EHS-106-Rev. 11/05

INSPECTION REPORT FOOD SERVICE ESTABLISHMENTS

STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

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OTHER

410 Capitol Avenue, MS#11FDP, Hartford, CT 06134 NAME OF **ESTABLISHMENT ESTABLISHMENT** CLASS STREET TOWN **ADDRESS** OWNER or INSPECTION **OPERATOR** DATE and TIME / Vice 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. SOURCES OF FOOD **EQUIPMENT & UTENSILS: CLEANLINESS** VERMIN CONTROL Approved source, wholesome, Preflushed, scraped, soaked and racked 42 Presence of insects/rodents 4 2 nonadulterated Wash water clean, proper temperature 22 Outer openings protected against entrance of insects/rodents Original container, properly labeled 1 23 Accurate thermometers provided, dish basket, if used 24 Sanitization rinse (hot water - chemical) 2 25 Clean wiping cloths 1 FOOD PROTECTION **FLOORS, WALLS & CEILINGS** Potentially hazardous food meets Fpod-contact surfaces of utensils & 2 Floors: floor covering installed. $\sqrt{26}$ 4 constructed as required, good repair, clean temperature requirements during storage, equipment clean preparation, display, service, and Nonfood-contact surfaces of utensils & 45 Floors, graded, drained as required transportation equipment clean 46 Floor, wall juncture covered Adequate facilities to maintain product 2 Equipment/utensils, storage, handling Mats removable, good repair, clean temperature, thermometers provided 2 Potentially hazardous food properly thawed Exterior walking, driving surfaces, good repair, clean Unwrapped or potentially hazardous food 4 WATER SUPPLY not re-served Water source adequate, safe Walls, ceilings attached, equipment properly 4 constructed, good repair, clean. Wall & ceiling 7 Food protected during storage, preparation, Hot and cold water under pressure, 2 surfaces as required. display, service & transportation provided as required 2 50 Dustless cleaning methods used, Food containers stored off floor 1 cleaning equipment properly stored **SEWAGE DISPOSAL** Handling of food minimized 2 31 Sewage disposal approved 4 1 Proper disposal of waste water Food dispensing utensils properly stored 1 LIGHTING & VENTILATION Toxic items properly stored, labeled, used 4 51 Adequate lighting provided as required PLUMBING Room free of steam, smoke odors Location, installation, maintenance Room & equipment hoods, ducts, vented as required PERSONNEL 12 Personnel with Infection restricted No cross connection, back siphonage, backflow 4 DRESSING ROOMS & LOCKERS **CLEANLINESS OF PERSONNEL** Rooms adequate, clean, adequate lockers **TOILET FACILITIES** provided, facilities clean Handwashing facilities provided, Adequate, convenient, accessible, designed, 4 4 personnel hands washed, clean installed Clean outer clothes, effective hair restraints 1 36 Toilet rooms enclosed with self-closing door Good hygienic practices, smoking restricted 2 Proper fixtures provided, good repair, clean HOUSEKEEPING Establishment and premises free of litter, no insecVrodent harborage, no unnecessary articles **EQUIPMENT & UTENSILS: DESIGN,** HANDWASHING FACILITIES Suitable hand cleaner and sanitary towels or 1 Complete separation from living/sleeping quarters CONSTRUCTION & INSTALLATION approved hand drying devices provided, and laundry Food-contact surfaces designed, constructed, 2 tissue waste receptacles provided maintained, installed, located 57 Clean/soiled linens stored properly 17 Nonfood-contact surfaces designed, 1 No live birds, turtles, or other animals constructed, maintained, installed, located GARBAGE/RUBBISH STORAGE & DISPOSAL (except guide dogs) Single service articles, storage, dispensing 39 Approved containers, adequate number, 2 covered, rodent proof, clean No reuse of single service article 19 SMOKING PROHIBITED Dishwashing facilities approved design, adequately 20 2 Storage area/rooms, enclosures -Smoking prohibited, signs posted at each 3 constructed, maintained, installed, located properly constructed, clean entrance Garbage disposed of in an approved manner, at approved frequency QUALIFIED FOOD OPERATOR **DEMERIT SCORE** 60 **Qualified Food Operator** 61 Designated alternate 2 RISK FACTOR VIOLATIONS IN RED 2 Written documentation of training program Signature of Person in charge TOTAL RATING Date Corrections Due

WOS.

SIGNED (Inspector)