEANLINE	SS
21	Preflushed, scraped, soaked and racked	┨.
22	Wash water clean, proper temperature	1
23	Accurate thermometers provided, dish basket, if used	L
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, provided as required	2
SE	WAGE DISPOSAL	
31	Sewage disposal approved	4
32	Proper disposal of waste water	1
PL 33	UMBING Location, installation, maintenance	1
34	No cross connection, back siphonage, backflow	4
	ILET FACILITIES	
35	Adequate, convenient, accessible, designed, installed	4
36	Tollet rooms enclosed with self-closing door	1
37	Proper fixtures provided, good repair, clean	
HΑ	NDWASHING FACILITIES	
38	Suitable hand cleaner and sanitary towels or approved hand drying devices provided, tissue waste receptacles provided	1
GA	RBAGE/RUBBISH STORAGE & DISPOS/	AL
39	Approved containers, adequate number, covered, rodent proof, clean	1
40	Storage area/rooms, enclosures properly constructed, clean	1
41	Garbage disposed of in an approved manner,	•
]	at approved frequency	

VE 42	RMIN CONTROL	
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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	SHTING & VENTILATION	
51	Adequate lighting provided as required	1
52	Room free of steam, smoke odors	-
53	Room & equipment hoods, ducts, vented as required	
DE	ESSING ROOMS & LOCKERS	
	EGGIIVO NUUMO & LUCKERG	
54		
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Signature	of Persor	in charg	е		
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RISK FACTOR VIOLATIONS IN RED

SIGNED (Inspector)