Control of the contro

Manchester Health Department

479 Main Street Manchester, CT 06040

* Walk-Thru

Establishment:	Date of Inspection:								
Adelbrook	7/2/2024								
Dry storage to be added - c1	osets in gym room								
Floors, walls, ceiling in tact. T									
shelving, commercial NSF or									
remain locked. sprinklers in	closets- en vst be 18" below								
sprinklerg									
1									
window to be made smaller-	reach out to building								
	and Fire Marshal Office for requirements. No size limit								
or restriction from health.									
cabinets to be removed in r	sitchen + replaced with								
stainless steel NSF/equival	ent shelling. All work to								
be done on varation/break	schedue - not operating								
during construction	1.)								
<u> </u>									
discussed addingshelving a	bove dish machine/3 bay								
4 NSF/commercial equip	oment required.								
reach out to Health dept one	e construction completed								
and prior to USE.									
	nitial (Person in Charge) よーり・								

MANCHESTER FIRE DEPARTMENT

INSPECTION REPORT
BURGER CLASS, 194 BUCKLAND HILLS DR, BLDG THE SHOPPES AT BUCKLAND HILLS - STE
2060, MANCHESTER CT 06042



DETAILS

Inspection Date: 06/25/2024 | Inspection Type: INSPECTION - Assembly | Inspection Number: 19005 | Shift: Day | Station: STATION 7 | Unit: CAR42 | Lead Inspector: ROGER THRALL | Other Inspectors: N/A

VIOLATIONS AND COMPLIANCES

Showing only violations and images for this inspection. Please reach out to the lead inspector for more details. Resolved Violations: 0 | Passed Codes: 87 | Violations: 7 | N/A Codes: 79

STATUS	CODE	DESCRIPTION
FAIL	17A- 4.3.2.1 - Discharge Nozzle Caps	All discharge nozzles shall be provided with caps or other suitable devices to prevent the entrance of grease vapors, moisture, environmental contaminants, or other foreign materials into the piping. Location: Nozzle caps are not properly attached and the system is required to be inspected.



FAIL 50.2.1.3 - General.

The following equipment shall be kept in working condition: (1)Cooking equipment(2)Hoods(3)Ducts(4)Fans(5)Fire-extinguishing equipment(6)Special effluent or energy control equipment[96:4.1.3]

Location: Not Provided

Original Comment: Up blast hood is not functioning properly. This requires maintenance by a trained technician. Cooking shall not be performed on the flat top griddle until this repair has been made.







FAIL

STATUS

50.2.1.3 - General.

The following equipment shall be kept in working condition: (1)Cooking equipment(2)Hoods(3)Ducts(4)Fans(5)Fire-extinguishing equipment(6)Special effluent or energy control equipment[96:4.1.3]

Location: Flat top griddle

Original Comment: Flat top griddle is missing its required control knobs.



FAIL

50.6.4 - Inspection for Grease Buildup.

The entire exhaust system shall be inspected for grease buildup by a properly trained, qualified, and certified person(s) acceptable to the AHJ and in accordance with Table 50.6.4. [96:12.4]

Location: Not Provided

Original Comment: The hoods in this establishment were due for inspection/ cleaning in April 2024. Please have the hoods inspected and or cleaned in the next 7 days.

FAIL

50.6.6.1 - Cleaning of Exhaust Systems.

If upon inspection, the exhaust system is found to be contaminated with deposits from grease-laden vapors, the contaminated portions of the exhaust system shall be cleaned by a properly trained qualified, and certified person(s) acceptable to the AHJ. [96:12.6.1]

Location: Not Provided

Original Comment: The hoods in this establishment were due for inspection/ cleaning in April 2024. Please have the hoods inspected and or cleaned in the next 7 days.

FAIL

7.1.10.1 - Maintenance of the Means of Egress (Shall Be Unobstructed) Means of egress shall be continuously maintained free of all obstructions or impediments to full instant use in the case of fire or other emergency.

Location: back storage area.

Original Comment: The egress path from the area of the 3 bay sink is reduced because of the addition of a additional refrigerator. A 36 inch path must be maintained.



FAIL

NFPA 1 2022 CT - 11.1.2.2.1* -Electrical Deemed Potentially Unsafe by AHJ Where the AHJ determines that there is sufficient evidence that existing electrical wiring, fixtures, appliances, or equipment is potentially unsafe, the AHJ is authorized to require an evaluation of the existing electrical wiring, fixtures, appliances, or equipment, or portion thereof, by a qualified person.

Location: Electrical panel

Original Comment: Building department has, "tagged out" breakers that power the up blast fan due to excessive tripping. The fan/hood and electrical panel shall be evaluated and repaired by qualified technicians.





REINSPECTION DATE

07/02/2024

CONTACT SIGNATURE

Bobby Lee

Reason for not collecting a signature: NA

INSPECTOR SIGNATURE

ROGER THRALL Signed on: 06/25/2024 @ 16:08



QUESTIONS ABOUT YOUR INSPECTION?

ROGER THRALL rthrall@manchesterct.gov 8606473282

	FOO	d Esta	blishmeni	t Inspec	ction R	leport	Page	of _/
LHD MANCH-	ester		Inspection Report C	ontinuation Shee	t		te 10/3/20	24
Establishment 1	riyaki	Madne	W. Commission of the Commissio	Manch		— FINAL	constru	ction
			TEMPERATU					
Item/Location/F	Process	Temp	Item/Location	/Process	Temp	Item/Location	n/Process	Temp
not water	-prep	110F						
hot water-	H.S.	90F						
quat sanitio	iev	260 ppm						
2 door Fretz	er	-9F						
		OP	SERVATIONS AN	ID CODDEC	TIVE ACTIO	NC		
Violati	ons cited in this		corrected within the ti				8 8-406 11 of the	food code
item			corrected within the ti	THE HAITIES DEION	, or as stated i	11 300110113 0 400.11	x 0 -00.11 of the	1000 0000.
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discus	sed ste	am tai	ble option	is for the	ds Icove	113		
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thin	prahe 1	nerma			Almes			
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Person in Charge (Signature) , ,	ļ0	MARIN			D	Date (0 3)	24
Inspector (Signatur	re) J JA	1man	/ " "			-	Date 6/3/20	74
Josephalai	1 1	- W 1 W 1					0.00	<u> </u>

Risk Category: 3 Food Establ	lishm	nen	t In	spection	on Re	port Page	1 of Z_	
Establishment type Permanent Temporary Mobile Other					Date:	7/2/2024		
Establishment Andi's D1220		4eeth n	d Connec	ticut H	Time In_		2AM/PM	
Address 290 B Broad St.		DI	P	H)	LHD	Manch es ter		
Town/City Manchester	,				Pre-op			
Permit Holder And Heather		of Pu	blic He		Reinspe			
FOODBORNE ILLNESS RISK F. Risk factors are important practices or procedures identified as the most prevalent cont							liness or injuny	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if		5 5 00	CVIIII (IV)	compliance		1980 N 19	N/O=not observed	
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appro	opria	te box for Co	OS and/or	R COS=corrected on-site during inspection	R=repeat violation	
IN OUT N/A N/O Supervision	V	cos	R		JT N/A N/C		V COS R	
1 Person/Alternate Person in charge present,	Pf	0	0			Food separated and protected		
demonstrates knowledge and performs duties Certified Food Protection Manager for Classes 2,				16 5	00	Food-contact surfaces: cleaned & sanitize		
3, & 4	С	0	0	17 00 0		Proper disposition of returned, previously served, reconditioned, and unsafe food	POO	
Employee Health	-			10		Time/Temperature Control for Safety		
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	0		18 6 0		Proper cooking time and temperatures	P/Pf/C O O	
4 O Proper use of restriction and exclusion	P	0	0	20 0		Proper reheating procedures for hot holdi Proper cooling time and temperatures	ng POO	
Written procedures for responding to vomiting and	2000			21 0 0		Proper hot holding temperatures	P 0 0	
diarrheal events	Pf	0	0	22 00 9	00	Proper cold holding temperatures	POO	
Good Hygienic Practices				23 Ø C		Proper date marking and disposition	P/Pf O O	
6 O Proper eating, tasting, drinking, or tobacco products us 7 O No discharge from eyes, nose, and mouth		-		24 0 0		Time as a public health control: procedure	es P/Pf/C	
Preventing Contamination by Hands	_ C	0	0			and records		
8	P/Pf	0	0	25 0		Consumer Advisory Consumer advisory provided: raw/undercooked for	od Pf OO	
No bare hand contact with RTE food or a		rooser.		/		Highly Susceptible Population	00 111 0 0	
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0		Pasteurized foods used; prohibited foods not offer	ed P/C	
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0		Fo	ood/Color Additives and Toxic Substance	es	
Approved Source	_	, ,		27 0 0	0	Food additives: approved and properly us	ed POO	
11 V C Food obtained from approved source 12 C Food received at proper temperature	P/Pf/C			28 🐼 🔾		Toxic substances properly identified,	P/Pf/C O O	
13 Co Food received at proper temperature Food in good condition, safe, and unadulterated	P/Pf P/Pf	_				stored & used Senformance with Approved Procedures		
14 O Required records available: molluscan shellfish						Compliance with variance/specialized		
identification, parasite destruction	P/Pf/C	0	0	29 0	8	process/ROP criteria/HACCP Plan	P/Pf/C	
GO	OD RE	TAIL	. PR	ACTICES				
Good Retail Practices are preventative measures to Mark OUT if numbered item is not in compliance V=violation type Mark i								
Mark OUT if numbered item is not in compliance V=violation type Mark i OUT N/A N/O Safe Food and Water	n approp	cos		OUT OUT	/or R	COS=corrected on-site during inspection	R=repeat violation	
30 Pasteurized eggs used where required	Р	0			use utens	Proper Use of Utensils sils: properly stored	V COS R	
31 O Water and ice from approved source	P/Pf/C	0	0			ipment/linens: properly stored, dried, & handled		
32 O Variance obtained for specialized processing methods	Pf	0	0			ingle-service articles: properly stored & used	P/C O O	
Food Temperature Control		, ,		46 O GI	oves used	ALC PLANTS OF THE PARTY OF THE	C O O	
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0		0		Utensils and Equipment		
34 O Plant food properly cooked for hot holding	Pf		0	14/11(1/1)		on-food contact surfaces cleanable, signed, constructed, and used	P/Pf/C)00	
35 O O Approved thawing methods used		0		W		ng facilities: installed, maintained and used	. 4	
36 Thermometers provided and accurate	Pf/C	0	0			ents, sanitizers, and test strips available	' Pf/C O O	
Food Identification						ontact surfaces clean	000	
37 Food properly labeled; original container	P(C	0	0	X		Physical Facilities		
Prevention of Food Contamination		F - T		(50) 🛇 Ho	t and cold	d water available; adequate pressure	(Pf) (O)	
38 Insects, rodents, and animals not present 39 Contamination prevented during food preparation, storage & display		0				stalled; proper backflow devices	P/Pf/C O O	
40 Personal cleanliness	P/Pf/C	0				d waste water properly disposed ies: properly constructed, supplied, & clear	P/Pf/C O O	
41 Wiping cloths: properly used and stored	C	0				I refuse properly disposed; facilities maintained		
42 Washing fruits and vegetables	P/Pf/C					cilities installed, maintained, and clean	P/Pf(C) O	
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable	٠.	56 Ad	equate ve	entilation and lighting; designated areas us per latex gloves not used per CGS §19a-36	ed COO	
Person in Charge (Signature) Walled as Mate 7/2	1254	7		Violations Priority Ite	docume	ented Date corrections du	re #	
Person in Charge (Printed) Heather Crosselin	101				undation l	Item Violations 7/12/2024	3	
Inspector (Signature) A. SIMOUN Date 7/7	111			Risk Facto	r/Public F	lealth Intervention Violations	5	
Good Retail Practices Violations								
Appeal: The owner or operator of a food establishment agaringed by the	nio a-d			Requires	Keinspec	ction - check box if you intend to reinspe	ct	
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Directo	or of I	corre Heal	th, not late	pection v	rolation identified by the food inspector of	r to hold, destroy,	

Food Establishment Inspection Report Page Z of Z

	<u> </u>	u Esta	Diisnine	nt inspec	JUOII F	report	0				
LHD MO	inchester		Inspection Repo	rt Continuation Shee	t		Date 7/2/202	14			
		220	Tow	m <u>manche</u>	ster		1000 1000				
		8	The state of the s	TURE OBSERV	ATIONS						
	/Location/Process	Temp		tion/Process	Temp	TOTAL TRANSPORT OF THE PARTY HAVE	ation/Process	Temp			
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princa	pork	39F	Ham		39F	sausage	J	39F			
Ham	,	40F	Chicken		39F	Chelle	<u>, </u>	40F			
salar	Υ[]	405	511 QQ +	omato	40F	Shrim	P	39F			
7 ANDI	FYERZEY	OF-	internal	ch ex arilled	167F	restroor	n handwash	90F			
chest	Free7 CV	NF	1111 011 10(1)	griva griva	101	handw		87F			
G. F. S.	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					3 bay		liof			
	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	12				v, or as stated	in sections 6-400	. 11 & 6-406. 11 OI the I	ood code.			
	CFPM: Andi			2 37							
. [15p Chicken wings not protected in wic										
15 p	15p eggs (shelled) above tomators in wic										
55c	55c clutter in room next to Chest Freezer-remove excess equipment/										
	equipment not being used										
50pF											
15p											
470	nandies dama	ged of	2 door fr	PEZER							
37C	uniabeled sa	Veeze k	ottles alo	ing cooklis	16						
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Inspector	(Signature)	TUVICA	1/				Date 7/2/202	14			

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		Food Estab	IISIIII	iem	LIII	specti	on Re	eport /	Page 1 o	T	
		ype: Permanent Temporary Mobile Other	T				Date:	7/15/24			
Estab	lishment.	Anthonys Jamaican Kest Le West Middle Tok		+sering	Connec	Con Heeling	Time InAM/PM Time OutAM/PM				
Addre	ess 34	Le West Middle Tok			9	H)	LHD	Manch	ester		
Town		lanchester	1				Purpos	se of Inspection:	Routine Pre	e-op	
Permi	it Holder	P	Co	onnecticu of Pub		partment paith					
		FOODBORNE ILLNESS RISK F									
M		are important practices or procedures identified as the most prevalent con- ed compliance status (IN, OUT, N/A, N/O) for each numbered it		130000					The second secon		
		Pf=Priority foundation item C=Core item V=violation type				compliance		not in compliance		D=not observed R=repeat violation	
	OUT N/A N		V		R		JT N/A N		on from Contamination	V COS R	
10	00	Person/Alternate Person in charge present,	Pf	0		15 🔾 🚳		Food separated		RC)OO	
		demonstrates knowledge and performs duties	F-1		\subseteq	16 0 0			rfaces: cleaned & sanitized	P/Pf/C O O	
2 0	00	Certified Food Protection Manager for Classes 2, 3, & 4	С	0	\circ	17 0 0			on of returned, previously tioned, and unsafe food	POO	
		Employee Health						Time/Temperat	ture Control for Safety		
3 0	0	Management, food employee and conditional employee;	P/Pf	0		18 0 0		> Proper cooking	time and temperatures	P/Pf/C O O	
4 0	100000	knowledge, responsibilities and reporting Proper use of restriction and exclusion	P		0	19 0 0		Proper reheating	g procedures for hot holding ime and temperatures	P 0 0	
	Total State of the last of the	Written procedures for responding to vomiting and				21 0 @		Proper hot holdi	ng temperatures	POO	
5 0	0	diarrheal events	Pf	0		22 0 0	000	Proper cold hold	ling temperatures	POO	
		Good Hygienic Practices		TIT	iii.	23 🔾 🤇			rking and disposition	P/Pf O O	
6 0	0	Proper eating, tasting, drinking, or tobacco products us No discharge from eyes, nose, and mouth	e P/C			24 0 0		Time as a public and records	health control: procedures	P/Pf/C O O	
, 0		Preventing Contamination by Hands	0		-				mer Advisory		
8 🔾	0	Hands clean and properly washed	P/Pf	0	0	25 0 0	00		provided: raw/undercooked food	Pf OO	
9 0		No bare hand contact with RTE food or a	P/Pf/C	0				Highly Susc	ceptible Population		
10 0		pre-approved alternative procedure properly followed	No. of Acres	2.50		26 0 0			used; prohibited foods not offered	P/C 0 0	
1010		Adequate handwashing sinks, properly supplied/accessible Approved Source	Pf/C	0	\subseteq	2700			ves and Toxic Substances approved and properly used	POO	
110	0	Food obtained from approved source	P/Pf/C	0	5			Toxic substance	es properly identified,		
12 🔾		Food received at proper temperature		0		28 0 0		stored & used	s properly identified,	P/Pf/C O	
13 🔾	0	Food in good condition, safe, and unadulterated	P/Pf	0	0				th Approved Procedures		
14 0	000	Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0		29 🔾			variance/specialized	P/Pf/C	
			OD RE	TAIL	PR	ACTICES		process/ROP cr	iteria/HACCP Plan		
		Good Retail Practices are preventative measures						emicals, and physical	objects into foods.		
	1					for COS and				R=repeat violation	
	T N/A N/O	Safe Food and Water	V		R	OUT		Proper Us	e of Utensils	V COS R	
31 (CONTRACT BANKS AND	steurized eggs used where required ater and ice from approved source	P	0		43 O In-	use uter	nsils: properly store	ed	C O O	
32 🔾		riance obtained for specialized processing methods	P/Pf/C Pf	_	3	45 O Sir	ansiis/eq	uipmenviinens: prop	erly stored, dried, & handled s: properly stored & used	Pf/C O O	
		Food Temperature Control		1-1				ed properly	or property elerou a used	c 00	
33 🔾	Maria Carlos Company	oper cooling methods used; adequate equipment for	Pf/C	0					and Equipment		
	ter	nperature control ant food properly cooked for hot holding							urfaces cleanable,	P/Pf/C O O	
		proved thawing methods used	Pf/C	00		10/		esigned, constructe	ed, and used led, maintained and used;		
36		ermometers provided and accurate	Pf/C	0	5				and test strips available	Pf/C O O	
		Food Identification						contact surfaces cl		(0)00	
37 0	Food prope	erly labeled; original container	Pf/C	0					cal Facilities		
38	Insecte re	Prevention of Food Contamination dents, and animals not present	Dire						adequate pressure	Pf 0 0	
		ion prevented during food preparation, storage & display	P/Pf/C	000				installed; proper ba nd waste water pro		P/Pf/C O O	
40 🔾	Personal c	leanliness	Pf/C						tructed, supplied, & clean	Pf/C 0 0	
		ths: properly used and stored	С	0		54 🔾 Ga	rbage ar	nd refuse properly dis	sposed; facilities maintained	C_00	
42 0	Washing fr	ruits and vegetables	P/Pf/C	0					aintained, and clean	P/P(C)00	
Perm	nit Holder sha	Il notify customers that a copy of the most recent inspection rep	ort is ava	ilable.		56 O Ad	equate	ventilation and ligh	ting; designated areas used ot used per CGS §19a-36f		
Dorce	n in Charac	18:00	= >1	L		Violations	docum	nented	Date expections due	#	
rerso	ii iii Cnarge	(Signature) Date	- Jy	A TOOL	-	Priority Ite			(05)	1	
Perso	n in Charge	(Printed) HTD/V/-HIMIV(1)				Core Item		n Item Violations	ASAP/90days	PL	
			=1-	1		Risk Facto	r/Public	Health Intervention	n Violations ()	2	
inspec	ctor (Signat	ure) / Date 7/	15/2	4					ervention Violations		
Insped	ctor (Printed	Denise Payne		.T.				ices Violations	if you intend to reinspect	2	
		ner or operator of a food establishment aggrieved by t	his orde	er to o	orre	ect any ins	pection	violation identified	by the food inspector or to	hold destroy	
	or	dispose of unsafe food, may appeal such order to the	Directo	or of H	deal	th not late	r than f	orty-eight hours a	fter issuance of such order	o noid, desiroy,	

Foo	d Esta	<u>blishment Ins</u>	pection I	Report Page 2	of <u></u>
LHD Manchester		Inspection Report Continuatio	n Sheet	/	5/24
Establishment Arthonys.	Janai	can Kestrown Man	hester		,
θ		TEMPERATURE OBS			
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Fried Chicken	165=	Botter	401	Chlorne Sasit	loupper
Beel	1515	Beef	41 F	+cot strips on:	< He
White Rice	153F	130		7001 311133 611	3110
Chicles Stew		Fully Cooked		Thermometer	1
Strak Sew	160F	The state of the s	79		A 111E
Oxtail	1486	Fried Chicker		Hand sinkhofw	alu 111°
		Hord Pie	197 F		
Chick handle	158F				
	0.0	CEDIATIONS AND COD	DECTRIE ACTION	2012	
Number	report must be		s below, or as stated	in sections 8-405.11 & 8-406.11 of t	he food code.
49C Gasket on 2	door re	achin toppo			
550 Deiling files	ONES S	service counter	Leak/SI	tringed Must he	e immlaced
		1.1.	100		-1901-
with w				~	
15 c Containers/	P0-13	stored on Yloc	or in Kite	her & Discourse	ed a
	r			7	
Tapleo	i court	on wheely.	PL S		
21 Product (oxt	ail) a	t steam table	->10ate	evapole las	oxtail
@ 111F	Dal.	-1 , , -F Ja.	- 6 - 656		1 -
===	- eve	00 TO 165 TIVE	nanea	steam tables	2 E 10 25
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Shelvesi	n Kitch	00			89
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and puti	oto he	ener to chill	boun to	417 belone pu	this in
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	1				
Person in Charge (Signature)	M	<u> </u>		Date # 557	124
Inspector (Signature)	ania.	Youkus-		Data 7/15	724
	11000	1009100		Date / / /)/	-1

Risk Category: 3 Food Establ	ishn	nen	t ir	nspect	ion Repo	ort	Page	1 of <u>2</u>		
Establishment type Permanent Temporary Mobile Other					Date: T	119/20	24			
Establishment Army I NWV (Uh		*Esbir	n Conne	cticur Health	Time In_	10 A	M/PM Time Out_	[AM/PM		
Address 1090 main street		DĨ	P	H)	LHD M	rancr	rester			
Town/City Manchester	J				Purpose of Inspection: Poutine Pre-op					
Permit Holder Terri K. (ONSITE)		of Pu	ıblic H		Reinspecti		Other			
FOODBORNE ILLNESS RISK FA										
Risk factors are important practices or procedures identified as the most prevalent control. Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				compliance		n compliance	Market and the second s	N/O=not observed		
P=Priority item Pf=Priority foundation item C=Core item V=violation type							ed on-site during inspection	The second secon		
IN OUT N/A N/O Supervision	V	cos			OUT N/A N/O		on from Contamination	V COS R		
1 Person/Alternate Person in charge present,	Pf			15 00		ood separated		P/C 0 0		
demonstrates knowledge and performs duties	FI	0		16)0	🏠 🔾 Fo	ood-contact su	rfaces: cleaned & sanitize	ed F(Pf)C O		
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17			on of returned, previously ioned, and unsafe food	POO		
Employee Health		BIL		ERE			ure Control for Safety			
Management, food employee and conditional employee;	P/Pf	fO	0		OOP	roper cooking t	time and temperatures	P/Pf/C O O		
knowledge, responsibilities and reporting				19 0		roper reheating	procedures for hot holdi			
Written procedures for responding to vemiting and	P	0	0	20 0 0		reper cooling ti	me and temperatures	P 0 0		
diarrheal events	Pf	0	0				ing temperatures	P O O		
Good Hygienic Practices							king and disposition	P/Pf 0 0		
6 O Proper eating, tasting, drinking, or tobacco products use		_		24 🔾	Ti	me as a public	health control: procedure	P/Pf/C O O		
7 O No discharge from eyes, nose, and mouth Preventing Contamination by Hands	С	0	0			nd records		PIPIIC O O		
8 O Hands clean and properly washed	D/Df	0		25	0000		mer Advisory provided: raw/undercooked fo	u INTOIO		
No bare hand contact with RTE food or a			00044	25			eptible Population	od Pf OO		
pre-approved alternative procedure properly followed	P/Pf/C		\circ	26	O Pa		sed; prohibited foods not offer	ed P/C O O		
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0		F6od.	/Color Additiv	es and Toxic Substance	es		
Approved Source		T = 1		27 🔾			approved and properly us	ed POO		
11 Food obtained from approved source 12 Food received at proper temperature	P/Pf/C	0		28			s properly identified,	P/Pf/C O		
13 Food in good condition, safe, and unadulterated		0		Carrier Cons		ored & used	h Approved Procedures			
Required records available: molluscan shellfish	P/Pf/C		0	29 0			variance/specialized	SANGER SON CONTRACTOR		
identification, parasite destruction				P==22	pr		teria/HACCP Plan	P/Pf/C O O		
Good Retail Practices are preventative measures to				ACTICES		la and physical	abianta inta fanda			
				for COS an			n-site during inspection	R=repeat violation		
OUT N/A N/O Safe Food and Water	V	cos		OUT			of Utensils	V COS R		
30 Pasteurized eggs used where required	Р	0		43 O In	-use utensils:	properly store	:d	000		
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C	_	0	44 O U	tensils/equipme	ent/linens: prope	erly stored, dried, & handled			
Food Temperature Control	Pf	0	$\frac{\circ}{}$	1000	**************************************		s: properly stored & used	P/C 0 0		
Proper cooling methods used; adequate equipment for	7,,,,	L		40 0	loves used pr		and Equipment	c O O		
temperature control	Pf/C	0	0	47 O F	ood and non-f		urfaces cleanable,			
34 O Plant food properly cooked for hot holding	Pf			pi		ned, constructe		P/Pf/C O		
35 Approved thawing methods used 36 Thermometers provided and accurate	Pf/C	0	읙				ed, maintained and used	Pf/C O O		
Food Identification	FI/C	191	\subseteq	49 W N	on-food conta	s, sanitizers, ai act surfaces cle	nd test strips available			
37 C Food properly labeled; original container	Pf/C	0	0	CO XIII	on lood conta		cal Facilities			
Prevention of Food Contamination				50 O H	ot and cold wa	ater available;	adequate pressure	Pf OO		
38 Insects, rodents, and animals not present		0		51 O P	lumbing instal	lled; proper ba	ckflow devices	P/Pf/C O		
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness	P/Pf/C	0				aste water prop		P/Pf/C O O		
41 Wiping cloths: properly used and stored	C	0		54 O G	ollet facilities:	properly const	ructed, supplied, & clean posed; facilities maintained	Pf/C		
40 0 144 44 4 4 4 4 4 4 4 4 4 4 4 4 4 4	P/Pf/C						aintained, and clean	P/PCOO		
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable.		56 O A	dequate ventil	lation and light	ing; designated areas use	ed COO		
0 1 7	1	4 .			atural rubber l s documente		ot used per CGS §19a-36			
Person in Charge (Signature) 1911 KUSU Date 19	190	PB		Priority Ite	em Violations		Date corrections du	e #		
Person in Charge (Printed) 12001 4295/27 7110	sli	02	4		oundation Item Violations	n Violations	7/29/2024			
Inspector (Signature) L. STUMAN Date 7/19/	200	14	1	Risk Fact	or/Public Heal	Ith Intervention	Violations	4		
anicala Explandi	202	-1	\dashv		isk Factor/Put ail Practices \		ervention Violations			
Appeals The appear of a god acts light and a residual to the				Requires	Reinspection	n - check box	if you intend to reinspec	t		
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	us orde Directo	er to do	corre Heal	ect any ins th, not late	spection viola er than fortv-	ation identified eight hours af	by the food inspector of	r to hold, destroy,		

	Foo	d Estab	olishment Ins	spection F	Report	Page 2	of _2_
LHD MAY	nchester		Inspection Report Continuati			e7/19/20	74
	g 2	NVV Club	Town MAY	rhester			
	<u> </u>		TEMPERATURE OB	<u> </u>		S)=6 - 32 (S) (S)	
Item/	Location/Process	Temp	Item/Location/Process	s Temp	Item/Location	/Process	Temp
WIC		39 F			nanousinh	H.W.	851
cney	T	38F			11 02 11 01 1 A	,	1100
LIGHT OF O		Dor			Hot water		HOF
YVA AN	n v	OF			75 Day		
Freez		01			hot water	mens	965
					1101 0000101	Hick	
	Violations cited in this		ERVATIONS AND COL corrected within the time fram			8-406 11 of the	food code
Item Number				oo bolow, or do oldloo		0 400.11 01 110	1000 0000.
49C	exterior of	Frvers Y	not clean				
496	Fan cover 11	O ILLIC	natclean				
IBPE	interior to	n at ita	Machine n	otclean			
-	DIVIDED ON AL	0 1000	VI 00.00 000-10 1.00 00 10-10-				
49C	-,	plastic	T .	eun in b			
55C	missing con	1e base 1	tile in mens	restroom	1		
	Tale Control of the C						
	overall ver	, clean i	and organize	d			
	no cooking	at tin	ne of visit				
	test strips	and th	and organize he of visit hermometers	available	2		
	,						

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		, , , ,	ı				
Person in	Charge (Signature)	Ley K	eester		Da	ate 7 196	Y604
Inspector	(Signature) 🏒 . 📈	movy			Da	ate 7 [9]]	1024

Risk Category: 3 Food Establ	ishm	nen	t Ir	spec	tion Re _l	port	Page 1 of	2					
Establishment type: Permanent Temporary Mobile Other					Date:	Date: 7-23-24							
Establishment Actisinal Burger Company	usering connecticus Hearing				Time In_	1 3 2:25 7							
Address 1436 Pleasant Valley Rd.			P	H)	LHD Manchester								
Town/City Manchester	J				Purpose	Purpose of Inspection: Routine Pre-op							
Permit Holder	Co		ut De blic H	partment ealth									
FOODBORNE ILLNESS RISK FA													
Risk factors are important practices or procedures identified as the most prevalent contribution of the factors are important practices or procedures identified as the most prevalent contribution of the factors are important practices or procedures identified as the most prevalent contribution of the factors are important practices or procedures identified as the most prevalent contribution of the factors are important practices or procedures identified as the most prevalent contribution of the factors are important practices or procedures identified as the most prevalent contribution of the factors are important practices or procedures identified as the most prevalent contribution of the factors are important practices or procedures identified as the most prevalent contribution of the factors are important practices or procedures identified as the most prevalent contribution of the factors are important practices or procedures identified as the most prevalent contribution of the factors are important practices or procedures identified as the most prevalent practices are included in the factors are included in the factors are included in the factor of the fact	LIGHT CHEST PRINTED TO THE	11.00	72	- A - A - B - C - C - C - C - C - C - C - C - C			And the second second						
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it P=Priority item Pf=Priority foundation item C=Core item V=violation type				complianc		ot in compliance N/A=not ap R COS=corrected on-site duri		=not obse					
IN ØUT N/A N/O Supervision	V	cos	-		OUT N/A N/O				cos R				
Person/Alternate Person in charge present						Food separated and protecte			00				
demonstrates knowledge and performs duties	Pf	0	\circ		* O	Food-contact surfaces: clean		P/Pf/C					
Certified Food Protection Manager for Classes 2,	С	0	0	17	0	Proper disposition of returned	d, previously	4	00				
3, & 4 Employee Health	4					served, reconditioned, and ur Time/Temperature Control							
Management food ampleyes and conditional ampleyes				18	000	Proper cooking time and tem		P/Pf/C					
knowledge, responsibilities and reporting	P/Pf	0	이	19 🔾	000	Proper reheating procedures	for hot holding		00				
4 Proper use of restriction and exclusion	Р	0	0	20 🔾	000	Proper cooling time and temp	peratures		00				
Written procedures for responding to vomiting and	Pf	0		21	000	Proper hot holding temperatu	ıres	P	00				
diarrheal events	1		\subseteq	22		Proper cold holding temperat			00				
Good Hygienic Practices 6 O Proper eating, tasting, drinking, or tobacco products us	- 00			23	000	Proper date marking and disp		P/Pf o	00				
6 Proper eating, tasting, drinking, or tobacco products use 7 No discharge from eyes, nose, and mouth	e P/C		읭	24 🔾	000	Time as a public health contr	ol: procedures	P/Pf/C					
Preventing Contamination by Hands			-			and records Consumer Advisor							
8 O Hands clean and properly washed	P/Pf	0	0	25	00	Consumer advisory provided: raw/u		Pf	00				
No have hand contact with RTE food or a		700.00	2000		1	Highly Susceptible Popu		1.1					
pre-approved alternative procedure properly followed	P/Pf/C	0	9	26	00	Pasteurized foods used; prohibited		P/C	00				
Adequate handwashing sinks, properly supplied/accessible	PF/C	0	0		Fo	od/Color Additives and Toxi	c Substances		W. L.				
Approved Source				27	00	Food additives: approved and		P	00				
11 O Food obtained from approved source	P/Pf/C			28	00	Toxic substances properly ide	entified,	P/Pf/C					
12 Food received at proper temperature 13 Food in good condition, safe, and unadulterated		0				stored & used							
Demind accorded that the state of the state			\neg		10.00	Conformance with Approved Compliance with variance/spe							
14 O Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	9	29	00	process/ROP criteria/HACCP		P/Pf/C					
				RACTICE									
Good Retail Practices are preventative measures to						icals, and physical objects into fo	ods.						
		_	-	for COS a	nd/or R	COS=corrected on-site during in		=repeat v					
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	V P	cos		OUT		Proper Use of Utensils sils: properly stored			COS R				
31 Water and ice from approved source	P/Pf/C	-				pment/linens: properly stored, dri	ind 2 handlad	-	00				
32 O Variance obtained for specialized processing methods	Pf	-	0	45 6	Single-use/si	ngle-service articles: properly sto	ed, & nanded		50				
Food Temperature Control					Gloves used				00				
Proper cooling methods used; adequate equipment for	Pf/C					Utensils and Equipm	ient						
lemperature control	ES MAGAI		0	14/10		on-food contact surfaces clean	iable,	P/Pf/C	00				
34 O Plant food properly cooked for hot holding	Pf	0				signed, constructed, and used		17110					
35 O Approved thawing methods used 36 Thermometers provided and accurate		0		148 (ng facilities: installed, maintain	200 CO	Pf/C	00				
Food Identification	PI/C	0	=			ents, sanitizers, and test strips entact surfaces clean	available	(C)					
Food properly labeled; original container	Pf	0	0	-3/2	NON-1000 CO	Physical Facilities	o e e e e e e e e e e e e e e e e e e e		00				
Prevention of Food Contamination	- 6			50	Hot and cold	d water available; adequate pre		Pf (00				
38 O Insects, rodents, and animals not present	Pf/C	0				stalled; proper backflow device		P/Pf/C					
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	0			waste water properly dispose	ed	P/Pf/C					
40 Personal cleanliness	Pf/C	-	_			es: properly constructed, supp		-	00				
41 Wiping cloths: properly used and stored 42 Washing fruits and vegetables	P/Pf/C	0				refuse properly disposed; facilitie							
	10.000					ilities installed, maintained, an entilation and lighting; designate		P/Pf/C					
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable				per latex gloves not used per C		100	00				
Person in Charge (Signature) coll Db Date 7-2	13-	2	1	The second second second	ns docume		rections due		#				
			_		tem Violatio Foundation I		3-24		1				
Person in Charge (Printed) JOEL D. Blow				Core Ite	m Violations		23-24						
10-7- 71	77	1	1	Risk Fac	ctor/Public F	lealth Intervention Violations		- 3	4				
								Repeat Risk Factor/Public Health Intervention Violations					
Inspector (Printed) Jose Ramicez						es Violations	d to rainart	+	5				
Appeal: The owner or operator of a food establishment aggrieved by the	nie orde	er to	corr	ect anvis	s Reinspec	ction - check box if you intend	increases as t	hold d	notes:				
or dispose of unsafe food, may appeal such order to the	Directo	or of	Hea	Ith, not la	ter than for	tv-eight hours after issuance	of such order	riold, de	estroy,				

Food Esta	blishment Inspec	ction R	eport Page_	2 of 2
LHD Manchester	Inspection Report Continuation Sheet		Date	123/24
Establishment Artisinal Burger C	omany Town Manches	ter	7	1
	TEMPERATURE OBSERVA			
Item/Location/Process Temp	Item/Location/Process	Temp	Item/Location/Process	s Temp
WIC Crab cakes 39F	Cook line Sliced tomatos	40F	Hand sink Back li	me lloF
1 Cheese Sauce 39F	Pepperoni	Al	Custome BR sink	The state of the s
Salmon bucaer 39F	(aw chicken	36F	COS TOTIC BY STILL	101
burger patty 39F	Canch	38F		
Sliced cheese 39F	0 1 1	0		
111		40F		
	Hot Hold Chasse Sause	140F		
Hot hold bisque 190 F	SERVATIONS AND CORRECT	IVE ACTIO	VIC.	Temp▶Rite. §
Violations cited in this report must be	corrected within the time frames below,			1 of Empleado
Number	e describbasiske bester – delekt de oostatus kontribi – talliintriigkat – kontribini 4 kilopes a digorracionaktii	· 00 000 00000000000000000000000000000		PASS WHEN BLUE
				ES ACEPTABLE CLIANDO LA BARRA AZUL CAMBIA A COLOR NARANIA
				160°F/71°C
130 Scar hall 1	1. /1 1.			
A3C Scoop hardle burrie		1 1		
3 10 UM abeled Squeez b	pottles & SnakeSat	Cookli	ne	
	of ice Machine un		1 1 -	
49c Wet nesting of 5.	to cage containers on	areen h	pire Shelvina	
16PK Son dispenser or	reeles unclean at a	Jun lin		
10PF expo ine hand Six	1 sed as dump	SINK		
16PF interior of glass cu			line is les	****
16 1 111101 01 glass a	DIEL CHE DAL ONCIEAN	Stant	sing water	
45C Single use containe	cosed as scope in	floor	DY Soda Syrup	>5
				8
.0 1				
Note Discussed increasing	a cleanina Frequence	cu of f	contact su	Gaces.
	3	7		1,0000
W. C				
Note monthly pest contr	ol. No current pest	155xe	5.	
	1.100 000.100.1			
.2.1		4		
Note Good glove use &	hand washing a	bsecue	2	
1000	VIVE IIII			
17 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Note Test strips & there	nometer available			
	28 2		-	122/20
Person in Charge (Signature)			Date	100/2/
Inspector (Signature)			Date 7/	23/24

Risk Category: 3 Food Estab	lishn	nen	t Ir	nspect	ion	Rei	port	Page 1	1 of <u>Z</u>
Establishment type: Permanent Temporary Mobile Other					T	te: (j)	1 . 1		
Establishment Balls Fresh Gill		a servi	onne	ectican Health	CTATES.	ne In	T	MPM Time Out_/	1:30 AMPM
Address 1062 Tolland Toke			D	H	LHI	D ,	manch		
Town/City Manchester				Purpose of Inspection: Routine Pre-op					Pre-op
Permit Holder		Connecticut Department of Public Health Reinspection Other							
FOODBORNE ILLNESS RISK F	ACTO	RS.	AN	D PUBL	IC H	IEAL	TH INTERVE	ENTIONS	SCHOOL STORY
Risk factors are important practices or procedures identified as the most prevalent con- Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered i		1000	52-274			8672			
P=Priority item Pf=Priority foundation item C=Core item V=violation type				compliance			ot in compliance	N/A=not applicable I ted on-site during inspection	N/O=not observed
IN OUT N/A N/O Supervision	V	cos	and the latest and th			I/A N/O		on from Contamination	R=repeat violation
Person/Alternate Person in charge present							Food separated		PIC O O
demonstrates knowledge and performs duties	Pf	0	0				Food-contact su	urfaces: cleaned & sanitize	
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 00	5			on of returned, previously tioned, and unsafe food	P 0 0
Employee Health					11/		Tjme/Temperat	ture Control for Safety	
3 Management, food employee and conditional employee;	P/Pf	0			0	0	Proper cooking	time and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting	St 35520			19 🗷		00	Proper reheating	g procedures for hot holding	
Proper use of restriction and exclusion Written procedures for responding to vomiting and	P	0	0	20 0			Proper cooling t	time and temperatures	POO
5 Ø diarrheal events	Pf	0	0	63	X	30	Proper not hold	ing temperatures ding temperatures	200
Good Hygienic Practices	_	4	-				Proper date ma	rking and disposition	(P) X O
6 O Preper eating, tasting, drinking, or tobacco products us	e P/C	0	0					c health control: procedure	
7 O No discharge from eyes, nose, and mouth	С	Ŏ		24 0	0	90	and records	o nealth control. procedure	P/Pf/C O
Preventing Contamination by Hands						/	Consu	ımer Advisory	
8 Hands clean and properly washed	P/Pf	0	0	25 🔾	$\supset [$	5	Consumer advisory	provided: raw/undercooked for	od Pf OO
No bare hand contact with RTE food or a	P/Pf/C	0	0	-		/	Highly Sus	ceptible Population	
pre-approved alternative procedure properly followed				26 0	<u>ار</u>			used; prohibited foods not offere	
Adequate handwashing sinks, properly supplied/accessible Approved Source	PPC	\mathcal{L}	\cup	07	~ Ta			ves and Toxic Substance	
11 Feod obtained from approved source	P/Pf/C			27 0	2 6	5		approved and properly us	ed POO
12 O Food received at proper temperature	P/Pf			28	$\supset C $		stored & used	es properly identified,	P/Pf/C O O
13 6 C Food in good condition, safe, and unadulterated	P/Pf	_	0	-		C		th Approved Procedures	
Required records available: molluscan shellfish	P/Pf/C	0		29 0	56	/		n variance/specialized	
identification, parasite destruction	parone exces		332				process/ROP cr	iteria/HACCP Plan	P/Pf/C O O
Good Retail Practices are preventative measures	OD RE	IAIL	. PK	RACTICES	5				
Good Retail Practices are preventative measures t Mark OUT if numbered item is not in compliance V=violation type Mark it				for COS an			The second secon		
OUT N/A N/O Safe Food and Water	v	cos	-	OUT	u/oi r			on-site during inspection e of Utensils	R=repeat violation
30 Pasteurized eggs used where required	P	0			1-USE	utens	ils: properly store		COO
31 Water and ice from approved source	P/Pf/C	0	0	44 O U	tensil	s/equip	ment/linens: prop	erly stored, dried, & handled	Pf/C O O
32 O Variance obtained for specialized processing methods	Pf	0	0	(45) X Si	ingle-	use/sir	ngle-service article	es: properly stored & used	PC 00
Food Temperature Control	The state of			46 O G	loves	sused			800
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0		M. 15			Utensils	and Equipment	
34 O Plant food properly cooked for hot holding	Pf							urfaces cleanable,	P/P%C)00
35 O Approved thawing methods used		0					igned, constructe	ed, and used lled, maintained and used;	
36 C Thermometers provided and accurate		0		48 O cl	eanir	าต ลตค	ents sanitizers a	ined, maintained and used, and test strips available	Pf/C O
Food Identification				49 X N	on-fo	od co	ntact surfaces cl	ean	000
37 Food properly labeled; original container	Pf/C	0	0	0			Physi	ical Facilities	911
Prevention of Food Contamination				50 O H	ot an	d cold	water available;	adequate pressure	Pf O O
38 Insects, rodents, and animals not present		0					stalled; proper ba		P/Pf/C O O
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness	P/Pf/C			52 O S	ewag	e and	waste water pro	perly disposed	P/Pf/C O O
41 Wiping cloths: properly used and stored	C	00		54 0 6	ollet I	acilitie	es: properly cons	tructed, supplied, & clean sposed; facilities maintained	Pf/C O O
42 Washing fruits and vegetables	P/Pf/C			55 O P	hvsic	al faci	lities installed m	sposed, racilities maintained naintained, and clean	C O O
Permit Holder shall notify customers that a copy of the most recent inspection repo	217			56 O A	dequa	ate ve	ntilation and ligh	ting; designated areas use	ed C O O
1 10		_		Violation				ot used per CGS §19a-36f	
Person in Charge (Signature)	28/	24		Priority Ite				Date corrections due	e # Z
1 4.1.		_					tem Violations		
Person in Charge (Printed)				Core Item	Viola	ations		9/28/24	5
Inspector (Signature) L. 27 MOW Date 6/28	ITA			Risk Fact	or/Pu	blic H	ealth Intervention	n Violations	5 3
ALLICO CONTROLL	121			Good Ret	ail Pr	actice	S Violations	ervention Violations	4
Inspector (Printed)				Requires	Rein	spec	tion - check hox	if you intend to reinspec	+
Appeal: The owner or operator of a food establishment aggrieved by the	his orde	er to	corre	ect any ins	spect	ion vi	plation identified	by the food inspector or	to hold destroy
or dispose of unsafe food, may appeal such order to the	Directo	or of h	Heal	th. not late	er the	an fort	v-eight hours at	fter issuance of such ord	or

Food Establishment Inspection Report Page 2 of 2

		<u> </u>	tanannian in alaa	96.0	40 00.4	
LHD MA	nchester		Inspection Report Continuation Shee	et	Date 6/28/2	024
Establishr	ment Balas Fre	sh bril	1 Town Manche	ster		
Engineer of			TEMPERATURE OBSERV	ATIONS		
Item	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
3 1 1 N V	Freezer.	-7 F	COOK Frontline : SOUNCEU		handwash sink	975
601111	ane cookline	37F	pico de gallo	40F	110110100001	1105
		39F			3 bay Fink	110,
rawsi			chicken	40F	sani+izer	
chich	en wing	40F	Shrimp	40F	Control of the Control	4 =
CUTT	omatu "	41F	140		tiot holding	179F
raw	stella	39F	2 door cold prep		Steak	168F
3 d 00 1	Freezer	2F	corn saica	39F	queso on stove top	179F
3 door	Freezev	2F	DICO	37 F	1	
		OE	SERVATIONS AND CORREC			
Item Number	Violations cited in this	report must b	e corrected within the time frames below	v, or as stated	in sections 8-405.11 & 8-406.11 of the f	ood code.
49C	interior or a	2 01 0010	TV(1.0.2.0.10.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	100 0.1	1.011440	
			Freezer along cooki			13-20
15 p 10 c	notrash at 1		tendere in 3 door Fr	fica 1	101 projectica	
				l Class W	10 10 7 dan 1-01 00d	141
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22 p			ng atroom tempera	TURE UT	60' - VOIUITAYIIY	
1-	discarded b					
47 C	non-commer	cialm	ucrowave above prep) fable		
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			torganized			
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	test strips a	vailab	U.			
	food thermo					
	good datt n	narkir	ny of food product			
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	,					
	email Lara	ndy©	manchesterct.	gov i	with corrective	
	actions to	book-ak	nove violations	,		
		AA	A		<i>I</i>	
Person in	Charge (Signature)	HOLV			Date 6/2 8	/24
Inspector	(Signature) L.	andly			Date 6/28/2	1

Risk Category: Z Food Establ	ishn	nen	t In	spec	tion	Rep	oort	Page 1 c	of <u>2</u>
Establishment type: Permanent Temporary Mobile Other					- Date	: 7/	15/2024		
Establishment Barnes + Noble Starbucks		+Berrine	Connec	cticut Health	Time	e In_	11:80 AMP	M Time Out 12	00 AMPM
Address 270 BUCK and Hills Dr. # 1074			D	H)	LHD	1	nanchest	tr	
Town/City Manchester	<u> </u>				Purp	oose	of Inspection:	Routine Pre	- ор
Permit Holder	Co	onnectic of Pul	ut Dep blic Ho	partment ealth	Rein	spec	tion Oth	ner	
FOODBORNE ILLNESS RISK FA									
Risk factors are important practices or procedures identified as the most prevalent contribution. Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				tborne illne. complian					oss or injury. O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type									R=repeat violation
IN OUT N/A N/O Supervision	V	cos		IN	OUT N/			om Contamination	V COS R
1 Person/Alternate Person in charge present,	Pf		0	15 0	000		Food separated and		P/C 0 0
demonstrates knowledge and performs duties Certified Food Protection Manager for Classes 2,					\$ 0		Food-contact surface Proper disposition of	es: cleaned & sanitized	(P/Pf/C O O
2 Certified Food Protection Manager for Classes 2, 3, & 4	0	0	0	17 🐼	0	26(206)(0)(0)	served, reconditioned	600	POO
Employee Health							Time/Temperature (
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	0	\circ	18 🔾	00		Proper cooking time	and temperatures cedures for hot holding	P/Pf/C O O
4 Ø Proper use of restriction and exclusion	Р	0	0	20 0	00	10	Proper cooling time a	and temperatures	P 0 0
5 Written procedures for responding to vomiting and	Pf	0	0	21 🔾	/		Proper hot holding te		POO
diarrheal events Good Hygienic Practices	1 3 8			22 🕉			Proper cold holding to Proper date marking		P/Pf O O
6 O Proper eating, tasting, drinking, or tobacco products use	e P/C	101	0		Transport Process			and disposition th control: procedures	
7 O No discharge from eyes, nose, and mouth	С	0		24 0	0 0		and records	ninger in en Proposition	P/Pf/C O
Preventing Contamination by Hands 8 Hands clean and properly washed	l D/D			05 0		/	Consumer		
N. I.	P/Pf			25 🔾	00		Highly Susceptil	ded: raw/undercooked food	Pf OO
pre-approved alternative procedure properly followed	P/Pf/C		0	26 🔾	00	1		prohibited foods not offered	P/C 00
Adequate handwashing sinks, properly supplied/accessible	PF/C	0	0	411 34				nd Toxic Substances	
Approved Source			_	27 🔾	90			oved and properly used	POO
11 O Spood obtained from approved source 12 O Spood received at proper temperature	P/Pf/C		읭	28	00		Toxic substances pro stored & used	operly identified,	P/Pf/C O
13 OFF Food in good condition, safe, and unadulterated		0						proved Procedures	
Required records available: molluscan shellfish	P/Pf/C	0	0	29 🔾	0 0		Compliance with vari	ance/specialized	P/Pf/C O O
identification, parasite destruction	11.00			ACTIC	FS	I CON	process/ROP criteria	/HACCP Plan	1,1, 1,0 0 0
Good Retail Practices are preventative measures to						chemic	cals, and physical object	cts into foods.	THE RULE WAS A
	n appro		_	for COS	and/or R		COS=corrected on-site	e during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	V P	cos	R	OUT			Proper Use of I	Utensils	V COS R
31 Water and ice from approved source	P/Pf/C		읭				ils: properly stored	tored, dried, & handled	C O O
32 O Variance obtained for specialized processing methods	Pf	_	0				gle-service articles: pro		(P)C 30 0
Food Temperature Control				46 0	Gloves	used	properly		000
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0	0		Eggd o	nd no	Utensils and n-food contact surfac		
34 O Plant food properly cooked for hot holding	Pf	0	0	47 🔾	1		gned, constructed, ar		P/Pf/C O
35 O Approved thawing methods used	Pf/C			10/00				maintained and used;	2000
36 C Thermometers provided and accurate	Pf/C	0	0	4000		-	nts, sanitizers, and te	est strips available	PC 00
Food Identification 37 Food properly labeled; original container	Df/C	0		49)00	Non-foo	od cor	ntact surfaces clean		000
Prevention of Food Contamination	FIIC			50 0	Hot and	d cold	Physical F water available; aded		Pf 00
Insects, rodents, and animals not present Ontamination prevented during food preparation, storage & display	(Pf/c	0	0	51 🔾	Plumbii	ng ins	talled; proper backflo	w devices	P/Pf/C O O
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness	P/Pf/C						waste water properly		P/Pf/C O O
41 Wiping cloths: properly used and stored	C PI/C	00						ed, supplied, & clean ed; facilities maintained	Pf/C O O
42 Washing fruits and vegetables	P/Pf/C						lities installed, mainta		P/PfCOO
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable		0	Natural	rubbe	er latex gloves not us	designated areas used ed per CGS §19a-36f	C 0 0
Person in Charge (Signature)	16	12/		Priority	ons doc Item Vid	olation	ns	ate corrections due	# 2
Person in Charge (Printed) Madison Starchill				Core Ite	em Viola	ations	em Violations	7/15/24	3
Inspector (Signature) J. Stoney Date 7/5	1202	4		Repeat	Risk Fa	actor/F	ealth Intervention Vio Public Health Interven		4'
Inspector (Printed) LAWY EN GRANDY				Requir	es Rein	spect	s Violations tion - check box if yo	ou intend to reinspect	10/
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Directo	er to o	corre Heal	ect any lith, not I	inspecti ater tha	on vio	plation identified by to y-eight hours after is	the food inspector or t ssuance of such order	o hold, destroy,

reinspection: 7/9/24

Food Establishment Inspection Report Page 2 of 2

	F00	u Esta	idiishmeni	. mspec	Juon	Report	Page	OT
LHD Ma	inches ter		Inspection Report Co	ontinuation Shee	t		Date 7/5/202	24
Establishr	ment_Barnes+NO	ble sta	TOWN TOWN	ranches	ter			
			TEMPERATUR		CONTRACTOR OF STREET			
Item UIIE	/Location/Process	Temp	Item/Location/		Temp		cation/Process	Temp
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balft	1001	AIF	single doors	indevenint	71/	not water	handeink	118F
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Frant	counter	30 F	Cicariono	~3°C	001	-		Date:
Chrese		42F	Bathraam h	Othrattr	965			Emp:Empleado
OTTO CIT	LWI V			9 · 1 / 2 / 2 / 3 / 1				BAR TURNS ORANGE BAR TURNS ORANGE BACETABLE CUMPO LA BARRA
			SERVATIONS AN					160°F/71°C
Item	Violations cited in this	report must b	e corrected within the tir	me frames below	v, or as state	d in sections 8-40	5.11 & 8-406.11 of the	tood code.
Number								
2 C	no cfpy on s	ite dur	ing time or 1	nspectio	n			
	30 days to	have s	omeone sig	nup for	CFPW	1		
440	Floor under	3 bay s	sink notel	ean'				
38PF	Fruit Flies /d	rain Fl	ies under a	3 baysii	nk+r	odobo joy Fr	ont unit-w	placed
55C	strongodor	From	back by m	nopsink	•			,
49C	Floors not o			*				
39C	BOXES OF TO O	o cont	ainen story	donfi	oor in	back of	house	
	Back of house							Name of the state
JOPF	no soap disp		. 4		ice M	achine		
10 PF	no paper rows							
49C	3 hay sink no	tclean						
16 P	quat sanitiz		ket at app	m -				
49C	interior of co				γ			
notex	thermomet	crons	ite					
450	sience conta	iner w	ith single	Service	utensi	ils not cit	ean single	
4000	service spoor	nslkni	ves not cla	ean-ol	scard	ed by be	rson in chi	rac-Cos)
acter	good labelin	na of F	ood product	<u> </u>		1		
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	Lamandu @ no	anche	sterct. any					
	reinspection	- hill	9th, 2024					
		5-7	, , , , , ,					
Person in	Charge (Signature)	Madhin	n Steveline				Date 7/5	1201
	(Signature)	TONAL	N				Date 7/5/	74
	1 3 1 1 1 1	10. 1000					Date J /	41

Establishment Drille (Risk Category: Food Establ	lishm	ent li	nspecti	on Report	Page 1 of	1.3_
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Permit tolder No. December Pre-op					- 1 to 1 t		Z AIVITPIN
Permit Holder # AU Multiple W PODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS And feters are reported secondaries and the secondari			JP				-on
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Mark deters are improvery particles or processors solution for the cent previous for solutions in these or kipy. Intervention as source frozenous intervent for the control for the control of the contro	Permit Holder 11 JULY Y(U11) W	ACTO	MILES WHILE A		A CONTRACTOR OF		
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Person/Alternate Person in charge present, demonstrates knowledge and performs duties demonstrates which will be a served the performance of the performan							
demonstrates knowledge and performs duties Certified Food Protection Management, flood amolyses and contional employees the improved control of the state of the improved control	D (21)		COS R				Late Care Care Annual Control
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Management, food employee and conditional employee; print in which provided an expositabilities and reporting or consulting and expositing in the property separation and sectusion in the property separation of the property	0,0.						1,1010
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Pastaurized foods used; prohibited foods not offered P/C Pastaurized foods used; prohibited P/C P/C Pastaurized foods used; prohibited foods not offered P/C P	No bare hand contact with RTE food or a	100000000000000000000000000000000000000					11,00
Approved Source Food additives: approved and properly used P	pre-approved alternative procedure properly followed			26 0			P/C 0 0
Flood obtained from approved source PiPric O O Proof received at proper temperature PiPri O O Proof received at proper temperature PiPri O Proof of good condition, safe, and unadulterated PiPri O Required records available: molluscan shellfish PiPric O Proof of good condition, safe, and unadulterated PiPri O Required records available: molluscan shellfish PiPric O Proper condition, parasite destruction PiPric O O Proper condition, parasite destruction PiPric O O O Proper condition, parasite destruction PiPric O O O O Proper condition, parasite destruction PiPric O O O O O O O O O		Pf/C	00	27/0/6			1000
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Required records available: molluscan shellfish identification, parasite destruction GOOD RETAIL PRACTICES Good Retail Practices are preventative measures to control the addition of pathogens, chemiciss, and physical objects into foods. 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 OUT NAIN/INC Safe Food and Water P O O R Pasteurized eggs used where required P O O Retail Practices are proventative measures to control the addition of pathogens, chemiciss, and physical objects into foods. 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 OUT NAIN/INC Safe Food and Water P O O R Pasteurized eggs used where required P O O Retail Practices are proved source PPIFIC O Representative the addition of the property stored				28		s properly identified,	P/Pf/C O
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Safe Food and Water V Cos R 30 Pasteurized eggs used where required P Cos R 30 Water and ice from approved source PPIC Cos R 30 Water and ice from approved source PPIC Cos R 30 Water and ice from approved source PPIC Cos R Water and ice from approved to the from ap							
Pasteurized eggs used where required PP		T		for COS and			
Water and ice from approved source				43 In			
Proper cooling methods used; adequate equipment for temperature control 46 Gloves used properly Utensils and Equipment C O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly cooked for hot holding Pf O O Plant food properly designed, constructed, and used Warewashing facilities: installed, maintained and used; cleaning agents, sanitizers, and test strips available Pf O O Physical Facilities Physical Fa	31 Water and ice from approved source	P/Pf/C	00	44 O U	tensils/equipment/linens: prope	rly stored, dried, & handled	Pf/Q O O
Proper cooling methods used; adequate equipment for temperature control A O Plant food properly cooked for hot holding Properly designed, constructed, and used Approved thawing methods used Pric O Approved thawing methods used proved used per backflow devices Pric O Approved thawing methods used and used to cleaning agents, santizers, and test strips available Pric O Approved thawing methods used are available, adequate pressure Pric O Approved thawing methods used are available, adequate pressure Pric O Approved thawing methods used are available, adequate pressure Pric O Approved thawing methods used are available, adequate pressure Pric O Approved that and cold water available, adequate pressure Pric O Approved that and cold water available, adequate pressure Pric O Approved that and cold water available, adequate pressure Pric O Approved t		Pf	00			: properly stored & used	
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Prevention of Food Contamination 38		Pf/C	00	C X			0
Sewage and waste water properly disposed P/Pfic O				50 O H	ot and cold water available;	adequate pressure	Pf O O
Personal cleanliness		Pf/C	99	(51) X P	lumbing installed; proper bac	ckflow devices	
Wiping cloths: properly used and stored C C C C C C C C C				53 O To	oilet facilities: properly const	ructed supplied & clean	
Permit Holder shall notify customers that a copy of the most recent inspection report is available. Person in Charge (Signature) Person in Charge (Printed) Inspector (Signature) Date Date		С	00	(54) X G	arbage and refuse properly disp	posed; facilities maintained	
Person in Charge (Signature) Person in Charge (Printed) Person in Charge (Printed) Date Date			-	55 O PI	hysical facilities installed, ma	aintained, and clean	
Person in Charge (Signature) Person in Charge (Printed) Person in Charge (Printed) Inspector (Signature) Date	Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is avai	ilable.	56 O N	dequate ventilation and light	ing; designated areas used	C O O
Person in Charge (Printed) Inspector (Signature) Inspector (Printed) Date b/20/24 Inspector (Printed) Priority Foundation Item Violations Repeat Risk Factor/Public Health Intervention Violations Repeat Risk Factor/Public Health Intervention Violations Repeat Risk Factor/Public Health Intervention Violations 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, destroy,	- Crown estall 10/2	rtxi					#
Inspector (Signature) Inspector (Printed) Inspect		90	٠				4
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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,	Inspector (Signature) / Date 0/2	0/29	100			rvention Violations	
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	Appeal: The owner or operator of a food establishment aggrieved by t	his orde	r to corr	ect any ins	spection violation identified	by the food inspector or to	hold, destroy,

Keinspection - as soon as HVAC to repair retrigeration

Food Establishment Inspection Report Inspection Report Continuation Sheet Establishment BPHWPP Round Town Manchester TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Process Temp Item/Location/Process Temp 40F menegn 44 F 43F OF /caimon Butter at Room temp 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 stored in back of house oat pans/sheet pans extremely unclean Incavill Person in Charge (Signature) Inspector (Signature)

	F00	o Esta	piisnment	inspec	ction R	eport	Page 5	or <u> </u>
LHD_M	anchester		Inspection Report Conf	tinuation Shee	t		Date 6/20/20	724
Establishn	ment_BLTW (CN)	rounds	Town_/	lanche	Ster			
			TEMPERATURE	OBSERV	ATIONS		Testing all produces	
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cy o	Y TOT CY O TITL	11.						
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		ОВ	SERVATIONS AND	CORRECT	IVE ACTIO	NS		
Item	Violations cited in this	report must be	corrected within the time	frames below	, or as stated i	n sections 8-405	.11 & 8-406.11 of the	e food code.
Number								
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Doroo- :-	Charge (Cianatana)	(Inna)	AHAUT				Date G(20)	124.
	Charge (Signature)	ATIMA	11/					CT
Inspector	(Signature)	MINU	W				Date 10 70 2	4

Risk Category: Food Estab	lishm	nent	Insp	pecti	ion Rep	ort ,	ı	Page 1 c	of 2_
Establishment type: Permanent Temporary Mobile Other					Date:	5/30	12V		
Establishment Brazilian Qula Srill		*estino C	onnecticus	Reality	Time In_	/	AM/PM	Time Out	AM/PM
Address Lic #AB 17928		DF	H		LHD /	Jana	hest		
Town/City		onnecticu	t Departm	nont 1		of Inspection			e-op
Permit Holder FOODBORNE ILLNESS RISK FA		of Publ	ic Health		Reinspec		Other		
Risk factors are important practices or procedures identified as the most prevalent cont	Marie Co.								ess or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered i	tem	IN=	in com	pliance	OUT=no	ot in compliance	e N/A=	not applicable N/	O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	approp	oriate b	ox for C	OS and/or I	R COS=corr	ected on-sit	e during inspection	R=repeat violation
IN OUT N/A N/O Supervision	V	cos	R	IN O	UT N/A N/O	Prote	ction from	Contamination	V COS R
1 O O Person/Alternate Person in charge present,	Pf	0	15	00	000	Food separat	ed and pro	tected	P/C 0 0
demonstrates knowledge and performs duties	FI		16		00	Food-contact	surfaces:	cleaned & sanitized	P/Pf/C O O
2 Certified Food Protection Manager for Classes 2,	С	0	O 17	700	2 December 2001			urned, previously	POO
3, & 4								ind unsafe food	
Employee Health Management, food employee and conditional employee;	<u> </u>	1 1	10					trol for Safety temperatures	DIDGO O
knowledge, responsibilities and reporting	P/Pf	0	19					lures for hot holding	P/Pf/C O O
4 O Proper use of restriction and exclusion	Р	0						temperatures	P 0 0
Written procedures for responding to vomiting and	Pf					Proper hot ho			P 0 0
diarrheal events	P		22			Proper cold h			POO
Good Hygienic Practices				300		Proper date r			P/Pf O O
6 O Proper eating, tasting, drinking, or tobacco products us	-	_	- 1.77	100		and the second s	blic health	control: procedures	P/Pf/C O O
7 O No discharge from eyes, nose, and mouth	C	0				and records			17/1/0
Preventing Contamination by Hands 8	DIDE		-				sumer Ad		15155
No hore hand contact with DTF food and	P/Pf	0	○ 25					raw/undercooked food	Pf O O
9 Pre-approved alternative procedure properly followed	P/Pf/C	0	26					Population hibited foods not offered	P/C O O
10 O Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	_					Toxic Substances	
Approved Source	1			700				d and properly used	
11 O Food obtained from approved source	P/Pf/C	0			1 1 1 1 1 1 1 1	Toxic substa			
12 C Food received at proper temperature	P/Pf	0	5 28			stored & used		A. C.	P/Pf/C
13 C Food in good condition, safe, and unadulterated	P/Pf	0						oved Procedures	
14 O Required records available: molluscan shellfish	P/Pf/C	0	> ₂₉	00				ce/specialized	P/Pf/C
identification, parasite destruction	OD RE	TAIL	DDAC	TICES		process/ROF	criteria/HA	ACCP Plan	
Good Retail Practices are preventative measures to						icals and nhvs	ical objects i	into foods	
	in approp							uring inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	V			OUT			Use of Ute	La tarre Control Contr	V COS R
30 Pasteurized eggs used where required	Р	0	43	3 O In	-use utens	ils: properly st		•	c 00
31 Water and ice from approved source	P/Pf/C							ed, dried, & handled	Pf/C O O
32 O Variance obtained for specialized processing methods	Pf	0					icles: proper	rly stored & used	F/C 0 0
Food Temperature Control			46		loves used				700
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0	> $ -$	TE	and and no	n-food contac	ils and Eq		
34 O Plant food properly cooked for hot holding	Pf	0	47	(()		igned, constru			P/Pf/C O
35 O Approved thawing methods used		0	5	1//		~		intained and used;	+ + +
36 C Thermometers provided and accurate	Pf/C	0	5 48					strips available	Pf/C O O
Food Identification			49			ntact surfaces			000
37 Food properly labeled; original container	PriC	0				Ph	ysical Fac	ilities	
Prevention of Food Contamination						water availab			Pf O O
38 Insects, rodents, and animals not present		0	○ 51			stalled; proper			P/Pf/C O O
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness		0				waste water			P/Pf/C O
41 Wiping cloths: properly used and stored	C	00						supplied, & clean acilities maintained	Pf/C O O
42 Washing fruits and vegetables	-	0				lities installed			C O O
Permit Holder shall notify customers that a copy of the most recent inspection rep			-	\bigcirc A	dequate ve	ntilation and I	ighting; des	signated areas used	
And the second	120	125	/	olation	s docume	nted	1	per CGS §19a-36f corrections due	#
Person in Charge (Signature)	90	0 1			em Violation		10-1	. 1 4	P
Person in Charge (Printed)					oundation in Violations	tem Violations			
	21	1				ealth Interver	tion Violeti	ons /	3,
Inspector (Signature) Date 5	3)/24	1				Public Health			
2. 0	1/		Go	ood Ret	tail Practice	s Violations			3
Inspector (Printed) Denise Paym			Re	equires	Reinspec	tion - check l	oox if you i	ntend to reinspect	Y
Appeal: The owner or operator of a food establishment aggrieved by to or dispose of unsafe food, may appeal such order to the	his orde Directo	er to co or of H	orrect ealth,	any ins	spection vi er than for	olation identi ty-eight hours	fied by the s after issu	food inspector or to ance of such orde	to hold, destroy,

410 Capitol Avenue MS#11FDP Hartford, CT 06134

Food Establishment Inspection Report Page 2 of 2	>
LHD manchester Inspection Report Continuation Sheet Date 5/30/24	
Establishment Brazilian Gula grill Town Manchester Foilow up 6/2/24	į.
() TEMPERATURE OBSERVATIONS	1 7
Item/Location/Process Temp Item/Location/Process Temp	np
Deef 40t No Hor Holding Of to operate	
*Discussed ambient No Sanitive set up	0
at 39F-> Recomend & Sanit Meststript	•
37F/38F	
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 coordinates.	10
Number	ALEO Sec.
Horwater not Above 85 - 7 Adjust; Reinspecton 6/2/21 at next event. XStill having issue	1
at next event. XStill having issue	
45C Single use cup w/ out handle	
37c Squeeze bottles not labeled thepeat chindren	
one equality this way	
The state of a Vias pat sanothe legiture legandle	
Hac Basket for napkins not smooth/easily cleanable Wood Shelf Not approvable - discussed Plastic Cathing No Coboard Ised - Still not approved inglinal	hom
Wood Shell Not approvable - discussed Plastic Cutting	0.0
500 Writes procedures not on-truck / Vorint/diatrhea	
OPP WATER PROCEEDINGS NOT ON-TRICK (VOMI) GIVE THE	1
Frigidare-treens chest (NSF) on backside.	
Manager taking CFPM course-send certif. to HDpt.	
Owned CFPM V	
Discussed dispensing taper towel Holder	
Provide New mean for relieur	
Allergen Posternot on truck 9 Allergens post present - Reed	S
Notification statemen +)	
Person in Charge (Signature), Date / I	
Inspector (Signature) Date 5/30/2	4
the consortion	10

Risk Category: 4 Food Estab	lishr	nen	t In	spec	ction	Repo	orf		Page 1	of 2		
Establishment type: Permanent) Temporary Mobile Other						. 1	26/29				_	
Establishment BYIANT DATA		.01	Connec	cticut Ho			12			121	7,000,000	V-08-1
17-2-011 01001 10100	-	And Andrews				me In	01001	AM/PM	Time Out 12	:30	_AM	/PM
Address 49/10/10/10/10/10	- 1		M	H)	LH		WICK	rest				
Town/City Manchester					Pu	rpose of	Inspection	n: (Ro	outine) P	re-op		
Permit Holder		of Pu	iblic He		7.000	inspection		Other				
FOODBORNE ILLNESS RISK F. Risk factors are important practices or procedures identified as the most prevalent continuous.	ACTC	ORS A	AND	D PUB	BLIC I	HEALTH	INTERV	ENTION	S assured for the service			
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered i	tem	IN	N=in c	complian	nce (OUT=not in	n compliance	50000	10 1 10 10 10 10 10 10 10 10 10 10 10 10	I/O=not ob		ed
P=Priority item Pf=Priority foundation item C=Core item V=violation type					The same				during inspection			
IN OUT N/A N/O Supervision Person/Alternate Person in charge present,	V	cos	R	15 IN		N/A N/O			Contamination		cos	-
demonstrates knowledge and performs duties	Pf	0	0	16			ood separate		ected leaned & sanitized		0	-
Certified Food Protection Manager for Classes 2,	С	0	0	17	6				rned, previously	<u>a / / / / / P</u>		
3, & 4 Employee Health									nd unsafe food		0	0
Management, food employee and conditional employee;	D/D			18 0	10		oper cookin	g time and	trol for Safety temperatures	P/Pf/C	10	
knowledge, responsibilities and reporting	P/P			19 🔾	0	O Pr	oper reheat	ing procedu	res for hot holdin	g F	0	
Proper use of restriction and exclusion Written procedures for responding to vomiting and	Р	0	9	20 0			oper cooling	time and t	emperatures		0	
diarrheal events	Pf	0	0	21 🔾			oper hot ho	aing tempe	eratures		00	
Good Hygienic Practices				23	0	O O Pr	oper date m	arking and	disposition		0	
6 O Poper eating, tasting, drinking, or tobacco products us				24 🔾	0	Tir	me as a pub	lic health c	ontrol: procedures			
7 O No discharge from eyes, nose, and mouth Preventing Contamination by Hands	C_	101	9			an	d records					\perp
8 O O Hands clean and properly washed	P/P	100	0	25 🔾	000	Co		sumer Adv	raw/undercooked foo	d Pf		0
bare hand contact with RTE food or a	P/Pf/C		03004	1 11	/			sceptible I		- 15	10	10
pre-approved alternative procedure properly followed			0	26	10	Pas	steurized food	s used; prohib	oited foods not offered	P/C	10	0
Adequate handwashing sinks, properly supplied/accessible	Pf/C								oxic Substances			
Approved Source 11 Food obtained from approved source	DIDIIO			27 🔾	2	→ Fo	od additives	s: approved	and properly use	d P	0	0
12 O Food received at proper temperature		100		28	0		oxic substan ored & used		y identified,	P/Pf/C	0	0
13 C Food in good condition, safe, and unadulterated		0	-						ved Procedures			-
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0		29 🔾	0				specialized	P/Pf/C		5
	OD RE	ΤΔΙΙ	DD	ACTIC	EC	pro	ocess/ROP	criteria/HA0	CCP Plan	171 1/0		
Good Retail Practices are preventative measures to	o contro	of the a	dditio	on of pati	thogens	, chemicals	s, and physic	al objects in	to foods.			
Mark OUT if numbered item is not in compliance V=violation type Mark i				or COS					ing inspection	R=repea	t viola	ation
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	V		R	OUT			Proper U	se of Uten		V	cos	_
30 Pasteurized eggs used where required 31 Water and ice from approved source	P		9	43 🔾	In-use	utensils:	properly sto	ored		С	0	
32 Variance obtained for specialized processing methods	P/Pf/C			44 0	Single	is/equipme	ent/linens: pro	perly stored	, dried, & handled v stored & used	Pf/C	0.000	
Food Temperature Control				46 0	Glove	s used pro	operly	iles, property	/ stored & used	P/C	00	_
Proper cooling methods used; adequate equipment for	Pf/C			Lilling			Utensi	ls and Equ	ipment			10
temperature control		23774		47 🔾	Food	and non-fo	ood contact	surfaces c	leanable,	P/Pf/C	0	
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf			33. 39.	prope	rly design	ed, construc	ted, and us	sed	-/-//		0
36 Thermometers provided and accurate	Pf/C	000	$\frac{2}{3}$	48	vvarev	wasning ta	acilities: inst	alled, main	tained and used; rips available	Pf/C	0	0
Food Identification	1. 1/0						ct surfaces		rips available	(0)	1	
37 Food properly labeled; original container	Pf/C	0		97		uv sileau	Phy	sical Facil	ities	_ Ü		
Prevention of Food Contamination				50 🔾	Hot ar	nd cold wa	ater availabl	e; adequate	e pressure	Pf	0	0
38 Insects, rodents, and animals not present 39 Contamination prevented during food preparation, storage & display		0		51 🔾	Plumb	oing install	led; proper l	oackflow de	evices	P/Pf/C	0	0
40 Personal cleanliness		00		53	Sewa	ge and wa	ste water p	roperly disp	upplied, & clean	P/Pf/C		
41 Wiping cloths: properly used and stored	C	0	ă	54 🔾	Garba	ge and refu	use properly	disposed: fa	cilities maintained	Pf/C C	00	_
42 Washing fruits and vegetables	P/Pf/C	0		55 🔾	Physic	cal facilitie	es installed,	maintained	, and clean	P/Pf/C		
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable.		56 🔾	Adequ	ate ventil	ation and lig	hting; desi	gnated areas used	d C	0	
6 - 11		- //	_	Violatio	Natura ons do	cumente	atex gloves		er CGS §19a-36f		-41	
Person in Charge (Signature)	11/	-4		Priority	Item V	iolations	ч	Date	corrections due	-	#	
Person in Charge (Printed) Katrina Lleli				Priority	Found	ation Item	Violations	~1.	Too-a			
1 M-220111	1 -	ام ا		Core Ite			th Interventi	9/2	0/2024		2_	
Inspector (Signature) 4 - 25100000 Date 0	1017	4		Repeat	t Risk F	actor/Pub	th Interventi olic Health Ir	on Violation	ns Violations		=	
1 MILLION EXMINAL	w c			Good R	Retail P	ractices V	/iolations				7	
Appeal: The awars of apartor of a food atablish and a series of a		- 90	_][Require	es Rei	nspection	n - check bo	ox if you int	tend to reinspect		_	
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Directo	er to c or of H	orre lealt	ct any i	inspec later th	tion violat an forty-e	tion identification	ed by the fo	ood inspector or	to hold, o	iestr	оу,

Foo	d Esta	ıblishment Ins	spection	Report	Page	of <u>L</u>
LHD Manchester		Inspection Report Continuation	0.8		Date 6/26/2	1
Establishment_BY [QNT_DQT	h	Town Mar	chester			
V 1		TEMPERATURE OB	SERVATIONS			
Item/Location/Process	Temp	Item/Location/Process		ltom/l c	ocation/Process	Temp
	1 emp	item/Location/Frocess	Tellip	1 0 10 0 0	talloll/Flocess	
TIUE Freezer	-4			Inariasi	$nn H \cdot M$.	99F
	•			3 0/11	11 14 1	lióf
M. 1. 2 . 1 . 0. C				12 Day	H·W/	1105
True / Monr	36F			1.	12 1 MO	
C100018	39 F					
Chicken						
MIIK	37 F					
F - 4 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3						
					Marie Control	emp⊳Rite. §
	0.5	OCEDI/ATIONIC AND OCE	DEATHE 107	10110	<u> </u>	Date: Fecha
Item Violations cited in this Number	report must be	SERVATIONS AND COF e corrected within the time frame			5.11 & 8-406.11 of	Empleado PASS WHEN BLUE BAR TURNS ORANGE IS AGTITALE CUMPO IA BIRIA AZII CAMBA A COLOR MARMIA 160°F/71°C
notex overall good	hierar	chy				
hote X staff in Frair	ningro	ir fertsare -	Lgrand	y Oman	chesterct,	901
49C EXTERIOR OF E	pinson	shelfnotcle	an			U
49c interior of F	recter	notclean				
notext Food thermo	meter	available				
notest overall cicar	1 tora	annized!				
notes no Tempera	tures	for rood produ	ct n a e	hdof Iur	och when	
passing out	Idellu	ering to room			1011 001101	
l st. J			13			
C						
			Part of Land	10.00		
			1.1			
	11.					
Andrew Control	6 -				1/201	'm' .
Person in Charge (Signature)	ZMAN	frice			Date 6/26/6	CY
Inspector (Signature) 🛴 . 🥠	LUVUUJIV	X			Date 6/26/2	74

Risk Category: 2 Food Establ	lishn	nen	t In	spe	ecti	on R	Report	Page 1 o	f_3_	
Establishment type: Permanent Temporary Mobile Other						Date:	7 1 1	4		
Establishment Burger Class		espin	onnec	cticut Hear		Time		M/PM Time Out 2	.30	AM/PM
Address 194 Buckland Hills		أأ	DI	H	À	LHD	Manches	-,		
Town/City Manchester							ose of Inspection:		-op	1
Permit Holder Saulha Ippanapally.	C	onnection of Pu	cut Dep ublic He	partmen palth	t	Reins	pection	Other		
FOODBORNE ILLNESS RISK FA										严权法
Risk factors are important practices or procedures identified as the most prevalent cont. Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it		100	731 Harrison	compli		a contract	F=not in compliance	1944 Table 1944 Table 1944 Table 1944	not obs	
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appro	opriat	te box	for C	OS and	/or R COS=correc	ted on-site during inspection	R=repeat	violation
IN OUT N/A N/O Supervision	V	cos	R	-		UT N/A	0.00	on from Contamination		COS R
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0	15 0		00	Food separated	I and protected urfaces: cleaned & sanitized	P/C P/Pf/C	000
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17			Proper disposit	ion of returned, previously	Р	
Employee Health	1				4			tioned, and unsafe food ture Control for Safety		
3 Management, food employee and conditional employee;	P/Pf			18	0	00	O Proper cooking	time and temperatures	P/Pf/C	00
knowledge, responsibilities and reporting	1.000	558		19			O Proper reheating	g procedures for hot holding	P	
Proper use of restriction and exclusion	P	0	9					time and temperatures	P	
Written procedures for responding to vomiting and diarrheal events	Pf	0	0				Proper hot holdProper cold hold		P	00
Good Hygienic Practices				23	5/2	5 6	O Proper date ma	rking and disposition	P/Pf	00
6 O Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0	24	~ 1 .			c health control: procedures		
7 O No discharge from eyes, nose, and mouth	С	0	0	24			and records	*	P/Pf/C	00
Preventing Contamination by Hands				-				umer Advisory	11-3	
8 O Hands clean and properly washed	P/Pf	0	0	25	$\supset \subseteq$	00		y provided: raw/undercooked food	Pf	00
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	0		26	510			ceptible Population	700	
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0		20 0				used; prohibited foods not offered ves and Toxic Substances	P/C	00
Approved Source	11110			27 0	510	5701		approved and properly used	Tp	00
11 O Food obtained from approved source	P/Pf/C	0	0					es properly identified,		
12 O O Food received at proper temperature		O		28			stored & used	8 4 8 5	P/Pf/C	00
13 O Food in good condition, safe, and unadulterated	P/Pf	0	0					th Approved Procedures		
14 C Required records available: molluscan shellfish	P/Pf/C	0	0	29				h variance/specialized	P/Pf/C	00
identification, parasite destruction	OD RE	TAIL	DD	100000			process/ROP c	riteria/HACCP Plan		
Good Retail Practices are preventative measures to							nemicals and physica	I objects into foods	,	
	n appro								R=repeat	violation
OUT N/A N/O Safe Food and Water	V	cos		-	UT			e of Utensils		COS R
30 Pasteurized eggs used where required	P	0	0	43	⊃ In	-use ut	ensils: properly stor	ed	С	00
31 Water and ice from approved source	P/Pf/C		0	44		ensils/e	quipment/linens: prop	perly stored, dried, & handled	107 La -0300	00
32 Variance obtained for specialized processing methods	Pf	0	0					es: properly stored & used		00
Food Temperature Control Proper cooling methods used; adequate equipment for	-			40	ی ا	loves u	sed properly	and Equipment	С	00
temperature control	Pf/C	0	0	1270.00	_ Fo	ood and	non-food contact s		T	
34 O Plant food properly cooked for hot holding	Pf	0	0	47	2		designed, construct		P/Pf/C	00
35 O Approved thawing methods used	Pf/C	0	0	48	W	arewas	shing facilities: insta	lled, maintained and used;	500	
36 Thermometers provided and accurate	Pf/C	0	0					and test strips available	Pf/C	00
Food Identification 37 Food properly labeled; original container	Taria	r _ 1		49		on-food	contact surfaces c		С	00
Prevention of Food Contamination	Pf/C	0	0	50 0		ot and a		ical Facilities	7 50	
38 Insects, rodents, and animals not present	Pf/C	0					g installed; proper be	; adequate pressure	Pf	90
39 Contamination prevented during food preparation, storage & display	P/Pf/C						and waste water pro			00
40 Personal cleanliness		0						structed, supplied, & clean		00
41 Wiping cloths: properly used and stored	С			54	⊃ G:	arbage a	and refuse properly di	sposed; facilities maintained	С	00
42 O Washing fruits and vegetables	P/Pf/C	0	0	55		nysical	facilities installed, n	naintained, and clean		00
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable		56	$\supset A $	dequate atural ru	e ventilation and light ubber latex gloves r	nting; designated areas used not used per CGS §19a-36f	C	00
Person in Charge (Signature). VQ. VSI) QV Date 915	ا ا	20	24	Viola	ation	s docu	mented	Date corrections due		#
Date 1)-11	X U	X			m Viola	on Item Violations		_	
Person in Charge (Printed)						Violatio				
1 2 -	0	21		Risk	Fact	or/Publi	ic Health Intervention		_	
Inspector (Signature) Date	7-0	人什		Repe	at R	isk Fac	tor/Public Health Int	ervention Violations		
Inspector (Printed) Jose Ramicez							ctices Violations	v if you into ad to select		
Appeal: The owner or operator of a food establishment aggrieved by the	his ord	or to	COTTO	ect ar	wines	nectic	pection - check bo	x if you intend to reinspect	hold .	lootur
or dispose of unsafe food, may appeal such order to the	Direct	or of	Heal	th. no	t late	er than	forty-eight hours a	after issuance of such order	, noid, d	estroy,

Food Est	ablishment inspect	ion Report	Page	of
LHD Manchester	Inspection Report Continuation Sheet		Date_ 7 - 9 -	- 24
Establishment <u>Ruiger (lass</u>	Town Mancheste	2		
	TEMPERATURE OBSERVAT		500 (OB)	
Item/Location/Process Temp	Item/Location/Process		cation/Process	Temp
under counter cooler front counter		Hand Si	nk bygrill	90 F
nilk 414			1927 - 1924 	
Cold drawer grill				
Chicken 40F				
Cold prop table by WIC				
Chicken Wings 527				
Chicken Patty 41F				
	BSERVATIONS AND CORRECTIV	E ACTIONS		
	be corrected within the time frames below, or		5.11 & 8-406.11 of the	food code.
Number				
1,1	1 1 1			
No paper towels	at hand sink by grill			
Battle of Wend	stored in hand sin	Lat Iront a	ninter	
		al flori Co	ONIC	
Missing ceiling ti	les throughout			
unlabeted contain	ners of ice cream syru	٥٥		
1 1		1		
<u> </u>	ump Sink by Soda	MACHIE		
Dipper well leaki	ng into bucket			
under Front coun	ter unclean			
Ceilingunclean +				
	, — , , ,	DI - 1. 1		
	and product in 2 door			
Floor drain und	er Shelving unclean	W/ Standin	a liquid mi	SSINGRA
interior of cold	drawers under grill un	clean	J V . J . "	500
111401010400	CIAMOS VIDEI GITTO	IC/CAI)		
	ze bottles throughout			
Cold prep table a	asket damaged			
	ldy substance stored	: 0 rall nce	otable	
		in cold ble	rance	
cell phone stored o				
Cleanina Chemica	I spray stored above	- cold area to	ble	
WIC interior un	class (parce)	Pick In		
		. 1. 1 /	25/2	
Chicken Wings	in cold prep table by	WIC at 5	2+.(COS/DI	Scarded
cold oreo table b	y WIC ambient 30	F		
	equipment stored in t	1411Way		
Green cutting,	poard gauged			
Person in Charge (Signature)	/		Date 7-9	-a L
	·		70	24
Inspector (Signature)			Date / - 9	-24

	Foo	od Estal	<u>blishment Inspe</u>	ection R	eport Page 3	of _5_
HD M	anchester		Inspection Report Continuation Sh		Date	7/24
Establishn	nent Burger	class	Town Manch	poter		
	J		TEMPERATURE OBSER	VATIONS		
Item	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
					the Address of the Section of the Se	
		-				
		ORS	SERVATIONS AND CORREC	TIVE ACTION	Ne	
	Violations cited in thi				sections 8-405.11 & 8-406.11 of the	food code
Item Number				on, or ac claice in	000000000000000000000000000000000000000	, 1000 0000.
Number	DS-					
	0-11-0	50.01.		-1	- 11	
	KUUTINE ID	SURCTION	ceased one to	CIOSINE	. Full re-insp	ection
	marined	notar +	b opening.			
	ragorica	P. 10	Opo III o			
	2,60,5	` a V a	1 of 500 100	مامهممما	unsafe/talged o	2. 2.
	J'eny S	ine oc	of Service,	derred	U/18496/7400/80 C	10 10
	Service	by by	relating dept.		/ 00	
	0.00	10	to all on	ما ما		^
	THER SINK	water	turned off	complete	ely also out or	- Service
	ĺ			ø	/	
		- Y	× 0.			
	Owner Bo	bby to	call a olumb	ger in	mediately for	repair
		1)				
	Call Hea	In De	of or email	icami	rez@manchester	ct. and
		11,000		Jian	TE SE THAT C. FOLL	(,,000
	when re	pairs	are complete			
		1	1			
		1 10				
	cold area	table	s also not t	unctioni	ng property.	all
	كالمو مذ	C C V CO	1 0 001 00			10
	10 ge 7	sei mai	1. 00 1107 51	are are	y tood in ti	gner
	unit un	151 fix	xed.		ng properly. c	
	120tollali	11 1100	ed this day	5 001/0	12 Bx lab / Co.	1000
	VUIVI 1 (4 / 1 /	7 0100	co ino cay,	0/0014	w/ Bobby /on	" " "
	on pho	ne.				
		<u> </u>				
	2					
	TO(V O(1	18-0A	en until ins	serte d	by Health D	of
	· · · · · ·		-11111	Joce C.	9 1.001111	1
			1			
		0.01				
erson in	Charge (Signature)	WY	,		Date +-	7-241
5 5 940 V	Charge (Signature)	-21			Date 7-9	201
nspector	(Signature)	1/2			Date (~)	-29

Risk Category: Food Estab	lishn	nen	t Ir	nspec	ctic	n Re	port	Page 1	1 of <u>2</u>	
Establishment type: Permanent Temporary Mobile Other			_	Date: 7-10-24						
Establishment Burac Class	connecticus Health					Time In (0:30 AMPM Time Out (2:00 AMPM				
Address 194 Buckland Hills Dr.			P	H)	1	_HD €	nanches	ster		
Town/City Manchester					E	urpos	e of Inspection	: Routine F	Pre-op	
Permit Holder Key Salgres	Co	onnection of Pu	cut De ublic H	epartment lealth	E	Reinspe	ection	Other		
FOODBORNE ILLNESS RISK F.	ACTO	RS	ANI	D PUE	BLIC	HEA	LTH INTERVE	ENTIONS		
Risk factors are important practices or procedures identified as the most prevalent con-	tributing fa	actors o	of food	dborne illne	ess or	injury. Inte	erventions are contro	of measures to prevent foodborne if	Iness or injury.	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered i				complian		Annual Control of the Control	not in compliance	The second party of party and party of the second party of the sec	N/O=not observed	
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in							ted on-site during inspection		
IN OUT N/A N/O Supervision	V	cos				T N/A N/O		ion from Contamination	V COS R	
Person/Alternate Person in charge present		paraman,	2012	15 🗭	_/_		Food separated		P/C 0 0	
demonstrates knowledge and performs duties	Pf	0	0	16				urfaces: cleaned & sanitize		
Certified Food Protection Manager for Classes 2					/			ion of returned, previously		
2 3, & 4	С	0	0	17 🕏			served recondi	itioned, and unsafe food	POO	
Employee Health			5711	B. Garage		Parameter Street		ture Control for Safety		
3 Management, food employee and conditional employee;	Tarar			18 0		00	<i></i>	time and temperatures	P/Pf/C O O	
knowledge, responsibilities and reporting	P/Pf	0	0	19 🔾		00	Proper reheating	ng procedures for hot holding		
4 Proper use of restriction and exclusion	Р	0	0	20 🔾	0	00	Proper cooling	time and temperatures	POO	
5 Written procedures for responding to vomiting and	Pf	0		21 🔾	2	00	Proper hot hold	ling temperatures	POO	
diarrheal events	PI		0	22 🐼	80	00	Proper cold hol	ding temperatures	POO	
Good Hygienic Practices			00	23 🕟	10	00	Proper date ma	arking and disposition	P/Pf O O	
6 O Proper eating, tasting, drinking, or tobacco products us				24 🔾			Time as a publi	ic health control: procedure	S DIDIO	
7 O No discharge from eyes, nose, and mouth	С	0	0	24			and records		P/Pf/C O	
Preventing Contamination by Hands			_ \		/	0.4	Const	umer Advisory		
8 O O Mands clean and properly washed	P/Pf	0	0	25 0	20	0	Consumer advisor	y provided: raw/undercooked for	od Pf OO	
9 No bare hand contact with RTE food or a	P/Pf/C	0	0			/		ceptible Population		
pre-approved alternative procedure properly followed	50			26 🔾		1000		used; prohibited foods not offere		
Adequate handwashing sinks, properly supplied/accessible	Pic	0	0		-			ves and Toxic Substance		
Approved Source	,			27 🔾		Ø	Food additives:	approved and properly use	ed POO	
Food obtained from approved source 12 Food received at proper temperature	P/Pf/C			8 0	1			es properly identified,	PPf/C O O	
12 Food received at proper temperature 13 Food in good condition, safe, and unadulterated	-		9		1	1630	stored & used			
Peguired records available: mallygeen shallfigh	P/Pf	0	\subseteq	-	_	/		ith Approved Procedures		
identification, parasite destruction	P/Pf/C	0	0	29 🔾		Ø		h variance/specialized riteria/HACCP Plan	P/Pf/C O O	
	OD RE	ΤΔΙΙ	PR	RACTIC	FS	1 200	process/ROP C	IIILEIIA/MACCP PIAN		
Good Retail Practices are preventative measures to						ns chen	nicals and physica	I objects into foods		
				for COS				on-site during inspection	Description	
OUT N/A N/O Safe Food and Water	V	cos		OUT		31 IX		se of Utensils	R=repeat violation	
30 Pasteurized eggs used where required	Р	0	12/2			se uten	sils: properly stor		V COS R	
31 Water and ice from approved source	P/Pf/C	_	0	44 0) Uter	nsils/equi	ipment/linens: pror	perly stored, dried, & handled		
32 O Variance obtained for specialized processing methods	Pf	0	0	45 🔾	Sing	le-use/si	ingle-service article	es: properly stored & used	P/C 0 0	
Food Temperature Control				46 🔾	Glo	ves use	d properly	, , , , , , , , , , , , , , , , , , , ,	c 00	
Proper cooling methods used; adequate equipment for	Delo							and Equipment	WEST COMMENTS	
temperature control	Pf/C	0	0	87 86	Foo	d and n	on-food contact s	surfaces cleanable,	1-20-	
34 O Plant food properly cooked for hot holding	Pf		0				signed, construct		P/Pf(C)	
35 O Approved thawing methods used 66 Thermometers provided and accurate	Pf/C	0	0					lled, maintained and used;	700	
Thermometers provided and accurate	PC	0	0	40	clea	ning ag	ents, sanitizers, a	and test strips available	Pf/C O	
Food Identification				(49)	Nor	-food co	ontact surfaces cl	lean	100	
37 Food properly labeled; original container	Pf/C	0	0	0'				ical Facilities	0	
Prevention of Food Contamination				50 🔾	Hot	and col	d water available	; adequate pressure	Pf 00	
38 O Insects, rodents, and animals not present		0					stalled; proper ba		(P)P(O)	
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness	P/Pf/C			52 🔿	Sev	vage and	d waste water pro	perly disposed	P/Pf/C O O	
41 Wiping cloths: properly used and stored		0	_	53 🔾	Toil	et faciliti	ies: properly cons	structed, supplied, & clean	Pf/C O	
42 Washing fruits and vegetables	C	0		54 0	Gar	page and	d refuse properly di	sposed; facilities maintained		
	P/Pf/C			(55) X	Phy	sical fac	cilities installed, m	naintained, and clean	P/P(C) 0	
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable.		56 0	Ade	quate ve	entilation and ligh	nting; designated areas use	ed COO	
			_			docume		ot used per CGS §19a-36f		
Person in Charge (Signature) Date	-10-	24	1			Violatio		Date corrections due		
	-		-				Item Violations	7-13-2	4	
Person in Charge (Printed) Vacin						iolation		7-20-2	9 20	
		^ A		Risk Fa	actor	Public H	Health Intervention	n Violations	1 /2	
Inspector (Signature)	0-2	14		Repeat	t Ris	Factor	/Public Health Int	ervention Violations	- L	
Inspector (Printed) Jose Ramicez			7	Good R	Retai	Practic	es Violations		7/	
10111100			_	Require	res F	einspe	ction - check box	x if you intend to reinspec	t '	
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to c	corre	ect any i	insp	ection v	iolation identified	d by the food inspector or	to hold, destroy,	

	Foo	<u>d Esta</u>	<u>blishment</u>	Inspec	ction R	leport	Page 2	of <u>ノ</u>
LHD_M	anchester		Inspection Report Co	ntinuation Shee	et	Da	nte7/10/	24
Establish	ment Burges Cl	22s	Town	manch	29429			
	- U		TEMPERATUR	E OBSERV	ATIONS		2010	
Item	/Location/Process	Temp	Item/Location/I		Temp	Item/Location	n/Process	Temp
NIC	chicken	38 F						·
	sliced cheek	38 F						
		38 =						
	Si'ed tomatoes	385						
	fr.Yes	50						
		000	OFFICE AND					
	Violations cited in this		SERVATIONS AN corrected within the tin				2 0 106 11 of the	o food oodo
Item Number				ic iraines below	r, or as stated if	1 360110113 0-403.111	& 0-400.11 OI tile	a 1000 code.
Number	Keuin - CF	em o	u zite					
49C	WIC fan	covers	unclean					
36PF	no thin -	probe	thermome	ter				
IDPF	no paper	to me to	dis perser	- 0+	pands'	07C	101010	1 000
10 11					MONO G.	$n \times p + c$	J 7907W	part
	oldered	-> to	arrive -	to day				
51 P	no air gar	2 00	duma sial	/ W/A .	foont	fance +	hore m	411
-								
뒿			shortened				sink th	iso line
51 c	dipper wer	1 leak	ing, PIC S	states p	art orc	Leved		
47 C							ed	
28 P	break dust	cleaner	- stored is	1/01/2	ed WI	C COMON	e inne	dia de lu
55 C	clutter I un	used	equipment	io	allway	OTC 54	e to 1 1 th	in 11
	200	27.675	within 1		- L	. 1+0 010	wico i j	
491	under from	-						
110_	011000 (107)	1 20071	10 00/00	V(1_C)7	4/1			
Note	OK to reoper	`						
100 10	100	SR						
								
Note	HUAC renaire	1) Service	d both col	d over a	Joitt E	asure its	+ 41 F	before
		pairs +	ho ughow	not an	proved	work on	ropair	inc
	Duct tape re items (i	ce machi	re reach i	0000	S. Ula	rill draws	a), suk	mit
	corrected	repairs	to health	dept.	,,			
Person in	Charge (Signature)						Date 7-	6-24
Inspector	(Signature)	-2				D)ate 7_	10-24

Risk Category: 2	Food Establ	lishn	nent Ir	nspect	ion Repor	t	Page 1 o	of <u>3</u>
Establishment type:	Permanent Temporary Mobile Other		- Date: (p/18/24					
Establishment ()	harley's Grilled Subs		4sering Consu	ection Health	Time In	1:00 AM	PM Time Out 12	:30 AMIEN
Address 1941	Buckland Hils Dr. # 2058		DP	H)		anches	ter	
Town/City Ma	nchester	j			Purpose of I	nspection:	Routine Pr	e-op
Permit Holder S	was woo		onnecticut De of Public H	lealth	Reinspection		Other	
Dialy factors are in	FOODBORNE ILLNESS RISK F							
	important practices or procedures identified as the most prevalent cont impliance status (IN, OUT, N/A, N/O) for each numbered it		Strange	compliance				O=not observed
	riority foundation item C=Core item V=violation type	-				CONTRACTOR OF THE PARTY OF THE	on-site during inspection	R=repeat violation
IN /OUT N/A N/O	Supervision	v	COS R		OUT N/A N/O		from Contamination	V COS R
	erson/Alternate Person in charge present,	Pf		15	0 0 0 F00			P/C () ()
de	emonstrates knowledge and performs duties	PI	00	(16)	∞ ○ Foo		aces: cleaned & sanitized	®Pf/C ○ ○
	ertified Food Protection Manager for Classes 2, & 4	0	00	17			of returned, previously	POO
9 17 3,	Employee Health	10	11				ned, and unsafe food re Control for Safety	
Ma Ma	anagement, food employee and conditional employee;	1		18			ne and temperatures	P/Pf/C O O
	nowledge, responsibilities and reporting	P/Pf	00	19 🔾	000 Fro	per reheating p	procedures for hot holding	
	roper use of restriction and exclusion	Р	00	20	900 Pro	per cooling tim	e and temperatures	POO
	ritten procedures for responding to vomiting and	Pf	00	21			temperatures	POO
di	arrheal events Good Hygienic Practices						g temperatures	POO
6 0 0 Pr	roper eating, tasting, drinking, or tobacco products us	e P/C	100	230	O O O Pro	per date marki	ng and disposition realth control: procedures	P(Ff')00
7 0 0 0 No	o discharge from eyes, nose, and mouth	C	00	24 0		records	lealur control. procedures	P/Pf/C O
	Preventing Contamination by Hands				/ / /		er Advisory	
	ands clean and properly washed	P/Pf	00	25 🔾	O S Cons	sumer advisory pr	ovided; raw/undercooked food	Pf OO
	o bare hand contact with RTE food or a	P/Pf/C	00				ptible Population	
pr	e-approved alternative procedure properly followed			26 0			ed; prohibited foods not offered	
100 X	dequate handwashing sinks, properly supplied/accessible	Pic	100				s and Toxic Substances	
1100 1	Approved Source ood obtained from approved source	DIDGO		27 0			proved and properly used	d POO
12 0 0 0 FC	ood received at proper temperature		00	28		ed & used	properly identified,	P/Pf/C O O
13 Ø O F	ood in good condition, safe, and unadulterated		00				Approved Procedures	
1400 00 R	equired records available: molluscan shellfish	P/Pf/C	Townson Townson	20	Con	npliance with w	rariance/specialized	
14 0 0 id	entification, parasite destruction	The society see			proc		ria/HACCP Plan	P/Pf/C O O
				RACTICE				MENNAME STORY
Mark OUT if numbers	Good Retail Practices are preventative measures ted item is not in compliance V=violation type Mark it							
OUT N/A N/O	ed item is not in compliance V=violation type Mark i Safe Food and Water	n appro	cos R	for COS ar	nd/or R CO		site during inspection	R=repeat violation
	rized eggs used where required	P	00		n-use utensils: p	Proper Use		V COS R
	and ice from approved source	P/Pf/C					y stored, dried, & handled	Pf/C O O
	ce obtained for specialized processing methods	Pf	00				properly stored & used	P/C 0 0
William Comment	Food Temperature Control			46 0	Gloves used pro	perly		C O O
	cooling methods used; adequate equipment for	Pf/C	00				nd Equipment	
temper	ature control ood properly cooked for hot holding	1000000		(FZL /8 (28.1)			faces cleanable,	P/P(C)00
	red thawing methods used	Pf/C	00		properly designe		, and used d, maintained and used;	
The state of the s	ometers provided and accurate		00	148 (d test strips available	Pf/C O O
	Food Identification			49706 N	Non-food contac	t surfaces clea	n	000
(37) Food properly I	labeled; original container	P	00				al Facilities	U -
<u> </u>	Prevention of Food Contamination			50 O F	lot and cold wat	er available; a	dequate pressure	Pf O O
	s, and animals not present		00		Plumbing installe			P/Pf/C O O
	prevented during food preparation, storage & display		00		Sewage and was			PIPfIC O
40 Personal clean	properly used and stored		00				ucted, supplied, & clean	Pf/C O O
42 Washing fruits		P/Pf/C	00				osed; facilities maintained ntained, and clean	C O O
		-					ng; designated areas used	000
Permit Holder Shall not	tify customers that a copy of the most recent inspection rep	ort is ava	ailable.	ON	Natural rubber la	tex gloves not	used per CGS §19a-36f	. 0 0 0
	monitor 11		211	Violation	ns documented		Date corrections due	#
Person in Charge (Signature)	gnature)////gm//mrg/Date 6//	8/2	7		tem Violations		6-21-24	2
Person in Charge (Pr	inted) Meguel Livera				oundation Item m Violations	violations	6-28-24	1,4
Transfer in Gridings (1.1	1 - 12	_/_	. 11		tor/Public Healt	n Intervention	6-28-24 Violations	162
Inspector (Signature)	Date 6	812	14				vention Violations	–
	R- COR ANICOS	1			etail Practices Vi			
Inspector (Printed)	Sase Kamirez	Lta		Require	s Reinspection	- check box if	you intend to reinspect	
or disp	or operator of a food establishment aggrieved by toose of unsafe food, may appeal such order to the	Direct	or of Hea	ect any in ilth, not la	ispection violati iter than forty-ei	on identified to ght hours after	by the food inspector or er issuance of such orde	to nold, destroy, r.

Food Establishment Inspection Report Page 2 of 3	
LHD Marchester Inspection Report Continuation Sheet Date 1/18/24	
Establishment Charley's Grilled Subs Town Manchester	
TEMPERATURE OBSERVATIONS	
Item/Location/Process Temp Item/Location/Process Temp	_
Cold prep table chicken 41 F Hot Hold Cheese source 138 F Hand sink by ice machine 95 F	
Steak 317 W/C 3 iced cheese 417	
Shredded cheere 4/F / Sliced tomatoes 4/F	
Mozzsticks 91F Chicken 27F	
Sauchicken 32F	
3 liced cheese 91F	
Sliced tomatoes 39F	
Hot hold Fries 135F OBSERVATIONS AND CORRECTIVE ACTIONS	
Item 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	
Number Kevin manager on site (not CFPM)	
49c Metal cart on cookline unclean	
20 NO CFPM on Site Migrel (CFPM) arrived midway through inspection	'න්
10PF NO Soap at hand sink by ice machine	
10PF No paper towels at hand sink by ice machine	
370 unlabeled Squeeze bottles at front service line	
23 PF Food not properly Late madely.	
38PF live roaches under 500 a station by 805	
49c Ceiling tiles unclean throughout	
49c exterior of equipment at cookline unclean	
47RE Shelving under Soda station at cookline damaged functionable	
52P Grease trap missing cover/unclean/emptying into uncovered bucket	+
490 Walls unclear throughout	
55C + KP not sealed to wall throughout	
4710 WIF Gasket Jamaged	
490 WIF Floor unclean	
47RE exposed insulation in WIF	
47RWC Gasket Jamaged	
71C Shelving in Wic peeling	
37C Containers of food not labeled throughout	_
190 Floors unclean throughout, especially under equipment	
The Ice machine not inuse. New unit arrives in a few weeks. Using Burger class	. Z2 Y
Note Multiple glue traps full of live coaches at Front line. Traps replaced 2 da	15
Person in Charge (Signature) Magnet France Date 6/18/24	-
Inspector (Signature) Date 6/18/29	

	Foo	d Estal	blish	men	<u>t Inspe</u>	ction R	eport Page 3	_of_3_
LHD Manches					ontinuation She		Date	8/24
Establishment Ch	arley's	Brilled	Sobs	Town_	manch	rester		
			TEMPI	ERATU	RE OBSERV	/ATIONS		
Item/Location/Pro	ocess	Temp	Item/	Location	Process	Temp	Item/Location/Process	Temp
Health	Dept	Cell						
860-73	4-60	669						
				~				
Violation	s cited in this	OBS	SERVATION CONTROL OF THE CONTROL OF	ONS AN	D CORREC	TIVE ACTION	NS sections 8-405.11 & 8-406.11 of th	
Item Number	01.00 117 1110	report mast be	corrected wi	umi uie ui	ne names belo	w, or as stated in	sections 8-405.11 & 8-406.11 of th	ie tood code.
1		(0 (1 -	. 1-	•			
160 100	age.	(oom f	$\frac{1}{2}$	ACIE	<u>an.</u>			
101 100 50	anitized	prepar	ed. ((02)			
NOTES DISC	ussed 1	Koper o	date	Mack	king. All	ready t	s cat refrigerate r used within 7	وإ
Foods	MUST	be dat	te mac	kel 1	all Lis	cardela	1150 Julithin 7	days
Foods	المم	la sa cla		:0	<u> </u>	Line all	0365 WILMIN 1	cays.
(000)	1107 00	te mark	ed out	ing	<u>(einspec</u>	TION WILL	need to be disc	Calded.
Note PIC &	tates	and a	contral	60	cuise 1	kroate o	every 4 weeks. ected to email reports by 6/	
Part	antral	4651 C	Onnot	ے ا	II a	Meags &	every 4 weeks.	
1651 0	20117(01	report	not a	zvano	ible. Yi	ic instru	ected to email	
Star	nicez	manch	vester (ct. g	ov pes	t control	reports by 61	21/24.
							, , ,	1 .
Note overa	Il uncle	an. Tho	rough	rlead	ning App	ded Flor	ors, walls, ceiling	
001	ovtocin	اه که م	The o	PAG	ioment	-41154 las	cleaned and months in 10 do	امدانیما
Madac		07 W	ci cholora	Cyp	HIPPORT	MUST DE	cleanes and m	naintained.
Magres	sau	COLE	C V:	olan	ons rego	irding cle	autimen in 10 ga	iys. [6/28
Note Hood K	pattles	are cl	ean. Y	1C 5	states k	paffles i	are cleaned dail	.(/.
Hood	was 2	lue to	be 1	lean	ed Aor	il 2024		1
					-0 / 171	11 0000	*	
1100 000	M = CO = =	00 -1 -1-06	1 - 1	7/000	l-c .	(A 20M	. No. 1
1000 500	11015 6	riplayees	10 (-TT 1	Trainin	g to ea	nsure a CFPM i	5 on
Site	golive	3 all o	perati	ng t	100(5.)			
Note Spoke	with B	obby, c	mrer)	vol	untaril	y closine	, Ar the day.	Heg. 14h
Ded.	to re	inspect	ivo h	Shen	cleanl	ings is	sue are addre	Sed.
poror	tor	e openin	g H	ea 14r	Deot	G UDOU	val required.	
Person in Charge (Sig	nature)	Mount	theren	7		PA	Data blie	114
Inspector (Signature)				o'			Date 6/18/	2/24

Risk Categor	y: 2	Food	Establ	ishm	nent	t In	spec	ctic	n R	eport	t		Pag	e 1 of	3_
Establishment type: Permanent Temporary Mobile Other								_	Date:	71	2	24			
Establishment Cheeks Chicken & Waffles					+seping	Connect						3:30	_AM(PN		
		enter St.					H)	1	LHD	Mar	nch	este			
Town/City		chester						1	Purpo	se of In	specti	ion:	Routine	Pre-op	
Permit Holde					of Pub	olic He			Control Michigan	pection		Otl	ACTION AND		
		FOODBORNE ILLNESS													
		ant practices or procedures identified as the most				Del Folk Kanada	THE PERSON NAMED IN CO.					200	Maria Company	BIOWARD B	_
P=Priority item	1000	ance status (IN, OUT, N/A, N/O) for each					compliar	_		=not in co			/A=not applicable	N/O=not	
IN OUT N/		ty foundation item C=Core item V=vio Supervision	plation type	Mark in	cos			and the same of	and Lances of Lances		- Marian Marian		n-site during inspection		eat violation
IN OUT NA		n/Alternate Person in charge present,	2 700 2 2 2 2		COS	~			T N/A				om Contamination protected		COS R
1990		nstrates knowledge and performs dutie		Pf	0	\circ	60		0	Food	d-contac	ct surface	es: cleaned & sanit		
2 000	Certifi	ed Food Protection Manager for Class		С	0		17 Ø	100	MISSINE I	Prop	er disp	osition of	returned, previous	ily	to book head
	3, & 4						11	1					d, and unsafe food		POO
	Manag	Employee Health gement, food employee and conditional en	malayaas				10	1		Time	e/Temp	erature	Control for Safety		
3 00		edge, responsibilities and reporting	nployee,	P/Pf	0		18 🔾			Prop	er cook	ating time	and temperatures cedures for hot hol	P/P	F 0 0
4 8 8		r use of restriction and exclusion		Р	0	0	20 🔾		20	Prop	er cool	ing time	and temperatures	ung	P 0 0
5 60	Writte	n procedures for responding to vomiting	ng and	Pf	0		21 🔾	1	0	Prop	er hot h	nolding te	mperatures		P 0 0
	diarrh	eal events		FI			22 0		0	O Prop	er cold	holding t	emperatures		200
600	OPropo	Good Hygienic Practices		- 5/0			23 C	A		○ Prop	er date	marking	and disposition	FVE	900
7 00 0		er eating, tasting, drinking, or tobacco packarge from eyes, nose, and mouth	products use	e P/C	00		24 🔾		0		e as a p records		Ith control: procedu	ures P/Pf	1C 00
		Preventing Contamination by Hands	s	1.6				4		/ and i			Advisory	E	
8 0 9		s clean and properly washed		P/Pf	0	0	25	0	0	Const			ded: raw/undercooked	food F	of 00
9 000		re hand contact with RTE food or a	VEX.00	P/Pf/C	0					/ H	lighly S	Suscepti	ble Population		
		proved alternative procedure properly			100000		26					541.5543.600 ·	prohibited foods not off		(C O O
1000	Adequ	ate handwashing sinks, properly supplied	/accessible	PIC		\bigcirc			1				nd Toxic Substan		
11000	Food	Approved Source obtained from approved source		DIDUO			27 🔾		0	Food	additiv	es: appr	oved and properly		POO
		received at proper temperature		P/Pf/C P/Pf			®	10			c substa ed & usa		operly identified,	P	f/C O O
13 60		in good condition, safe, and unadulter	ated	P/Pf		8		1/-	Maria I				proved Procedur		
14000		red records available: molluscan shell	fish	P/Pf/C			29 🔾		6	Com	pliance	with vari	ance/specialized		, a a
	identif	fication, parasite destruction		2000 C 2000 C		-				proce	ess/RO	P criteria	/HACCP Plan	P/Pi	
		Good Potail Practices are preventable					ACTIC								
Mark OUT if	numbered its	Good Retail Practices are preventative em is not in compliance V=violation ty					or COS							-	
OUT N/A N/O		Safe Food and Water	pe iviai k ii	V	1	R	OUT	-	OI K			Use of	e during inspection		cos R
	Pasteurize	d eggs used where required		Р		0			use ute	ensils: pr	operly	stored	Dielisiis		000
31 🔾	Water and	ice from approved source		P/Pf/C	0	0	44	Ute	nsils/ed	quipment	/linens:	properly s	tored, dried, & handl	ed Pf	00
32 0 0	Variance o	btained for specialized processing me	thods	Pf	0	0	45 🔾	Sin	gle-use	e/single-se	ervice a	rticles: pro	operly stored & used	P	C O O
No. of the last of	Dropor coo	Food Temperature Control ling methods used; adequate equipme	-16				46	Glo	ves us	sed prop					
33	temperatur		ent for	Pf/C	0		0 .0	Ear	d and	l non foo			Equipment		
34 000		properly cooked for hot holding		Pf			47 🕸					ict surfac ructed, ai	es cleanable,	P/Pf	800
35 000	Approved t	hawing methods used			0								maintained and use	ed:	
		ters provided and accurate			0		48	cle	aning a	agents, s	sanitize	rs, and te	est strips available	Pf/	00
27/20/5		Food Identification					49)			contact				(6	300
37 Kg Food pi	roperly labe	led; original container		Pef/C								hysical F			
38 & Inserte	rodents a	Prevention of Food Contamination and animals not present		(PA)	0								quate pressure		of 00
39 00 Contam	ination preve	ented during food preparation, storage & d	lisolav	Pf/O	0								w devices disposed	P/Pf/ P)Pf/	
40 Person	al cleanlines	SS	ор.а)		0								ed, supplied, & clea	an Pf/	
		perly used and stored		0	0	0	54 🔾	Gar	bage a	and refuse	e proper	ly dispose	d; facilities maintain	ed (000
42 Washin	g fruits and	vegetables		P/Pf/C	0		(55)	Phy	sical f	facilities	installe	d, mainta	ined, and clean	P/Pf	000
Permit Holder	shall notify c	ustomers that a copy of the most recent ins	spection repo	ort is ava	ilable.		6	Nat	ural ru	ubber late		es not us	designated areas a ed per CGS §19a-	36f	
Person in Cha	rge (Signat	ture) M. Hell Da	te 7-2	2-2	4	_	Priority	/ Iten	n Viola	mented ations	r: -1 - r:		ate corrections o	4	# 3
Person in Cha	rge (Printe	d) Heseeb Ahme	u!			_	Core It	em \	/iolatic			ntion Vio	10 2 2		27
Inspector (Sig	nature)	Da Da	te 1	12	24		Repea	t Ris	k Fact	or/Public tices Vio	Health	n Interver	ition Violations	1	28
Inspector (Pri		Jase Kamilez					Requir	res F	Reinsp	ection -	check	box if vo	ou intend to reinsp	ect	
Appeal: The	owner or o	perator of a food establishment aggi	rieved by th	is orde	er to c	corre	ect any	insp	ection	n violatio	n ident	tified by t	the food inspector	or to hold	, destroy,
	UI UISDOSE	of unsafe food, may appeal such o	rger to the	Directo	or of h	real	in not	later	than	torty-eig	tht hou	re after is	sellance of such o	rdor	

	F00	u Esta	piisnment in	spection i	Report Page	_of				
LHD_Man	chester		Inspection Report Continua	tion Sheet	Date_ 7 2	24				
Establishmen	nt Cheeks	Chicker	Town Mai	nchester	,					
TEMPERATURE OBSERVATIONS										
	cation/Process	Temp	Item/Location/Proces		Item/Location/Process	Temp				
Ldoor K	C North America				Hand Sink by 3 bay	IDF				
	Chicken	38F			Bathcom Sink	102F				
		OBS	SERVATIONS AND CO	RRECTIVE ACTION	ONS					
Item	Violations cited in this	report must be	corrected within the time fran	nes below, or as stated	in sections 8-405.11 & 8-406.11 of the	e food code.				
Number	aseeb CFP	mon s	ite							
43C S	Cage bucc	ied in	White flour b	in						
52 P C	verse from	0.4	1111 0 4 1001 DI	1						
2800 1	line	1107 ope	rating. Strong) odo(.						
27.6 P	11 bill	n+ aca	and 3 bay. H	eavy presense	۷.					
37C U	Mabeled C	ontainers	sunlabeled My	y granular	5 throughout					
41 C W	let rag s	stored o	in preptable l	by prep Si	nk, throughout					
	valls uncli	ean thro	oughout							
49€ €	exterior of	Flour	bins unclea	40	26					
1.0		5247	bay unclea							
15C C	ontainer or	Edry	batter on pre	o table no	+ coursed					
49C e	exterior as	Canio	ment unclean	1 10010						
	askets und	-lean +	houghast							
49 C	nferior of	1 200	RIC unclean	sh couch	٠.,٧					
490 <	helving u	acles o	How has b	, 47/1009/N	00 (
39C C	ations of	~ ~ ()	ketchup Stored	1 . (1-1						
550 <	100000	on 1: 11	KEIGHOF STORES	1. 1.1.						
55 c h	lacia Na	11 .	of garbage / c	0198						
280 I	des in mo	ulin 3	torage room	1						
30 \ 10	arge gap	in reac	door not so	rcened						
in a	uper towers	s not in	dispenser in	n bathroom						
49C U	fility (oor	n Floor	unclean, line	ed w/ car	dboard					
50PF (C	DOCAT SCOPPI	nas oces	ent in Utility	room						
16 P N	o Sanitiza	er prepa	ared.							
	arge (Signature)	M. A	ed_		Date 07/2	1/26				
	nature) \ See	2				1-24				
13.3	The second				Date / 2	. 9				

Fo	od Esta	ıblishment Inspe	ection R	eport Page 3	of <u>_</u>						
LHD Manchester Inspection Report Continuation Sheet Date 7-2-24											
	Establishment Cheeks Chicken Town Manchester										
TEMPERATURE OBSERVATIONS											
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp						
WIC Sliged format	es 38F										
1 Chicken	Chicken 37F										
Cheese	37F										
Mac & cheese											
Lanc RIC True											
raw chicken											
	20112	SSERVATIONS AND CORRE									
item	nis report must b	e corrected within the time frames be	low, or as stated in	sections 8-405.11 & 8-406.11 of	the food code.						
Number											
390 Ice bui	la up i	n chest Freeze									
49c Shelvina i		unclean	X	· · · · · · · · · · · · · · · · · · ·							
		Vi 1901 1901 100									
39C Food Stored	- ,,	Y									
23PF Food not p	roper 14	date Marked	·								
490 WIC Floor	unclean										
490 Shelving u	inder or	eptables unclea	n	•							
		on chest freezer b									
7 1111		bottles at cookline	7								
1.10,00.00	V ,		1-								
		stored w/ Food produ	DCTS								
47C Non Commerce	ial toas	ter at cook line									
560 lights about 560 Hood baff	ve cooklin	ne not shielded									
360 Hood baff	les unc	can									
Moto HANDA 14.	SP.P.h	scheduled to r	neet at	affice at la	2//						
700 C 100000 (100.	200 od	schools to p	ovelad	0991ce at 19	0.0						
come pr	epareu	MITH A COM	piered	application	ana						
payment	*										
		Λ									
Person in Charge (Signature)	М.,	tide		Date 7-	2-24						
	, /			Date	/						

Inspector (Signature)

Risk Category: 3 Food Establ	ishm	nent	t In	specti	on Report		Page 1	of 2
Establishment type: Permanent Temporary Mobile Other					Date: 7-29	- 24		
Establishment Chez Ben		4eening	Connect	ticur Health	Time In 1:00	AM/PM	Time Out 2:0	OO AM/PA
Address 927 Center St		DI		H)	LHD Manches	ster		
Town/City Manchester		onnecticu	rt Den		Purpose of Inspection			e-op
Permit Holder JOEI GUIRION	X15.7	of Pub	blic He	alth	Reinspection	Other		
FOÓDBORNE ILLNESS RISK FA			_					
Risk factors are important practices or procedures identified as the most prevalent cont. Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it			200000	compliance	OUT=not in compliance			O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type			75. 0			27 177 277	te during inspection	R=repeat violation
IN DUT N/A N/O Supervision	V		R				Contamination	V COS R
Person/Alternate Person in charge present			0000	15				P/C 0 0
demonstrates knowledge and performs duties	Pf	0		160 A			cleaned & sanitized	
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17			turned, previously and unsafe food	P 0 0
Employee Health				1			ntrol for Safety	
Management, food employee and conditional employee;	P/Pf	0			O O Froper cooki			P/Pf/C O O
knowledge, responsibilities and reporting					o of roper rehea	ting proced	dures for hot holding	
Proper use of restriction and exclusion	Р	0	의		Proper coolin	ng time and	temperatures	P 0 0
Written procedures for responding to vomiting and diagrheal events	Pf	0	\circ	21 2	Proper hot h			P 0 0
Good Hygienic Practices	OVE THE				Proper date			P/Pf 0 0
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0		Time on a pu		control: procedures	
7 Ø No discharge from eyes, nose, and mouth	С		$\overline{\bigcirc}$	24 0	and records		, returnes, n eresenta	P/Pf/C O
Preventing Contamination by Hands					Co	nsumer Ac	dvisory	
8 Hands clean and properly washed	P/Pf	0		25 00 0			d: raw/undercooked food	Pf O O
9 No bare hand contact with RTE food or a	P/Pf/C	0					Population	
pre-approved alternative procedure properly followed	- 7552 7552	5,550		26			hibited foods not offered	
Adequate handwashing sinks, properly supplied/accessible Approved Source	Pf/C	101	0	27 6		- American	Toxic Substances	
11 Ø Food obtained from approved source	P/Pf/C			27	WANGES .	the second secon	ed and properly used	
12 O Food received at proper temperature		0		28 00 0	stored & use		erly identified,	P/Pf/C O
13 O Food in good condition, safe, and unadulterated		0		/			oved Procedures	
14 O Required records available: molluscan shellfish	P/Pf/C	0		29	Compliance		ce/specialized	D/D/IO
identification, parasite destruction				1000	process/ROF	criteria/H	ACCP Plan	P/Pf/C O
				ACTICES				
Good Retail Practices are preventative measures to Mark OUT if numbered item is not in compliance V=violation type Mark i				or COS and				D
OUT N/A N/O Safe Food and Water	v v	-	R	OUT		Use of Ute	uring inspection	R=repeat violation v cos R
30 Pasteurized eggs used where required	Р	0	-		-use utensils: properly s		113113	C 00
31 O Water and ice from approved source	P/Pf/C		_		ensils/equipment/linens: p		ed, dried, & handled	P /O OO
32 O Variance obtained for specialized processing methods	Pf	0	0		ngle-use/single-service ar	ticles: prope	erly stored & used	P/C 0 0
Food Temperature Control				46 O G	loves used properly			c 0 0
Proper cooling methods used; adequate equipment for	Pf/C	0	\circ			sils and Ec		
temperature control Plant food properly cooked for hot holding		3.50			ood and non-food contact			P/Pf/C O O
35 O Approved thawing methods used	Pf	00			operly designed, constr			
36 Thermometers provided and accurate	Pf/C	0	\approx		arewashing facilities: in eaning agents, sanitizer			Pf/C O
Food Identification	1	101		49 X NO	on-food contact surfaces	s clean	> Surps available	000
Food properly labeled; original container	PIC)0		-		ysical Fac	ilities	0
Prevention of Food Contamination	T. T.			50 O H	ot and cold water availal	ole; adequa	ate pressure	Pf O O
38 Insects, rodents, and animals not present		0			umbing installed; prope			P/Pf/C O O
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness	P/Pf/C				ewage and waste water			P/Pf/C O O
41 Wiping cloths: properly used and stored		0	-		pilet facilities: properly c			Pf/C O O
42 Washing fruits and vegetables	P/Pf/C	00			arbage and refuse properly nysical facilities installed			C O O
					dequate ventilation and			C 0 0
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable.		O Na	atural rubber latex glove			
Person in Charge (Signature)	-7	9-			s documented	Date	e corrections due	#
Person in Charge (Signature)	ι				m Violations		Q 15 01	0
Person in Charge (Printed)					undation Item Violations Violations	5	8-10-24	
		72	,		or/Public Health Interver	ntion Violet	0-29-24	1 5
Inspector (Signature) Date	29-	-24	4	Repeat Ri	sk Factor/Public Health	Interventio	n Violations	,
Land Otose Range				Good Reta	ail Practices Violations			5
Inspector (Printed) Sose Kamilez				Requires	Reinspection - check	oox if you i	intend to reinspect	
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to c	corre	ect any ins	pection violation identi	tied by the	tood inspector or	to hold, destroy,
or dispose of unsafe food, may appeal such order to the	Directo	א זט וכ	real	ui, not late	than forty-eight hour	s after issu	uance of such orde	Г.

Food Establishment Inspection Report Page 2 of 2

LHD Manchester		Sheet	Date_7-2	7-24							
Establishment Chez	Ben	Town Manc	nester								
		TEMPERATURE OBSE	RVATIONS								
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp						
Hot Hold Potatoes	5 195F	Hot Hold gravy	140F	Handsink by WIC	126F						
Burger cooked to 1	198F	WIC Potatoes	39F	Dish machine chlorine	looppm						
Cold Preptable		1 meat pie	39 F	Customer BR sink	115F						
1 Sliced che	resc 40F	1	39=	COSIGNO DIN SIMA	1101						
diced han		Cag Salad	38F								
		diced nam	707								
(au beef	40 F	1 door RIC True	211								
tuna Sala		1 Cream	35F								
1 Kielbasa	415	OFFICIAL AND CORP.									
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.											
ALCHI .											
Number											
490 Shelving in back Storage unclean											
49c Pipes around had unclean											
37C unlabeled squeeze bottles at cookline											
490 interior of Frigidaire RIF unclean											
168F interior of drawer under subway toaster unclean											
44c equipment drying on wet rags on preptable											
	0141119 01	wer rags on pro	er table								
			State								
Note Discussed	only keeping	a Small quantities	of Food b	by grill as needed.							
Note Discusse	d occoper d	ate marking.		13							
Note Discussed	proper cooli	na. 135F > 701	= in 2 h	ours. 70F->41Fi	2						
4 addition		٠,٠٠٠		1,1							
		hand contact W/	ready to	o eat foods. Bare	hand						
Contact h	ol ready to	eat food > Food	1 must 6	o eat foods. Bare loe discarded.	* *						
Note Test S	rrips & th	ermometer availab	le								
Person in Charge (Signatu	re) Seel	Down		Date 7-29	-24						
Inspector (Signature)											

Risk Category: 2 Food Establishment Inspection Report Page 1 of 2									
Establishment type: Permanent Temporary Mobile Other						Date:	116/20	24	
Establishment COUNTY and		+serin	Conne	eticut Healt	1	Time In_	111000	M)PM Time Out_//:	00 AMPM
Address 225 Slater St		7	D	H		LHD /	nanch	ester	0
Town/City Manchester					7	Purpose	of Inspection:	Routine Pre	e-op
Permit Holder Heather Lodge (CFPM)	Co	onnectic of Pu	ut De	partmen ealth	it	Reinsped	ction	Other	
FOODBORNE ILLNESS RISK FA									Mark I Brun
Risk factors are important practices or procedures identified as the most prevalent cont Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if				dborne i			ventions are contro		ss or injury. D=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type								ted on-site during inspection	
IN OUT N/A N/O Supervision	V	cos	-			UT N/A N/O		on from Contamination	V COS R
1 Person/Alternate Person in charge present,	Pf	0	0	15		000	Food separated	and protected	P/C O O
demonstrates knowledge and performs duties			$\stackrel{\smile}{-}$	16	2			urfaces: cleaned & sanitized ion of returned, previously	P/Pf/C O O
2 Certified Flood Flotection Manager for Classes 2, 3, & 4	С	0	0	17	8		served, recondi	tioned, and unsafe food	POO
Employee Health							Time/Tempera	ture Control for Safety	
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	0	0	18 0			Proper cooking	time and temperatures g procedures for hot holding	P/Pf/C O O
4 Proper use of restriction and exclusion	Р	0	0			500	Proper cooling	g procedures for not holding time and temperatures	P O O
Written procedures for responding to vomiting and	Pf		0			000	Proper hot hold	ing temperatures	POO
diarrheal events	Fi		\Box	22	S	000	Proper cold hole	ding temperatures	POO
Good Hygienic Practices 6 O Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0	23				rking and disposition c health control: procedures	P/Pf O O
7 O No discharge from eyes, nose, and mouth	C		허	24			and records	c nealth control: procedures	P/Pf/C
Preventing Contamination by Hands							Const	umer Advisory	
8 O Hands clean and properly washed	P/Pf	0	0	25				y provided: raw/undercooked food	Pf OO
9 bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	0	0	26	1			ceptible Population used; prohibited foods not offered	
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	20 0				ves and Toxic Substances	P/C O O
Approved Source	-1/			27	3	Name and Address of the Owner, where		approved and properly used	POO
11	P/Pf/C			28	1		Toxic substance	es properly identified,	
12 C Food received at proper temperature 13 Food in good condition, safe, and unadulterated		0	_	20			stored & used		P/Pf/C O
Paguired records qualified malluseen shallfish	P/Pf		0	Н				th Approved Procedures h variance/specialized	1
identification, parasite destruction	P/Pf/C		9	29				riteria/HACCP Plan	P/Pf/C O
God Retail Province and additional Control of the C	OD RE	TAIL	. PR	RACT	ICES				
Good Retail Practices are preventative measures t Mark OUT if numbered item is not in compliance V=violation type Mark it	n approp								Description
OUT N/A N/O Safe Food and Water	v	cos	-	-	UT	aror K		on-site during inspection e of Utensils	R=repeat violation v cos R
30 Pasteurized eggs used where required	Р	0	0			-use utens	ils: properly stor		c 00
31 O Water and ice from approved source	P/Pf/C		0					erly stored, dried, & handled	Pf/C O O
32 Variance obtained for specialized processing methods	Pf	0	0		The second second		Market Committee	es: properly stored & used	PC 0 0
Proper cooling methods used; adequate equipment for		1		40	الحارك	loves used		and Equipment	C 00
as cooling methods used; adequate equipment for temperature control	Pf/C	0	0	47	F	ood and no		surfaces cleanable,	P/Pf/C O O
34 O Plant food properly cooked for hot holding	Pf		0	41			igned, construct		P/Pf/C O O
35 Approved thawing methods used 36 Thermometers provided and accurate	Pf/C	0		48				lled, maintained and used; and test strips available	Pf/C O O
Food Identification	FIIC		$\overline{}$	49			ntact surfaces c		c 00
37 Food properly labeled; original container	Pf/C	0	0					ical Facilities	7000
Prevention of Food Contamination								; adequate pressure	Pf O O
38 Insects, rodents, and animals not present 39 Contamination prevented during food preparation, storage & display	Pf/C P/Pf/C	0		51 0	O PI	umbing ins	stalled; proper ba	ackflow devices	P/Pf/C O O
40 Personal cleanliness		0					waste water pro	structed, supplied, & clean	P/Pf/C O O
41 O Wiping cloths: properly used and stored	С	0		54	X Ga	arbage and	refuse properly di	sposed; facilities maintained	000
42 Washing fruits and vegetables	P/Pf/C	0	0	55	OPI	nysical faci	lities installed, n	naintained, and clean	PIPIC O O
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ilable	2					nting; designated areas used not used per CGS §19a-36f	000
Person in Charge (Signature)	6/2	zi		Viola	ation	s documer em Violation	nted	Date corrections due	#
Person in Charge (Printed) Heather Look	100	1	\neg	Prior	ity Fo	undation It	tem Violations	16 127 1	_
A Cook III Olarge (Filling)	10 1	V.	-			Violations or/Public H	ealth Intervention	101(6) 7024 on Violations	3
Inspector (Signature) g. January Date 7110	124			Repe	eat R	isk Factor/	Public Health Int	ervention Violations	
Inspector (Printed) LAUTEN FRANCIA	-		7	Good	d Ret	ail Practice	s Violations		3
	his orde	er to	COTT	ect ar	uires	nection	uon - cneck bo	x if you intend to reinspect	a hold dost-
ppeal: 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.									

FOO	a Esta	ibiisnment inspe	ction i	Keport	Page	_ of				
LHD Manchester		Inspection Report Continuation Shee	et		Date_7/16/2	7024				
Establishment COUNTY OF	y-sia+									
		TEMPERATURE OBSERV	Commence of the Commence of th							
Item/Location/Process	Temp	Item/Location/Process	Temp		cation/Process	Temp				
Bacon - hot	135F	Front bay Maru	AOF	quat sai		200pm				
2 door cold prep	36F AbF	vogurt	40 F	700000	1					
butter		cutscantalope	39 F		Ten Date	np▶Rite。 §				
creamcheese	405				Emp:	eado				
2 door Freezer	-77				ES ACES AZUL CI	WHEN BLUE TURNS ORANGE PTABLE CLANDO LA BARRA AMBIA A COLOR HARANIA				
Lavor Field						60°F/71°C				
OBSERVATIONS AND CORRECTIVE ACTIONS										
Violations cited in this		e corrected within the time frames below			5.11 & 8-406.11 of th	ne food code.				
Number CFPM: Heat	nerl	odge								
45c coffee filter	rs not	profected above co	Of ite in	achine						
Thermomet			,	world - c						
good equipm	nent lu	itensil storage								
no cooking	1	The last								
		gupment stored	anara	ound of	Kitchen					
45 c To an hoxes &	stored	on Floor by back &	CHATA	ne roor	n					
Test strips			<u>, , , , , , , , , , , , , , , , , , , </u>							
overall very	clean	+ organized								
- V21 X(12113		J								

		.1 .1			2	,				
Person in Charge (Signature)	. 7	V/ }-	_		Date 7//	6/24				
Inspector (Signature)	moun	V			Date 7/16/	12024				

Risk Category: 3 Food Estab	lishn	nen	t Ir	nspec	ctic	on Rep	ort		Page 1 o	of 2		
Establishment type Permanent Temporary Mobile Other						Date: (14/24					
Establishment Crab Catcher		+secur	on Contra	ection Health		Time In_	2:00	WED	Time Out_3;	30	_AM	(E)
Address 40 MTW		D	P	H)	1	LHD N	lanche	ster				
Town/City Manchester						Purpose	of Inspection	Ro	uting Pro	e-op		
Permit Holder Licenzy Bio Chen		of Pu	ablic H	epartment Health		Reinspec		Other _				
FOODBORNE ILLNESS RISK F Risk factors are important practices or procedures identified as the most prevalent cor										nee or iniu	n.	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered		1000	25 01=	compliar			t in compliance			O=not o		ed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appr	opria	ate box fo	or CC	S and/or F	COS=correc	ted on-site	during inspection	R=repea	at viola	ation
IN OUT N/A N/O Supervision	V	cos	R			T N/A N/O			ontamination	V		R
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0				Food separated				1	0
Cortified Food Protection Manager for Classes 2	-			(B)	1	9 9 9			eaned & sanitized ned, previously	POS		0
2 7 O Certified 1 ood Protection Warrager for Classes 2,	C	0	0	17			served, recondi			F	PO	0
Employee Health							ime/Tempera	ture Contr	ol for Safety	6 18	Jion.	
3 Management, food employee and conditional employee;	P/Pf	0		18 🔾		00	Proper cooking	time and to	emperatures	P/Pf/	CO	0
knowledge, responsibilities and reporting Proper use of restriction and exclusion	MIDD U			19 0	2		roper reheating	g procedu	res for hot holding		90	
Written procedures for responding to vamiting and	P	0		21 0			Proper cooling Proper hot hold				0	-
djørrheal events	Pf	0	0	22 00	1		Proper cold hol				00	0
Good Hygienic Practices	IL SE	The To		230		00	Proper date ma	rking and o	disposition	PPf	-	0
Proper eating, tasting, drinking, or tobacco products us				24 🔾		00	Time as a publi		introl: procedures	P/Pf/C		
7 No discharge from eyes, nose, and mouth	C	0	9				and records			FIFIC		
Preventing Contamination by Hands 8 Hands clean and properly washed	D/Df	0		25	10			ımer Advi			Ta	
No hare hand contact with RTE food or a			\subseteq	23	1		Highly Sus		aw/undercooked food	Pf		0
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 🔾	0	0			ted foods not offered	P/C		0
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	W. String	/	Foo	d/Color Additi	ves and To	oxic Substances			
Approved Source	1			27	10				and properly used	I F	0	0
Food obtained from approved source 12 Food received at proper temperature	P/Pf/C		읭	(28)	X		Toxic substance	es properly	identified,	PPf		0
13 Food in good condition, safe, and unadulterated	P/Pf	_	8		1	107/06	stored & used	th Annroy	ed Procedures			_
14 Required records available: molluscan shellfish	P/Pf/C	0	0	29		1000000	Compliance wit			DIDGO		
Identification, parasite destruction							process/ROP c	riteria/HAC	CP Plan	P/Pt/C		\circ
Good Retail Practices are preventative measures	to contro	IAIL	. PK	RACTIC	ES		ala and abouts	1-1: 1:1		THE REAL PROPERTY.		ls.
				for COS			COS=corrected			Description		
OUT N/A N/O Safe Food and Water	v	cos	-	OUT	-	OI IC	Proper Us			R=repea	cos	-
30 Pasteurized eggs used where required	Р	0	0	(43) X	In-L	se utensil	s: properly stor	ed		(0)		0
31 Water and ice from approved source	P/Pf/C	_	_	44	Ute	nsils/equipr	ment/linens: prop	erly stored,	dried, & handled	Pf/C		0
32 Variance obtained for specialized processing methods	Pf	0	9				gle-service article	es: properly	stored & used		0	
Proper cooling methods used; adequate equipment for		T	-	46	GIO	ves used		and Faul		С	0	0
temperature control	Pf/C	0	\circ	OX	Foo	od and nor	n-food contact s	and Equipurfaces cle	eanable			
34 O Plant food properly cooked for hot holding	Pf		0	4			gned, construct			PPC		0
35 Approved thawing methods used 36 Thermometers provided and accurate		0		48					ained and used;	Pf/C	0	
36 Thermometers provided and accurate Food Identification	Pf/C	0	9				nts, sanitizers, a		ips available			0
Food properly labeled; original container	P	0			Nor	n-tood con	tact surfaces cl		•	0	10	0
Prevention of Food Contamination				50 0	Hot	and cold	water available	ical Facilit	nressure	Pf	0	
38 O Insects, rodents, and animals not present	Pf/C	0	0	(5) X	Plu	mbing inst	alled; proper ba	ackflow dev	/ices	P)Pf/C		
39 Contamination prevented during food preparation, storage & display	P/Pf/C			52 🔿	Sev	vage and v	waste water pro	perly dispo	osed	P/Pf/C		-
40 Personal cleanliness 41 Wiping cloths: properly used and stored		0		53 🔾	Toil	et facilities	s: properly cons	tructed, su	ipplied, & clean	Pf/C		
42 Washing fruits and vegetables	P/Pf/C	0		54 0	Gar	bage and re	efuse properly di	sposed; fac	ilities maintained	С	0	
		-		150 S	Ade	ouate ver	ties installed, m	ting: design	and clean nated areas used	P/Pf/C		_
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ulable.		0	Nat	ural rubbe	r latex gloves n	ot used pe	r CGS §19a-36f	0		
Person in Charge (Signature) Date 56	Post	5	11	Violatio	ons	documen	ted		orrections due		#	
	100	12	7	Priority	Item	Violation	S Violeti	6-	7-24			
Person in Charge (Printed) Xaaqbin Chen						ndation ite /iolations	em Violations	6:	14-24	-	3,_	
10 20.	1/-	li	\exists	Risk Fa	actor	/Public He	ealth Interventio	n Violation	S 4 - 24	4	-13	3_
Inspector (Signature) Date 6/4	12	4		Repeat	t Ris	k Factor/P	ublic Health Int	ervention \	/iolations			
Inspector (Printed) Jose Ramilez	ŧ			Requir	retai	Practices	Violations	if you let	and to rains	15	/	
Appeal: The owner or operator of a food establishment aggrieved by t	his orde	er to c	corre	ect any	insn	ection vio	lation identified	hy the fo	end to reinspect	o hold	doct	011
peal: 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.												

	F00	a Esta	idiish	ment ins	pec	ction h	Report	Pagec	of
LHD M	anchester		Inspectio	n Report Continuatio	on Sheet	t		Date 6/4/2	4
Establishm	ent Crab Catch	er		Town Manch	heste	36		1 . 1	
			TEMF	PERATURE OBS	SERV/	ATIONS			
	ocation/Process	Temp		n/Location/Process		Temp	Item/Loc	ation/Process	Temp
Cold pr	ep table		hot h	old rice		1424			9500
1	Sausage	41F		crep table F	ish	36F		bucket	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
bo	iledeggs	41=		aded Shrimp	.07.	33 F	36av 5		DOPPM
	Potatoes	41F		Pepsi BIC code	0 04)</td <td></td> <td>employee</td> <td>. 73</td> <td>120F</td>		employee	. 73	120F
	Shrimp	40 F		(aw chicken w		39F	44 11 /	server station	
	MUSCES	41F	V	Saysage	1119	38 F			100F
Cooke	Corn	DIL	1	Cablea		414	Customer		95F
	2 Chicken	37F	1	of meton		385	wstone!	SK JIIIK	75 F
		ОВ	SERVAT	ONS AND COR	RECT	IVE ACTIO	NS		
Item 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.									
Number									
37c	inalcholod	20, 200			17 1			111	20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	unlabeled	spias	00	speediac	IC K	ots yc	We + be	ottles on c	OOK line
121	chicken ou	er sea	food	+ beef	$\hat{\mathbf{G}}$	WIF			
49c	floor in	WIF /	not c	lean	•				
56C	hood uncle				124.	PIC	to sche	whe ASAP	
49C	Gaskets	unclea	in th	roughout	,				
43c -	tongs store	d Alle	on n	ren handl	P				
	Floor uncle					ment			
1-00				marked +					
	exterior of					gipo			
9	exterior of					(by i	ne Mark	ina	
	handheld co				1CAI		cc mach	1100	
56C		not b							
49c		ing unc		1100911					
A -7	rice spoon	/1	1	Stagnant	1.20-	Per Du	rice coo,	kor	
110	Damaged Fl	1 - 1	1	y rear 3	1	, ,	TICC COO	4 C1	
/ -	No hose bit			1) 1					
97PF	1/ //	10-1		auged		Oth			
Note	2-door read			polling n	2	10 1154	0 v 1		
49C .	< 1 ·	nclean	1.1	1 1	.01	11) 001			
289	unlabeled	Secau)	111	'	nina	chemi	cal		
Note	DISCUSSE	Cooli		- Lieu	20110	y Onden	(a)		
NOE	provided	alleras		Ster					par:
Person in C	harge (Signature)		-	· ·	S			Data delos	4/24
Inspector (S	10	5	7					Date //a/.	2/
		1						Date 6/4/6	47
								•	

Risk Category: 2 Food Establ	ishm	ent I	nspect	tion Re	eport	Page 1 o	f_2	
Establishment type: Permanent Temporary Mobile Other					7-9-20			
Establishment Creamy Rolls Ice Cream		sering Con	vectical Health	1	4	I MIPM Time Out 4D	0	AM/PM
Address 699 Main St.		D		LHD	Manchest			
Town/City Manchester					se of Inspection:		-op	
Permit Holder Daniel Dalila	Con	of Public	epartment Health	Reinsp	ection	Other		
FOODBORNE ILLNESS RISK FA							9 , 4 = 1	
Risk factors are important practices or procedures identified as the most prevalent control								
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it P=Priority item Pf=Priority foundation item C=Core item V=violation type			ompliand		not in compliance		O=not ob R=repeat	
IN ØUT N/A N/O Supervision	V	COS R		OUT N/A N		on from Contamination	V	cos R
Person/Alternate Person in charge present.	Pf		15 0	-	Food separated	and protected	P/C	00
demonstrates knowledge and performs duties	PI	00	16 🗇	00	MANUAL PROPERTY AND ADDRESS OF THE PARTY AND A	rfaces: cleaned & sanitized	P/Pf/C	00
2 Certified Food Protection Manager for Classes 2,	С	00	17 0	0	Marie Control of the	on of returned, previously	Р	00
3, & 4 Employee Health	-			-		tioned, and unsafe food		
Management food employee and conditional employee:	DIDE		18 0	000		time and temperatures	P/Pf/C	00
knowledge, responsibilities and reporting	P/Pf	00	19 🔾	00/	Proper reheating	g procedures for hot holding		
4 Ø Proper use of restriction and exclusion	P	00				ime and temperatures	P	
Written procedures for responding to vomiting and diarrheal events	Pf	00	21 0		Proper hot holdiProper cold hold		P	
Good Hygienic Practices			23			rking and disposition	P/Pf	
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	00		00		health control: procedures	T	
7 No discharge from eyes, nose, and mouth	С	00			and records		P/Pf/C	00
Preventing Contamination by Hands				/		ımer Advisory		
8 Hands clean and properly washed	P/Pf	00	25 0	0 4		provided: raw/undercooked food	Pf	00
9 No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	00	26 0	00		ceptible Population used; prohibited foods not offered	P/C	Tolo
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	00				ves and Toxic Substances		1010
Approved Source	11.00		27	00		approved and properly used		100
11 O O Food obtained from approved source	P/Pf/C	00		90	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW	es properly identified,	P/Pf/C	
12 O O Food received at proper temperature	P/Pf			90	stored & used		P/PI/C	00
Food in good condition, safe, and unadulterated	P/Pf	00				th Approved Procedures		т —
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	00	29 🕏	00		n variance/specialized riteria/HACCP Plan	P/Pf/C	00
	OD RE	TAIL F	RACTICE	ES	processinter	tonari ir to or a tan	NEEDLY.	(e) 162
Good Retail Practices are preventative measures to	to control	I the add	lition of path	nogens, che	emicals, and physical	objects into foods.		
			x for COS	and/or R		on-site during inspection	R=repea	
OUT N/A N/O Safe Food and Water	V	COS R				e of Utensils	V	COS R
30 Pasteurized eggs used where required Water and ice from approved source	P P/Pf/C	00			ensils: properly store	ea early stored, dried, & handled	C	000
32 O Variance obtained for specialized processing methods	Pf	00				es: properly stored & used	P/C	
Food Temperature Control		12.12			sed properly			00
Proper cooling methods used; adequate equipment for	Pf/C	00			Utensils	and Equipment		
temperature control			47			urfaces cleanable,	P/Pf/C	00
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf	00			lesigned, construct		-	
36 Thermometers provided and accurate	Pf/C	00				lled, maintained and used; and test strips available	Θc	00
Food Identification	11110	1010			contact surfaces cl		С	00
37 Food properly labeled; original container	Pf/C	00				ical Facilities		
Prevention of Food Contamination			50	Hot and c		; adequate pressure	Pf	
38 Insects, rodents, and animals not present		00			installed; proper ba			00
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness		00			and waste water pro			00
41 Wiping cloths: properly used and stored	C	00				structed, supplied, & clean sposed; facilities maintained	P1/C	00
42 Washing fruits and vegetables		00				naintained, and clean		00
Permit Holder shall notify customers that a copy of the most recent inspection rep	•					nting; designated areas used	C	
H A	OI CIS dVa	abie.		Natural ru	bber latex gloves r	ot used per CGS §19a-36f		
Person in Charge (Signature) Heal Date 7	-9-	24		ons docur		Date corrections due		#
Date /	,			Item Viola	n Item Violations	7-11-29		1
Person in Charge (Printed) Heatherwing				em Violatio		1-19-29		0
	a -	1	Risk Fa	ctor/Publi	c Health Intervention			0
Inspector (Signature) Date /	-1	54				ervention Violations		
Inspector (Printed) Tase Ramirez					tices Violations	x if you intend to reinspect	-	4
Appeal: The owner or operator of a food establishment aggrieved by t	his orde	er to co						destroy
or dispose of upsafe food, may appeal such order to the								acon cy.

	Foo	d Esta	blishme	ent Inspe	ction F	Report	Page	<u>2</u> of	2
HD MC	anchester			ort Continuation Shee		-	Date	7/9/	24
Establishm	ent Creamy Roll	s Ice C	ream To	wn Manch	ester				
				ATURE OBSERV					
Item/I	Location/Process	Temp	AND STATE OF THE PARTY OF THE P	ation/Process	Temp	Item/Lo	cation/Proce	ss	Temp
11 -	771.0	AIF				h cor	Sinks	11 3 hall	1115
0001	KIC Cream	71.				1000	1011 K	July ,	111
						Quat	3 bay	- 1	50 PPM
							1		
		OB	SERVATIONS	S AND CORREC	TIVE ACTI	ONS			
	Violations cited in this						5.11 & 8-406.	11 of the foo	od code.
Item Number		•							
Nullibel									
¥10	2 1 41	11 [1 1	1		7 7 7			
DIF	No test st	throom n	landSink	at 351	-				
ARDI	110 1-1-1	- 0- 01	وآباءا،	. 1-0					
7017	No test st	tips a	/allable						
		-							
					i i				
4.10	D'sc (- 0	10 04	- 0 0		58
Note	Discussed !				es tor	14 (1	-pM	(6015	€
10070	Discussed	torm	LA & 1	LB .	8 VI				
Note	Discussede	(oper	date ma	cking. A	I RTE	1 10005	that	are	
,	refrigerated	must	1	ate marke	d and	usedo	or disc	arded	
	within 7	davs	*			======================================	w & ======		
Note	Provided alle	ergen Pe	ster						
Note	Thermometer	1 1	1						
	3 a a a a a a a a a a a a a a a a a a a	11	1						
Person in	Charge (Signature)	Teul	1		_		Date	7-9-	24
Inspector ((Signature)	8	-1				Date	7-9.	-24

Risk Category: Food Estab	lishm	nen	t Ir	nspecti	on Re	eport	Page 1 of	2	
Establishment type: Permanent Temporary Mobile Other					Date:	6/3/24			
Establishment Cumberland Farms		45epin	Conne	ecticat Healing	Time Ir		ne Out		AM/PM
Address 3 Middle TPK East			P	H)	LHD	Marchester			
Town/City Manchester					Purpos	se of Inspection: Routing	de Pre	-op	
Permit Holder	Co	of Pu	ıblic H		Reinsp				
FOODBORNE ILLNESS RISK F. Risk factors are important practices or procedures identified as the most prevalent cont	The second second	THE RESERVE	PATRICIA CONTINUE	SECOND DIVISION CONTROL OF	Description of the Control of the Co				
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it		-		compliance		=not in compliance N/A=not ap		s or injury	
P=Priority item Pf=Priority foundation item C=Core item V=violation type						The state of the s			t violation
IN OUT N/A N/O Supervision	v	cos			UT N/A N			V	COS R
1 O Person/Alternate Person in charge present,	Df					Food separated and protecte		P/C	00
demonstrates knowledge and performs duties	Pf	0	0	16 0 0	00	Food-contact surfaces: clean	ed & sanitized	P/Pf/C	00
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 0 0	>	Proper disposition of returned served, reconditioned, and ur		Р	0
Employee Health		-00		FOR WAY		Time/Temperature Control			1000
3 Management, food employee and conditional employee;	P/Pf			18 0	000	Proper cooking time and tem		P/Pf/C	00
knowledge, responsibilities and reporting	501 200200	1,500		19 0	000	○ Proper reheating procedures	for hot holding	P	00
Proper use of restriction and exclusion	P	0	0			 Proper cooling time and temp 			00
Written procedures for responding to vomiting and	Pf	0	0			Proper hot holding temperatu			00
diarrheal events Good Hygienic Practices						Proper cold holding temperat			00
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0				Proper date marking and disp Time as a public health contri		P/Pf	
7 O No discharge from eyes, nose, and mouth	C	0		24 0		and records	oi. procedures	P/Pf/C	00
Preventing Contamination by Hands					Elega	Consumer Advisor	v		7 100
8 O Hands clean and properly washed	P/Pf	0	0	25 🔾 🤇	00	Consumer advisory provided: raw/u	indercooked food	Pf	00
9 O O No bare hand contact with RTE food or a	P/Pf/C	0	0			Highly Susceptible Popu			
pre-approved alternative procedure properly followed				26 0		Pasteurized foods used; prohibited		P/C	00
Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	9	07/0/0		Food/Color Additives and Toxic			1 - 1 -
Approved Source	DIDEIC			27 0 0		Food additives: approved and		P	00
12 O Food received at proper temperature	P/Pf/C	0		28 0	00	Toxic substances properly ide stored & used	entified,	P/Pf/C	00
13 O Food in good condition, safe, and unadulterated	P/Pf	_	_			Conformance with Approved	Procedures	-	
14 O Required records available: molluscan shellfish	P/Pf/C	2000	0	200		Compliance with variance/spe		T	
identification, parasite destruction	10000 0000		55,952,7	29 0		process/ROP criteria/HACCP		P/Pf/C	00
				RACTICES					Lit TE
Good Retail Practices are preventative measures t									
Mark OUT if numbered item is not in compliance V=violation type Mark OUT N/A N/O Safe Food and Water				for COS and	d/or R	COS=corrected on-site during in			violation
30 Pasteurized eggs used where required	V P	cos		OUT	uco uto	Proper Use of Utensils nsils: properly stored		V C	COS R
31 Water and ice from approved source	P/Pf/C		0	44 0 11	ensils/en	uipment/linens: properly stored, dri	ad & handlad	0.00	00
32 O Variance obtained for specialized processing methods	Pf		0	45 Sin	ngle-use/	single-service articles: properly sto	red & used		50
Food Temperature Control						ed properly			00
Proper cooling methods used; adequate equipment for	Pf/C	0	0			Utensils and Equipm	ent		
temperature control		-		47 🖝 FC	ood and	non-food contact surfaces clean	able,	P/P(C	00
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf Pf/C	0				esigned, constructed, and used	ad and		
36 Thermometers provided and accurate	Pf/C	00	\exists	148 (ning facilities: installed, maintain- igents, sanitizers, and test strips		Pf/C	00
Food Identification	1. 1/3					contact surfaces clean	available	C	00
37 Food properly labeled; original container	Pf/C	0	0		i in ju	Physical Facilities			
Prevention of Food Contamination				50 O Ho	ot and co	old water available; adequate pre		Pf	00
38 Insects, rodents, and animals not present		0		51 O PI	umbing i	installed; proper backflow device	es	P/Pf/C	00
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness	P/Pf/C	0				nd waste water properly dispose		P/Pf/C	00
41 Wiping cloths: properly used and stored	6	00	읡			ities: properly constructed, supp nd refuse properly disposed; facilitie		Pf/C	0.0
42 Washing fruits and vegetables	P/Pf/C					acilities installed, maintained, an		C	000
				56 O Ac	dequate	ventilation and lighting; designate	ted areas used	C	55
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ıııable	•			bber latex gloves not used per C			
Barrow in Channe (Simoton) W. Mar - 6/-	/	,		Violations	s docum	nented Date com	rections due		#/
Person in Charge (Signature) W Date 013	127			Priority Ite		tions		(Ø/
Person in Charge (Printed)	17	(1				n Item Violations		-	Ø
	2100	1	\dashv	Core Item Risk Facto	or/Public	: Health Intervention Violations	y or as	1	8
Inspector (Signature) Jayree Date 6	2/34	-	-	Repeat Ri	sk Facto	or/Public Health Intervention Viol ices Violations	ations	1	4
Inspector (Printed) Deni de Payne				Requires	Reinspe	ection - check box if you intend	to reinspect -		-
Appeal: The owner or operator of a food establishment aggrieved by t	his orde	er to	corre	ect any ins	pection	violation identified by the food	inspector or to	hold c	destroy.
or dispose of unsafe food, may appeal such order to the	Directo	or of I	Heal	lth, not late	er than fo	orty-eight hours after issuance	of such order.	1	3,1

su response notes.

	1 00	u Lota	biisiiiieii	rmsped	Juon r	keport	Page	0110
10	unchester		Inspection Report Co	ontinuation Shee	t		Date 63	24
Establishr	ment umberla	ndta		Lanch	ester		.1 2	1
			TEMPERATUR	RE OBSERV	ATIONS			
, Item	/Location/Process	Temp	Item/Location/	Process	Temp	. Item/Loc	cation/Process	Temp
HOT!	Dog	38F	Sausage &	Cyc+ Chees	e for	HOTU	Dates	1135
But	tes	40 F	Hot Dog	00	145 F	Quat	@ 3hay	150F
^			Chickentu	Daffle	1605	The state of the s	* Min.	, , ,
Crea	m Cheese	37F	Egg ou	04	158 F			
			Hot Do	1	148 F			
			SERVATIONS AN					
Item Number	Violations cited in this	report must be	corrected within the tire	me frames below	, or as stated i	n sections 8-405	5.11 & 8-406.11 of the	food code.
49C	Floors, ge	nerall	lu under	hand.	sink	ovens	-wash	Country
	bac	Knoor	n, una	clean	,	,		
47C			drawers		an			
410	Brooms 1	not 5	tored pro	peru	_			
49C	Counter		/	/	nclea	<u>n</u>		
45C	tilters u	ncov	er/pot	cted				
440	AGRU U	nde	ar '					1
-	Discussed	open	boxes of	f forza	- foor	NOV.	mx aner	
	Care	red/	wrapped	Lisid.	. 1000			,
>	kforms 1A					ns add	ress sam	e inform
	-Noti	fy hea	uth dept	by 6/7	lay in	proces	۵	
	State Alle	erger 1	poster pre-	sent !	1,			
	allergen st	ateme	at poste	d this	day	by ma	inager.	
X	* Allerges	in me	ou items	nota	Jail'-	> check	Lwith co.	porate
			ite log/r	/1	- 1	100		
*	Pizza holo	ding p	nocessi -	to be	p is a	e as u	vellasvol	ler setu
Person in	Charge (Signature)	46	pm				Date 6/3	124
Inspector ((Signature)	ayne	_				Date 6/3/2	24
								30.6

ablishment type: Permanent Temporary Mobile Other ablishment Dominos Iress 23 Main St vn/City Manchester mit Holder FOODBORNE ILLNESS RIS Risk factors are important practices or procedures identified as the most prevalen	er		yee!	o Conne	ecticut Hes		Date:	6/13/20	M/PM Time Out		AM/	
Iress 23 Main St un/City Manchester mit Holder FOODBORNE ILLNESS RISE Risk factors are important practices or procedures identified as the most prevalen			Jedy D	Conne	ecticut Nes	il.	Time In	1	M/PM Time Out		AM/	
mit Holder FOODBORNE ILLNESS RIS Risk factors are important practices or procedures identified as the most prevaler			5			W.						PM
mit Holder FOODBORNE ILLNESS RIS Risk factors are important practices or procedures identified as the most prevaler	_	200		7			LHD /	nanch	ester			
FOODBORNE ILLNESS RIS						7	Purpos	e of Inspection	: Routine P	re-op		
Risk factors are important practices or procedures identified as the most prevaler			of Pu	ıblic H			Reinsp		Other			
preventing as the most prevent	K FAC	TOF	RS /	ANI	D PL	JBL	IC HEA	LTH INTERVI	ENTIONS			I E
Mark designated compliance status (IN, OUT, N/A, N/O) for each number	ered item		II	N=in	compl	liance	OUT=	not in compliance	A STATE OF THE RESIDENCE OF THE PARTY OF THE	N/O=not ob:	S	ed
Priority item Pf=Priority foundation item C=Core item V=violation t	type Ma	rk in	appro	opria	ate box	for C	OS and/o		ted on-site during inspection	R=repeat		
IN OUT N/A N/O Supervision		٧	cos	R			UT N/A N/		on from Contamination	v	cos	R
Person/Alternate Person in charge present, demonstrates knowledge and performs duties		Pf	0	0				Food separated		P/C	0	_
Certified Food Protection Manager for Classes 2						- 7	00		urfaces: cleaned & sanitize ion of returned, previously	d P/Pf/C	0	0
3, & 4		С	0	0	17	0			tioned, and unsafe food	P	0	0
Employee Health	ETE							Time/Tempera	ture Control for Safety			-
Management, food employee and conditional employee	e; ,	P/Pf	0	0	18	0	000	Proper cooking	time and temperatures	P/Pf/C	0	0
knowledge, responsibilities and reporting		0,0,0,000	2000	100000	19	0	000	Proper reheating	g procedures for hot holding	g P	0	
The state of the s		Р	0	9	20			Proper cooling	time and temperatures		0	-
Written procedures for responding to vomiting and diarrheal events	1	Pf	0	0	21 0	\circ	200	Proper hot hold	ing temperatures		0	
Good Hygienic Practices					22 0		300	Proper cold hol	ding temperatures		0	
Proper eating, tasting, drinking, or tobacco production	te uso T	P/C			23	9		Time a second li	rking and disposition	P/Pf	0	0
No discharge from eyes, nose, and mouth	is use		0		24			and records	c health control; procedure	S P/Pf/C	0	0
Preventing Contamination by Hands				_			white		umer Advisory		1	100
Hands clean and properly washed	I	P/Pf	0	0	25	OTO			y provided: raw/undercooked foo	d Pf	0	0
No bare hand contact with RTE food or a	מוסו	Pf/C						Highly Sus	ceptible Population			-
pre-approved alternative procedure properly follow	vea	-1/0	0	0	26			Pasteurized foods	used; prohibited foods not offere	d P/C	0	0
Adequate handwashing sinks, properly supplied/access	sible F	Pf/C	0	0			F	ood/Color Additi	ves and Toxic Substance	s		
Approved Source					27	0		Food additives:	approved and properly use	ed P	0	0
Food obtained from approved source		Pf/C			28				es properly identified,	P/Pf/C		0
Food in good condition, safe, and unadulterated		P/Pf	_	_			-	stored & used		171110		
Required records available: mallugger aballfigh		P/Pf	0	0	-				th Approved Procedures			
identification, parasite destruction	P/F	Pf/C	0	0	29				h variance/specialized riteria/HACCP Plan	P/Pf/C	0	0
	GOOD	RET	TAIL	PR	RACT	ICES	3				-	
Good Retail Practices are preventative measu	ures to co	ntrol	the a	dditi	ion of p	oatho	gens, cher	micals, and physica	l objects into foods.			
Mark OUT if numbered item is not in compliance V=violation type N	Mark in ap	propr	riate	box	for CC	S and	d/or R		on-site during inspection	R=repeat	viola	ation
UT N/A N/O Safe Food and Water			cos			UT			e of Utensils	V	cos	R
Pasteurized eggs used where required			0	_	43		-use uten	sils: properly stor	ed	C	0	0
Water and ice from approved source Variance obtained for specialized processing methods	-	-		9	44 (tensils/equ	ipment/linens: prop	erly stored, dried, & handled	Pf/C		
Variance obtained for specialized processing methods Food Temperature Control		of 1	0	0	45	Si	ngle-use/s	single-service article	es: properly stored & used	P/C	_	_
Propor pooling motheds used adaptive state of		- 1	-		46	ال ال	ioves use	ed properly	i F	C	0	0
temperature control	F	Pf/C	0		-	F	and and r		and Equipment urfaces cleanable,			
Plant food properly cooked for hot holding		Pf	0		47			signed, construct		P/Pf/C	0	0
O Approved thawing methods used	F	Pf/C	0	5					lled, maintained and used;			
Thermometers provided and accurate	F	Pf/C	0		48				and test strips available	Pf/C	0	0
Food Identification					49			ontact surfaces c		С	0	0
Food properly labeled; original container	F	Pf/C	0	0				Phys	ical Facilities			
Prevention of Food Contamination					50	O H	ot and co	ld water available	; adequate pressure	Pf	0	0
Insects, rodents, and animals not present		Pf/C						nstalled; proper ba		P/P//C	0	0
Contamination prevented during food preparation, storage & display Personal cleanliness		Pf/C			52		ewage an	d waste water pro	perly disposed	P/Pf/C	0	0
Wiping cloths: properly used and stored		Pf/C							structed, supplied, & clean	Pf/C	0	0
Washing cloths, properly used and stored Washing fruits and vegetables		C o	9		54	G G	arbage and	d refuse properly di	sposed; facilities maintained	(C)	0	0
			-	_	55 0		nysical fa	cilities installed, n	naintained, and clean	P/Pi/C	-	0
rmit Holder shall notify customers that a copy of the most recent inspection	n report is	avail	lable.		30) Al	atural rub	bor latov glovec r	ting; designated areas use ot used per CGS §19a-36f	d C	0	\circ
Λ -	cha	10	1.		Viola	ation	s docum	ented	Date corrections due		#	_
on in Charge (Signature) Date	6/13	12	4				m Violati		Date corrections due		-	
					Prior	ity Fo	oundation	Item Violations		7	5	
on in Charge (Printed)		,	-,-		Core	Item	Violation	s	900ays		5	1
ector (Signature) Payne Date (1.112	12	L		Risk	Facto	or/Public	Health Intervention	n Violations/	6)	10
Date (41.0	10	1	-	Good	d Rot	ail Practic	r/Public Health Int	ervention Violations	-		
ector (Printed) Denise Payne					Reg	uires	Reinspe	ction - check box	if you intend to reinspect	-		
	by this	order	to	corre	ect ar	ly ins	pection	violation identifie	hy the food inspector or	to hold d	Octr	01/
					oc al	· y 1113	ווטוטטטן		a by the rood inspector of	to Hold, a	CSII	Jy,
peal: The owner or operator of a food establishment aggrieved	the Dire	ector	of I	1621	th no	of late	er than fo	rty-eight hours	fler issuance of such and	or		
	o the Dire	ector			. 0		er than fo	rty-eight hours a	fter issuance of such orde	er.		
peal: The owner or operator of a food establishment aggrieved	o the Dire	ector			. 0		er than fo	rty-eight hours a	fter issuance of such order	er.		
or dispose of unsafe food, may appeal such order to	o the Dire	ector	1	201	Hify	h	er than for	rty-eight hours a	fter issuance of such order	er.		_
or dispose of unsafe food, may appeal such order to	o the Dire	ector	1	201	Hify	h	er than for	h dpt of r	fter issuance of such order epour payne@Manc owner/Operator/Person in	hesto	ra	to

Food Est	ablishment Inspection	Report	Pageof
LHD Manchester	Inspection Report Continuation Sheet		6/13/24
Establishment Dominos	Town Marchest	e.	1
	TEMPERATURE OBSERVATIONS		
Item/Location/Process Temp	Item/Location/Process Temp	Item/Location/	Process Temp
Sliced Cheese			
		HOT Water	
inichen breaded	No hotholding	=	Blogg
hicken Wings		Quat	0 150F
Shredded Chlese	0		
Chiester Citte			
Shredded Cheese 37	3		
•			
	DESERVATIONS AND CORDECTIVE ACT	2001	
Violations cited in this report must	DBSERVATIONS AND CORRECTIVE ACT be corrected within the time frames below, or as state		106 11 of the food and
		su iii seciions 5-405.11 & 8	-400.11 OF THE TOOR CORE.
Number CFPM - on site of	MSI system		
5tc Dumpsters not	Covered/Closed		
5/C 3 Bay faucet L	- V 00/		
I Disay taucet h	ealing		
	Q		
15 cussed new	3 Bay setup-fill ok	Screw hi	les with
	3 Bay setup-fill ok cauk -		
	cauk -	Smooth	
	0 - 0 V	SINKOFRI	>
		00000000	
Discussed all	Logens - Posted notice		
		1	
	- menu of allera	ens by ing	reduents
Date Macking	> 11 tos 1 1/ 10		
Saul Wella -	7 All 100 gots cooked		
This curred based based	ding + dutting of	conkie /hom	more hars
CO SCOT SCOT VID	Child : 000 00 10 0	10.40	₩. I.C © 3
No Base hand	d contact / wtensils	used. To	All cooked took
		_	
Decreased Mon	ning process for pan	- Yadir	01112-1010
Discussion Color	JIII Diversi to pass	s pearmer	. Duita-ac
	· 1		1
111			- N
Manager to revi	ew Company 1A/13 IL y HDpt in I week C	L worker do	cument
000000	110-4		م م م اعالما اعالم
notite	y HUDI UN I WEEK (locument c	ue estublished
	L L		
			· · ·
			(/12/21
Person in Charge (Signature)	nace	Dat	e 6/13/24
			1,2/21
nspector (Signature)		Dat	e 6/13/24
_ /1			, , ,

Risk Category: 7 Food Establ	Category: 2 Food Establishment Inspection Report Page 1 of 2									
Establishment type: Permanent Temporary Mobile Other					Date:	7/18/24	1			
Establishment DONKIN DONOTS - Center		AS STATE OF THE PARTY OF THE PA	d Council	cticus Healing	Time In	2:30 A	M/PM Time Out 3	15 AM/6M)		
Address 244 Center St				H)	LHD /	rlanche	ster			
Town/City Manchester		7			Purpose	of Inspection:	Routine Pr	e-op		
Permit Holder	Co		ut Dep	partment ealth	Reinspe	ection	Other			
FOODBORNE ILLNESS RISK FA										
Risk factors are important practices or procedures identified as the most prevalent cont Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				complianc		not in compliance		oss or injury.		
P=Priority item Pf=Priority foundation item C=Core item V=violation type	1000							R=repeat violation		
IN OUT N/A N/O Supervision	٧	cos	R		OUT N/A N/O		on from Contamination	V COS R		
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0	15 3		Food separated	The State of the S	P/C O O		
Continued Front Protection Management Classes C	(6)					Control of the contro	urfaces: cleaned & sanitized ion of returned, previously			
Certified Food Protection Manager for Classes 2, 3, & 4	9	0	0	17 00		served, recondi	tioned, and unsafe food	POO		
Employee Health Management, food employee and conditional employee;	-	Г		18	000		ture Control for Safety time and temperatures	P/Pf/C O O		
knowledge, responsibilities and reporting	P/Pf	0	0	19 🔾	000	Proper reheating	g procedures for hot holding			
Proper use of restriction and exclusion	P	0	0		000	Proper cooling	time and temperatures	POO		
Written procedures for responding to vomiting and diarrheal events	Pf	0	0	21 0			ing temperatures ding temperatures	P O O		
Good Hygienic Practices		1534	1.5_	23 🗭	000	Proper date ma	rking and disposition	P/Pf O O		
6 Proper eating, tasting, drinking, or tobacco products us		0		24 🔾	000	Time as a publi	c health control: procedures	P/Pf/C O O		
7 O No discharge from eyes, nose, and mouth Preventing Contamination by Hands	С	0	0			and records	uman Adulana	111110		
8	P/Pf	0	0	25 🔘	00		umer Advisory y provided: raw/undercooked food	Pf OO		
No bare hand contact with RTE food or a	P/Pf/C		0		/	Highly Sus	ceptible Population			
pre-approved alternative procedure properly followed	- 2833635	200		26 🔾	00		used; prohibited foods not offered			
Adequate handwashing sinks, properly supplied/accessible Approved Source	Pf/C	0	\subseteq	27 0	00		ves and Toxic Substances approved and properly used			
11 Ø O Food obtained from approved source	P/Pf/C	0	0	1			es properly identified,			
12 O Food received at proper temperature		O		28	00	stored & used	oo propony identined,	P/Pf/C O		
Food in good condition, safe, and unadulterated Required records available: molluscan shellfish	P/Pf	0	0				th Approved Procedures			
14 O G Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29	00		h variance/specialized riteria/HACCP Plan	P/Pf/C O O		
GO				RACTICE						
Good Retail Practices are preventative measures t Mark OUT if numbered item is not in compliance V=violation type Mark item.										
Mark OUT if numbered item is not in compliance V=violation type Mark i OUT N/A N/O Safe Food and Water	n approp	cos	R	for COS a	nd/or R	The second secon	on-site during inspection se of Utensils	R=repeat violation		
30 Pasteurized eggs used where required	Р	200	0	43 00 1	n-use uten	sils: properly stor	ed	600		
31 Water and ice from approved source	P/Pf/C	-	0	¥4 O	Jtensils/equ	ipment/linens: prop	perly stored, dried, & handled	PHC 0 0		
32 Variance obtained for specialized processing methods Food Temperature Control	Pf	0	0		Single-use/s Gloves use		es: properly stored & used	P/C 0 0		
Dropper applies mothed woods adaptives and server	7			40	Gioves use		and Equipment	c O O		
23 Proper cooling metrods used, adequate equipment for temperature control	Pf/C	155.75	0	47 0	Food and n		surfaces cleanable,	P/Pf/C O O		
34 O Plant food properly cooked for hot holding	Pf	0				signed, construct		P/Pf/C O O		
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used Thermometers provided and accurate	(Pf/Q	00	$\frac{3}{2}$				illed, maintained and used; and test strips available	Pf/C O		
Food Identification	_					ontact surfaces c		000		
37 Food properly labeled; original container	Pf/C	0	0			Phys	ical Facilities			
Prevention of Food Contamination 38 Insects, rodents, and animals not present	DEIC	0					; adequate pressure	Pf 0 0		
39 Contamination prevented during food preparation, storage & display	P/Pf/C					stalled; proper batter pro		P/Pf/C		
40 Personal cleanliness	Pf/C	0	0	53	Toilet facilit	ies: properly cons	structed, supplied, & clean	Pf/C 0 0		
41 Wiping cloths: properly used and stored 42 Washing fruits and vegetables	C			54 00	Garbage and	refuse properly di	sposed; facilities maintained	000		
	P/Pf/C			56	Adequate v	cilities installed, n	naintained, and clean nting; designated areas used	P/Pf(C) O		
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ilable					not used per CGS §19a-36f			
Person in Charge (Signature)	119	172	9	Violatio	ns docume	ented	Date corrections due	#		
() Wind of man	2/2	14	-		tem Violation	Item Violations	71281.24	1		
Person in Charge (Printed)				Core Iter	m Violation	S	10118124	7		
Inspector (Signature) 2. Date 7/1	8/7	174	1	Risk Fac	ctor/Public	Health Intervention	on Violations tervention Violations			
1 allien Ardindil	012	16	-			es Violations	Let vention Violations	7		
Inspector (Printed)				Require	s Reinspe	ction - check bo	x if you intend to reinspect			
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	his orde	er to	COTT	ect any ir	spection v	riolation identifie	d by the food inspector or	to hold, destroy,		

Food Establishment Inspection Report LHD Manchester Inspection Report Continuation Sheet Date Establishment Dunkin Donuts Town Manchester TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Process Item/Location/Process Temp milk in undercounter AIF hay Marie not mater H.S. 41F coviage Cheere 411F WIC drive thrucoid prep ead 39 F harnbrown 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 bucket with stagnant water under cambro ice bin 43c spoons for mixing drinks stored in stag nant water exterior or ice machine not clean walk in cooler Floors not clean under shelving metal cove base in walk in seperating from wall 52c lice build up in walk in Freezer Zc no CFPM at time of visit - godays to obtain notex discuss flooring in walk in Freezer Health dept to reach out to CFPM opalis regarding inspection is email Larandy @manchesterct.gov with corrective actions no pest control issues per pest control report Person in Charge (Signature) Inspector (Signature)

k Category: 2 Food Establishment Inspection Report Page 1 of 2									
Establishment type: Permanent Temporary Mobile Other					Date:	7/16	24		
Establishment DUNKIN DONUTS -OGKKIND		4.sering	Connecticus	A Health	Time In_	12:00	AM/(M) Time Out	j: 0() AM/PI	
Address 81 Oakland St.		DI	DI		LHD /	nanc.	hester		
Town/City Manchester					Purpose	of Inspect	ion: Routine	Pre-op	
Permit Holder Derek Pacheco	Co	onnecticu of Pub	ut Depart olic Healt	tment h	Reinspec	tion	Other		
FOODBORNE ILLNESS RISK FA							CALLES AND	Omuši (BYOM) EPILII	
Risk factors are important practices or procedures identified as the most prevalent cont Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if			TO THE PERSON NAMED IN	me illness mpliance		t in compliar		N/O=not observed	
P=Priority item Pf=Priority foundation item C=Core item V=violation type						-	prected on-site during inspec		
IN OUT N/A N/O Supervision	V	cos	R		N/A N/O		ection from Contaminati	on V cos F	
1 Person/Alternate Person in charge present,	Pf	0		15 00	200		ated and protected	P/C O C	
demonstrates knowledge and performs duties	-			60	(Call)		ct surfaces: cleaned & sar osition of returned, previous	uely	
3, & 4	С			17 07		served, rec	onditioned, and unsafe foo	od POC	
Employee Health				olo I			perature Control for Safe		
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	0) I -			Proper coo	king time and temperature eating procedures for hot h	s P/Pf/C O C	
4 Proper use of restriction and exclusion	P	0				Proper coo	ling time and temperatures	olding POC	
Written procedures for responding to vomiting and	100000		12	21 0		Proper hot	holding temperatures	POC	
diarrheal events	Pf	0		300			holding temperatures	(P)X(C)	
Good Hygienic Practices		THEY		3 00 0			marking and disposition	P/Pf O	
6 Proper eating, tasting, drinking, or tobacco products us		0		2400		and the filter of the second s	public health control: proce	edures P/Pf/C O	
7 No discharge from eyes, nose, and mouth	С	101			ايللل	and records		1711 110 0	
Preventing Contamination by Hands 8 Hands clean and properly washed	D/Df	0		2500			onsumer Advisory visory provided: raw/undercook	ed food Pf O	
No hare hand contact with RTE food or a		Lucius II		.0 0 0			Susceptible Population	ed food Pf OC	
pre-approved alternative procedure properly followed	P/Pf/C	0		26 0 0	50	Pasteurized for	oods used; prohibited foods not	offered P/C	
Adequate handwashing sinks, properly supplied/accessible	PFIC	0					ditives and Toxic Substa		
Approved Source				27 0 5) @	Food additi	ves: approved and properl	y used POC	
11 Ø C Food obtained from approved source	P/Pf/C			28 6			ances properly identified,	P/Pf/C O C	
12 C Food received at proper temperature 13 Food in good condition, safe, and unadulterated		0			100	stored & us			
Paguired records available; mallycans shallfish	P/Pf	0	9 -				e with Approved Procede with variance/specialized		
identification, parasite destruction	P/Pf/C	0	$\bigcirc _2$	29 0			P criteria/HACCP Plan	P/Pf/C O	
				CTICES	3				
Good Retail Practices are preventative measures t	o contro	I the ac	ddition	of patho	gens, chemi	cals, and phy	vsical objects into foods.		
		-		COS an	d/or R	COS=correc	cted on-site during inspection	R=repeat violation	
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	V	cos		OUT			r Use of Utensils	V COS F	
31 Water and ice from approved source	P P/Pf/C	00			topoile/equip	ls: properly	stored properly stored, dried, & har	C O C	
32 O Variance obtained for specialized processing methods	Pf	0	$\frac{1}{2}$	15 O S	inale-use/sin	ale-service a	articles: properly stored & use	ed P/C C	
Food Temperature Control	71.			000	loves used		marco property alored a dec	000	
Proper cooling methods used; adequate equipment for	Pf/C				Marie Marie	Uter	nsils and Equipment		
temperature control	1 1 1 1 1	82,316	\bigcirc) × 5	ood and no	n-food conta	act surfaces cleanable,	P/Rf/C)	
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf			/ , b	roperly desi	gned, const	tructed, and used	9	
36 Thermometers provided and accurate	Pt/C	00) 4				nstalled, maintained and u ers, and test strips availabl		
Food Identification	1110					ntact surfac		6 000	
37 Food properly labeled; original container	Pf/C	0		97	011 1000 001		hysical Facilities	C C	
Prevention of Food Contamination				50 O H	ot and cold		able; adequate pressure	_ Pf O C	
38 Insects, rodents, and animals not present		0) X P	lumbing ins	talled; prop	er backflow devices	PPf/C O C	
Contamination prevented during food preparation, storage & display	P/Pf(C						r properly disposed	P/Pf/C O C	
40 Personal cleanliness 41 Wiping cloths: properly used and stored	Pf/C						constructed, supplied, & c		
42 Wishing fruits and vegetables	C P/Pf/C	0					rly disposed; facilities mainta ed, maintained, and clean		
Permit Holder shall notify customers that a copy of the most recent inspection rep	-		1/1				l lighting; designated area	P/Pf/C O C	
A state of the most recent inspection report the most recent inspection report	ort is ava	allable.		ON	atural rubbe	er latex glov	es not used per CGS §19a		
Person in Charge (Signature)	00	JU		iolation	s documer	nted	Date corrections	due #	
Person in Charge (Signature) Date	w c	۱ ۸			em Violation	ns em Violatio	7/19/2	4 2	
Person in Charge (Printed)	1.5.1				Violations	en violatio	ns 7)26/2		
1 2 2 3 7 7	1/	1	A R	lisk Fact	or/Public He	ealth Interve	ention Violations	- 8	
Inspector (Signature) Date	10-	1	1 R	Repeat R	isk Factor/F	Public Healt	h Intervention Violations		
Inspector (Printed) Tose Ramirez						s Violations		9	
Appeal: The owner or operator of a food establishment aggrieved by the	hie ord	or to o	COLLOC	tanvis	Reinspect	uon - cneck	box if you intend to rein	spect	
or dispose of unsafe food, may appeal such order to the	Directo	or of H	Health	, not lat	er than fort	v-eight hou	irs after issuance of such	order	

	Foo	d Esta	blishn	nent Insp	ection F	Report	Page 2	of _2
LHD M	anchester		10 10 100	Report Continuation S		•	Date 7/1	6/24
Establishr	D. 1015-C	etuno(Coakind	Jown Man	chester			, .
			TEMPE	RATURE OBSE	RVATIONS			
Item	/Location/Process	Temp	Item/L	ocation/Process	Temp		ocation/Process	Temp
WIF	- ambient	40F	Cold Prep	table eac	4/F	3 bay	Sink,	120F
WIC	ambient	38F	1 1	Sausage	39F	3 bdy	Duat	400 pgm
WIC	Milk	41F		quiche	4/F	,		11
2 2	DOC RIC TURBA			Cream chees	e 39F	underc	punter coole	7
	Sausage patty	40F	Cream.	cheese cold p	cotable	1	cream	39F
	Wrap !	915		5 iced che	\$ 50F	MIKA	ispenser crea	am 417
	ega patty	33F		idividual cream	crose with	Duat b	ucket	#400ppm
	۱ رد				57F	CUSTON	ier BR Sink	(125F
	Violetiene elteri in this					0110	05 44 9 0 400 44 -54	
Item	Violations cited in this	10			elow, or as stated	in sections 8-4	05.11 & 8-406.11 of th	e tood code.
Number	Kaisha C	.FPM.	on site	2				
JOPF	interior of	hand.	SINK	ov nuens	unclear	Mused	as dump	Sink
Age		1 :	8	/	,	1 -	1	
56C	Employee F	. 11.	1 .		ant Food	lin Wil	C	
WIC MILK 41F Quiche 41F Loor RIC TurbAt Cream cheese 39F Under Counter Cooler Sausage patty 40F Cream cheese cold protable Wrap 91F Sliced cheese 50F MILK dispenser cream 41F egg patty 33F Individual cream cheese 10M Quat bucket 125F 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.								
490	Stadios	1	1 -	a class	a chalu	100		
470	Caulkho	lain I	21	1 7 /-	30 1	1)	t he white	0
490	Pyloriac o	Cico	1:01	. / /	1) E. 1403	DE WAIR	~ *
0 - 0	Slices che	3 1 C	11			dille -	AIF 605	distable
1600	May 1	1.	111017			16.20	7	101130000
1/05	1	, 1	1,		. /			Ì
201	ice bullion	ed we	La dia	1105 U/10	clean (C	00/100	> disculde	1 -
100	The Dolla Up	7 3 3	101101116	2 water 1	n anver	thio be	verage co	ie(
510	Floors und Customer E	dean 7	mougi	1-10-1011d	ec equip	14617		
-11	COSTOME E	$\frac{1}{2}$	m Ju	K Jasi	*			
Nako	0 -6 -6 7	Ц. с.	i.ale	ا میں میارہ:	1.0	- 1151		
	Customer B							
NOTE	Discussed	110cea	510g C	leaning fi	equency	of fl	sors and	
10 1.	Food Contac				1	1 /		
Note	Instructed 1	11C to	not u	se cold	prep ta	ble W/	cream c	neese
111	until unit	11 4	rorb	elow.				
Note	lest strip	5 & -	the cmo	meter av	ailable			
		0						
Person in	Charge (Signature)	M.70	Why				Date 7-11	0-24

Date

Inspector (Signature)

Risk Category: 2 Food Establ	lishn	nen	t Ir	spec	tion	Repo	ort	Page 1 c	of <u>2</u>	
Establishment type: Permanent Temporary Mobile Other					Da	ite:	1/3/12	4		
Establishment DUNKIN DONUTS - Tolland		+EEFIN'	Conne	clicat Healiff	Tir	ne In			2:30	AM/PM)
Address 1265 Tolland Toke			D	H)	LH	ID N	lanches	Ster		J
Town/City Manchester					Pu	rpose o	f Inspection:	Routine Pro	e-op	
Permit Holder Mario Medeiros	Co	onnectic of Pu	ut De	partment ealth	Re	inspect	ion	Other		
FOODBORNE ILLNESS RISK FA			_							
Risk factors are important practices or procedures identified as the most prevalent cont.										The same of the same of
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it P=Priority item Pf=Priority foundation item C=Core item V=violation type		_		compliand	-		in compliance		O=not obs R=repeat	
IN ØUT N/A N/O Supervision	v	cos	-			N/A N/O		on from Contamination		COS R
Person/Alternate Person in charge present,	Pf	0		15 🐨	0			and protected		00
demonstrates knowledge and performs duties				16)0	X			urfaces: cleaned & sanitized	P/Pf/C	00
2 Certified Food Protection Manager for Classes 2, 3, & 4	(3)	0	0	17 0	0			ion of returned, previously tioned, and unsafe food	Р	00
Employee Health								ture Control for Safety		
Management, food employee and conditional employee;	P/Pf	0		18 🔾	0	0 OP	roper cooking	time and temperatures		00
knowledge, responsibilities and reporting 4 Proper use of restriction and exclusion	P	0		19 🔾	0		roper reheatin	g procedures for hot holding		00
Written procedures for responding to vemiting and				21 3	0		roper cooling	time and temperatures ing temperatures		00
diarrheal events	Pf	0	0	22 0	0	OOP	roper cold hol	ding temperatures		00
Good Hygienic Practices				23 🕏	0			rking and disposition	P/Pf	00
6 Proper eating, tasting, drinking, or tobacco products us 7 No discharge from eyes, nose, and mouth	e P/C	0		24 🔾	0			c health control: procedures	P/Pf/C	00
Preventing Contamination by Hands		101	\subseteq			a	nd records	umer Advisory		
8 O Hands clean and properly washed	P/Pf	0	0	25 🔘	0	Ø c		y provided: raw/undercooked food	Pf	00
No bare hand contact with RTE food or a	P/Pf/C	0	0			1	Highly Sus	ceptible Population		
pre-approved alternative procedure properly followed Adequate handwashing sinks, properly supplied/accessible		10355	0	26	0			used; prohibited foods not offered	P/C	00
Approved Source	Pf/C		-	27 0	0			ves and Toxic Substances approved and properly used	I I I	00
11 O Food obtained from approved source	P/Pf/C	101	0	-				es properly identified,		
12 O Food received at proper temperature		0		88	1	S	tored & used		PPf/C	00
Food in good condition, safe, and unadulterated	P/Pf	0	0			Co	nformance wi	th Approved Procedures	The second	
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29 🔾	0			h variance/specialized riteria/HACCP Plan	P/Pf/C	00
GO				RACTICE						The same
Good Retail Practices are preventative measures to										
				for COS a	and/or	R C		A STATE OF THE PARTY OF THE PAR	R=repeat	A STATE OF THE PARTY OF THE PAR
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	V P	cos	-	OUT	In_uec	utoneile	Proper Us properly stor	se of Utensils		COS R
31 Water and ice from approved source	P/Pf/C		5					perly stored, dried, & handled		00
32 Variance obtained for specialized processing methods	Pf	0	0					es: properly stored & used		00
Food Temperature Control		, ,		46 0	Glove	es used p			С	00
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0		-	Eood	and non		and Equipment	1	VIII S
34 O Plant food properly cooked for hot holding	Pf		0				ned, construct	surfaces cleanable,	P/Pf/C	00
35 O Approved thawing methods used	Pf/C		-	and the second				illed, maintained and used:	1	
36 Thermometers provided and accurate	Pf/C	0	0	40	cleani	ing agent	ts, sanitizers, a	and test strips available	722	00
Food Identification	7			49/90	Non-f	ood cont	act surfaces c		(0)	00
37 Food properly labeled; original container Prevention of Food Contamination	Pf/C	0	0	50	Llot o	nd nold		ical Facilities		
38 Insects, rodents, and animals not present	Pf/C	101						; adequate pressure ackflow devices	Pf (P/P)f/C	
39 Contamination prevented during food preparation, storage & display	P/Pf/C			(52) 65	Sewa	ge and w	aste water pro	operly disposed	PIPEC	00
40 Personal cleanliness		0		(53) Q	Toilet	facilities	properly cons	structed, supplied, & clean	7	00
41 Wiping cloths: properly used and stored 42 Washing fruits and vegetables	C	0		54 0	Garba	ge and re	fuse properly di	sposed; facilities maintained		00
	P/Pf/C			56	Adea	cal facilit	ies installed, n	naintained, and clean nting; designated areas used	P/Pf/C	
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable	•					not used per CGS §19a-36f	C	00
Person in Charge (Signature) And le - 1/2	11.11	į		Violatio	ons do	cument	ed	Date corrections due		#
Person in Charge (Signature)	· [a		_			/iolations		813124		3
Person in Charge (Printed) H3 WWA Rev		-		Core Ite			m Violations	8710124 10131124		2
1 - 71	7,1	21	\dashv	Risk Fac	ctor/P	ublic Hea	alth Intervention	on Violations	-	3
Inspector (Signature)	/ اک	24		Repeat	Risk F	Factor/Pu	ıblic Health Int	ervention Violations		
Inspector (Printed) Jose Ramicez	1						Violations	x if you intend to reinspect	-	4/
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to	corre	ect anv ir	nsper	ction viol	ation identifie	d by the food inspector or t	o hold d	estrov
or dispose of unsafe food, may appeal such order to the	Directo	or of I	Heal	Ith, not la	ater th	an forty	eight hours	after issuance of such order	. Hold, de	Janoy,

Inspection Report Continuation Sheet TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Process Item/Location/Process Item/Location/Process Item/Location/Process Item/Location/Process Item/Location/Process Item/Location/Process Item/Location/Item/		Foo	d Esta	blish	ment Ir	nspe	ction F	Report	Pag	e_2_0	of <u>2</u>
TEMPERATURE OBSERVATIONS Temp Item/Location/Process Temp Item/Location/Process Temp Under Counter Cooler Almond Milk 37F e.g. 41F Quat Bucket 400 ppm C(cam dispenser 41F Sausage 41F 3 bay 51nk 137F C(cam dispenser 41F Sausage 41F 3 bay 51nk 137F WIC e.g. 33F Cheese 41F Sausage 11F 3 bay 51nk 137F WIC e.g. 33F Cheese 41F Sausage 15F Wick e.g. 15F Cheese 40F Drive throw that Hold F Gousage 15TF Observations alled in this report must be corrected within the lime frames below, or as stated in sections 8-405.11 & 8-406.11 of the food code. No CFPM on Site. Ashley (Manager) exp. last month. Must correct by 2/3/1 49C interior exterior of hand sink at active throunclean 28P unlabled spray bottle w Sanitizer 52C Standing water on Flore w Silding door Cooler 16P 3 Bay Quat > 400 ppm 53PF customer bathrooms (both) unclean 51P customer bathrooms (both) unclean 51P customer bathrooms Sinks at 160F Note Contact Ecolob to adjust Quat dispenser until then, dilute Quat w water and test w/ test strips. Quat must be 150 ppm - 400 ppm. Note CPPM must be on site during all operating hours. CPM must be provided by 8/31/24. Note Customer bathrooms are both at 160 F. Handsinks in customer bathrooms nust be 85 F— 115 F. Both bathrooms must be placed out of order immediately until Fixed. No cline in allowed while bathrooms are out of service. Call health dept. when fixed. Do not reogen bathrooms or allow dine in until health dept. Service test strips thermometer available.	LHD_/								Date	1/3/	124
TEMPERATURE OBSERVATIONS Temp Item/Location/Process Temp Item/Location/Process Temp Under Counter Cooler Almond Milk 37F e.g. 41F Quat Bucket 400 ppm C(cam dispenser 41F Sausage 41F 3 bay 51nk 137F C(cam dispenser 41F Sausage 41F 3 bay 51nk 137F WIC e.g. 33F Cheese 41F Sausage 11F 3 bay 51nk 137F WIC e.g. 33F Cheese 41F Sausage 15F Wick e.g. 15F Cheese 40F Drive throw that Hold F Gousage 15TF Observations alled in this report must be corrected within the lime frames below, or as stated in sections 8-405.11 & 8-406.11 of the food code. No CFPM on Site. Ashley (Manager) exp. last month. Must correct by 2/3/1 49C interior exterior of hand sink at active throunclean 28P unlabled spray bottle w Sanitizer 52C Standing water on Flore w Silding door Cooler 16P 3 Bay Quat > 400 ppm 53PF customer bathrooms (both) unclean 51P customer bathrooms (both) unclean 51P customer bathrooms Sinks at 160F Note Contact Ecolob to adjust Quat dispenser until then, dilute Quat w water and test w/ test strips. Quat must be 150 ppm - 400 ppm. Note CPPM must be on site during all operating hours. CPM must be provided by 8/31/24. Note Customer bathrooms are both at 160 F. Handsinks in customer bathrooms nust be 85 F— 115 F. Both bathrooms must be placed out of order immediately until Fixed. No cline in allowed while bathrooms are out of service. Call health dept. when fixed. Do not reogen bathrooms or allow dine in until health dept. Service test strips thermometer available.	Establish	ment DUNKIN D	anuts -	Tollano	Town_MO	och t	ester			/ /	
under conter cooler Almond Milk 37F egg 41F Quat Bucket 40ppm C(cam dispenser 41F Suxage 41F 3 bay 51nk 137F C(cam dispenser 41F 5 suxage 41F 3 bay 51nk 137F WIC eggs 33F cheese 41F 5 suxage 40F Cheese 42F Orive thro that told Cheese 42F Orive through All Confective Actions OBSERVATIONS AND CORRECTIVE ACTIONS Confection of the report must be corrected within the time trames below, or as stated in sections 8-405.11 & 8-406.11 of the food code. Note City of the told of the object of the code o				TEMI	PERATURE C	DBSERV	ATIONS	NIE ZOSENIE			
Almond Milk 37F sausage 41F Quat Bucket dooppm Cleam dispenser 41F sausage 41F 3 bay 51nk 137F WIC eggs 33F scheese 41F Sousage 34F Scambled egg 40F Choose 40F Orive thro Hot Hold F Sousage 15F Choose 40F Orive thro Hot Hold F Sousage 15F Sousage 15F Observations and connective 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. Number 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. Number 2 C NO CFPM on Site. Ashley Manager exp. last month. Must careet by 2/3/2. 99 C interior exterior of hand sink at drive three unclean 28 P unlabled spray bottle w Sani tizer 52 C standing water on Floor by Sliding door cooler 16P 3 Bay Quat > 400 ppm 53 PF Customer bathrooms (both) unclean 51 P Customer bathrooms (both) unclean 51 P Customer bathroom sinks at 160 F Note Confact Ecolab to adost quat dispenser until then, dilute Quat w/ water and test w/ test strips Quat must be 150 ppm - 400 ppm. Note Crpm must be on site during all operating hours. APM must be provided by 8/31/24. Note Customer bathrooms are both at 160 F. Handsinks in customer bathrooms must be 85 F - 115 F. Both bathrooms must be placed out of order immediately until Fixed No dine in allowed while bathrooms are out of service. Call health dept, when fixed Do not reopen bathrooms or allow dine in until health department reinspects and approves. Note Test strips & thermometer available Person in Charge (Signature) Date	-		Temp					11 1			District Control Control
Cream dispenser 41F WIC eggs 33F sheese 41F Sousage 34F Strambled egg 40F Choose 40F Drive thru that Hold Choose 40F Drive thru that Hold Sousage 57F OBSERVATIONS AND CORRECTIVE ACTIONS Violetions 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. No CFPM on Site. Ashley (Manager) exp. last month. Must correct by \$131/94. 49C. Interior exterior of hand sink at drive three unclean 28P unlabled spray bottle w Sanifizer 52C Standing water on floor by Sliding door Cooler 16P 3 Bay Quat > 400 ppm 53PF customer bathrooms (both) unclean 51P customer bathrooms (both) unclean 51P customer bathrooms sinks at 160F Note Contact Ecolab to adost quat dispenser until then, dilute Quat w water and test w test strips quat must be 150 ppm - 400 ppm. Note CPPM must be on site during all operating hours. APM must be provided by 8/31/29. Note Customer bathrooms are both at 160 F. Handsinks in customer bathrooms must be 85F—115F. Both bathrooms must be placed out of order immediately until Fixed No dine-in allowed while bathrooms are out of service. Call health dept, when fixed Do not reopen bathrooms or allow dine in until health department reinspects and approves.	O TIOU.		37F			19 100					
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28P unlabled spray bottle w/ sanifizer 52c Standing water on Floor by Sliding door cooler 16P 3 Bay Quat > 400 ppm 53PF customer bathrooms (both) unclean 51P customer bathroom sinks at 160F Note Contact Ecolob to adjust Quat dispenser until then, dilute Quat w/ water and test w/ test strips. Quat must be 150 ppm - 400 ppm. Note CFPM must be on site during all operating hours. CFPM must be provided by 8/31/24. Note Customer bathrooms are both at 160 F. Handsinks in customer bathrooms must be 85F-115F. Both bathrooms must be placed out of order immediately until Fixed. No dine-in allowed while bathrooms are out of service. Call health dept, when Fixed. Do not reopen bathrooms or allow dine in until health department reinspects and approves. Note Test strips & thermometer available		NO CFPM O	n Site	2. 115h	ley (Manage	er) e	xp. /as	t month	. Must	correct	t by 8/31/2
SZC Standing water on Floor by Sliding door Cooler 168 3 Bay Quat > 400 ppm 538F Customer bathrooms (both) unclean 518 Customer bathroom sinks at 160 F Note Contact Ecolab to adjust Quat dispenser until then, dilute Quat w/ water and test w/ test strips. Quat must be 150 ppm - 400 ppm. Note CFPM must be on site during all operating hours. AFM must be provided by 8/31/24. Note Customer bathrooms are both at 160 F. Handsinks in customer bathrooms must be 85 F-115 F. Both bathrooms must be placed out of order immediately until Fixed. No dine-in allowed while bathrooms are out of service. Call health dept, when fixed. Do not reopen bathrooms or allow dine in until health department reinspects and approves. Note Test strips & thermometer available Person in Charge (signature)	_	interior /ex	terior	of ho	and sink	at a	drive th	10 UNC	lean	(E)	98 P
16 Bay Quat > 400 ppm 53PF Customer bathrooms (both) unclean 51P Customer bathroom sinks at 160F Note Confact Ecolab to adjust Quat dispenser until then, dilute Quat w/ water and test w/ test strips Quat must be 150 ppm - 400 ppm. Note CFPM must be on site during all operating hours. AFM must be provided by 8/31/24. Note Customer bathrooms are both at 160F. Handsinks in customer bathrooms must be 85F-115F. Both bathrooms must be placed out of order immediately until Fixed No dine-in allowed while bathrooms are out of service. Call health dept, when fixed. Do not reopen bathrooms or allow dine in until health department reinspects and approves. Note Test strips & thermometer available Person in Charge (signature)		unlabled s	pray b	offle	W/ Sar	ni tiza	2				
SIP Customer bathrooms (both) unclean SIP Customer bathroom sinks at 160 F Note Contact Ecolab to adjust Quat dispenser. Until then, dilute. Quat w/ water and test w/ test strips. Quat must be 150 ppm - 400 ppm. Note CFPM must be on site during all operating hours. (HM) must be provided by 8/31/24. Note Customer bathrooms are both at 160 F. Handsinks in customer bathrooms must be 85 F-115 F. Both bathrooms must be placed out of order immediately until Fixed. No dine-in allowed while bathrooms are out of service. Call health dept, when fixed. Do not reopen bathrooms or allow dine in until health department reinspects and approves. Note Test strips & thermometer available	52 C	Standing wo	iter on	Floor	by Slidi	ng da	pr Coole	<u> </u>			
SIP Customer bathrooms (both) unclean SIP Customer bathroom sinks at 160 F Note Contact Ecolab to adjust Quat dispenser. Until then, dilute. Quat w/ water and test w/ test strips. Quat must be 150 ppm - 400 ppm. Note CFPM must be on site during all operating hours. (HM) must be provided by 8/31/24. Note Customer bathrooms are both at 160 F. Handsinks in customer bathrooms must be 85 F-115 F. Both bathrooms must be placed out of order immediately until Fixed. No dine-in allowed while bathrooms are out of service. Call health dept, when fixed. Do not reopen bathrooms or allow dine in until health department reinspects and approves. Note Test strips & thermometer available	168	3 Bay Qu	at >	4000	pm		West of the second				
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Note Contact Ecolab to adjust Quat dispenser. Until then, dilute. Quat w/ water and test w/ test strips. Quat must be 150 ppm - 400 ppm. Note CFPM must be on site during all operating hours. CFPM must be provided by 8/31/29. Note Customer bathrooms are both at 160 F. Handsinks in customer bathrooms must be 85 F-115 F. Both bathrooms must be placed out of order immediately until Fixed. No dine-in allowed while bathrooms are out of service. Call health dept, when Fixed. Do not reopen bathrooms or allow dine in until health department reinspects and approves. Note Test strips & thermometer available Person in Charge (signature)	518	Customer bo	athroom	s Sin	ks at	160 F					
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Mote Customer bathrooms are both at 160 F. Handsinks in customer bathrooms must be 85 F-115 F. Both bathrooms must be placed out of order immediately until Fixed. No dine-in allowed while bathrooms are out of service. Call health dept, when Fixed. Do not reopen bathrooms or allow dine in until health department reinspects and approves. Note Test strips & thermometer available Deerson in Charge (Signature)		150 00m -	400000	1.				11-, 1-			
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Note Customer bathrooms are both at 160 F. Handsinks in customer bathrooms must be 85 F-115 F. Both bathrooms must be placed out of order immediately until Fixed. No dine-in allowed while bathrooms are out of service. Call health dept. when Fixed. Do not reopen bathrooms or allow dine in until health department reinspects and approves. Note Test strips & thermometer available Person in Charge (Signature)	100.	must be a	Covided	b1/	8/31/2	100 0	ii opci	amg	10010.	<u>QIII</u>	
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placed out of order immediately until Fixed. No dine-in allowed while bathrooms are out of service. Call health dept, when Fixed. Do not reopen bathrooms or allow dine in until health department reinspects and approves. Note Test Strips & thermometer available Decension in Charge (Signature)	10010	bathrooms	001110011	La	85 F_	1155	5 P - 6			1-1	i I
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Fixed. Do not reopen bathrooms or allow line in until health department reinspects and approves. Note Test Strips & thermometer available Person in Charge (Signature)		while by the	07 06 06	er imp	L.C.	UNTIL	rixed	1000	1112-11	allo	wed
Vote Test Strips & thermometer available Person in Charge (Signature)		Fixed Dathi	00M2 A	15 00	1 of Se	CUICE	2, <u>(all</u>	nealth	i dept	whe	211
Person in Charge (Signature)		dear the sale	07 (0	over)	<u>Dainiosp</u>	9000	c allol	u dine	IN UN	t11 /	realth
Person in Charge (Signature)	Malo	Tool Theny	1 einspe	cts ar	1 applou	25. 11					
		- /	10 (1)	Mome	ter ava	Hable -					
nspector (Signature) Supplied The Total Andrew Date 7/31/24		1	\sim				nago:		Date	_ ,	,
	Inspector	(Signature)	1/	1					Date	//31	124

Risk Category: 2 Food Establ	ishm	ent	: In	spec	ction	Report		Pa	ge 1 of	2	
Establishment type: Permanent Temporary Mobile Other					- Date	: 711	\$ /24				
Establishment EA Teriyaki		4567ing	Connec	SCAN HEAVILLE	Time		15 AM/PI	M Time Out_	3:49	<u> </u>	мем
Address 194 BUCKLEND HILL dr #2056				H)	LHD	man	ichest	2			
Town/City Manchester					Purp	ose of Insp	ection:	Routine	Pre-op)	
Permit Holder		of Pub	lic He	alth		spection		her			
FOODBORNE ILLNESS RISK FA									rno Wasaa ar	. Indiana	
Risk factors are important practices or procedures identified as the most prevalent control. Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it											
P=Priority item Pf=Priority foundation item C=Core item V=violation type				complian		JT=not in com		N/A=not applicable	110	ot obse	S. S. S. S.
IN OUT N/A N/O Supervision	V		R	_	1			om Contamination	CONTRACTOR	epeat v	T -
Porcon/Alternate Person in charge present	i iya	COS	K		OUT N/		eparated and		on		OS R
demonstrates knowledge and performs duties	Pf	0						es: cleaned & san	itizod (D	1	00
0 15 15 15 1 10 11 11 11			-		90 0	Proper		f returned, previou			99
2 Certified Food Protection Manager for Classes 2, 3, & 4	C	0		17 🛇		AND DESCRIPTION OF THE PERSON		d, and unsafe foo		P	
Employee Health								Control for Safet			
Management food employee and conditional employees	T			18	000			and temperatures		/Pf/C	
knowledge, responsibilities and reporting	P/Pf	0	\supset	19	000	Proper	reheating pro	cedures for hot h	oldina		50
4 0 Proper use of restriction and exclusion	Р	0	0	20	000	Proper	cooling time	and temperatures			50
Written procedures for responding to vemiting and	-			21 🛈			hot holding to				50
diarrheal events	Pf	0		22 0				temperatures			00
Good Hygienic Practices				23 🔾				and disposition		P/Pf C	00
6 O Proper eating, tasting, drinking, or tobacco products us	e P/C			24 🔾	000	/ Time or		alth control: proce	dures	/Pf/C	
7 No discharge from eyes, nose, and mouth	С	0	\supset	24		and rec	ords		P	PIIC	
Preventing Contamination by Hands		-				/	Consumer	Advisory			
8 Ø P Hands clean and properly washed	P/Pf	0	0	25 🔾	OQ	Consume	er advisory prov	rided: raw/undercooke	ed food	Pf (00
No bare hand contact with RTE food or a	P/Pf/C	0	\circ			/ Hig	hly Suscept	ible Population			NI III
pre-approved alternative procedure properly followed	122	3373	355-68	26 🔾	90	Pasteuriz	red foods used;	prohibited foods not	offered	P/C	00
Adequate handwashing sinks, properly supplied/accessible	(Pf)C	0	0		/	Food/Colo	r Additives a	and Toxic Substa	ances		
Approved Source				27	000	Food a	dditives: appr	roved and properly	y used	P	00
11 🛇 🔾 Food obtained from approved source	P/Pf/C	0	0	28		Toxic s	ubstances pr	operly identified,		P/Pf/C	
12 O Food received at proper temperature			0	20	7	stored a				11 110	
13 Co Food in good condition, safe, and unadulterated	P/Pf	0	\bigcirc		1			pproved Procedu			
Required records available: molluscan shellfish	P/Pf/C	0	0	29 🧭	100			riance/specialized	P	P/Pf/C	
identification, parasite destruction	OD DE	TAIL	DD	ACTIC		process	S/ROP criteria	a/HACCP Plan			
Good Retail Practices are preventative measures to				ACTIC		abamiaala an	d abusical abis	sata inte faceda			
					and/or R		A Company of the Comp	Contract to the contract of th	D		istation
OUT N/A N/O Safe Food and Water	v	cos		OUT	-			te during inspection	K-1	epeat v	OS R
30 Pasteurized eggs used where required	P	0	-			tensils: prop	oper Use of	Otensiis		-	
31 Water and ice from approved source	P/Pf/C	-	0					stored, dried, & har	dlod	~	00
32 O Variance obtained for specialized processing methods	Pf	0						operly stored & use			00
Food Temperature Control	u in in in	101				used properl		opony stored a doc	, .		00
Proper cooling methods used: adequate equipment for	T	ГТ			10.01.00			d Equipment			0,0
temperature control	Pf/C	0	\circ		Food a			ces cleanable.			
34 O O Plant food properly cooked for hot holding	Pf	0		47)		onstructed, a		P.	/Pf/C	00
35 O Approved thawing methods used	Pf/C	0		100				maintained and u	sed;	200	
36 C Thermometers provided and accurate		0		48	21	~		est strips availabl	50 DELO	Pf/C	0
Food Identification				49	Non-foo	od contact su	rfaces clean			(c)	00
Food properly labeled; original container	Pf/C	0	0				Physical	Facilities		3	
Prevention of Food Contamination				(50)	Hot and	d cold water a	available; ade	equate pressure		(Pf)	00
38 O Insects, rodents, and animals not present	Pf/C	0	0	(51)	Plumbi	ng installed;	oroper backflo	ow devices	P	Pf/C	00
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	0				water properly		P	/Pf/C	00
40 Personal cleanliness	Pf/C	0	0	53	Toilet fa	acilities: prop	erly construc	ted, supplied, & c	lean	Pf/C	00
41 Wiping cloths: properly used and stored	С	0		54 🔾	Garbage	e and refuse p	roperly dispos	ed; facilities mainta			00
42 Washing fruits and vegetables	P/Pf/C	0	0	55 🔾	Physica	al facilities ins	stalled, maint	ained, and clean	P	/Pf/C	0
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ailable.						; designated areased per CGS §19		C	00
Person in Charge (Signature) 12 2:2401	5/1	~7	11	Violati	ions doc	umented		Date corrections	due		#
Person in Charge (Signature) & ENDO Date OH	11/	21	7		y Item Vid		lotions		24	2	
Person in Charge (Printed)			,			tion Item Vio	iations	71 25		4	
- steem an ontarge (r minear)			\dashv		tem Viola		tervention Vi		124		
Inspector (Signature)	15/2	24		Repea	at Risk Fa	ctor/Public F	ealth Interve	ention Violations		4	
1 1 7	l	1	\dashv			actices Viola		TO COLOTIO		1	7 ,
Inspector (Printed) Tose Kamilez								ou intend to rein	spect	* A	1
Appeal: The owner or operator of a food establishment aggrieved by t	his orde	er to	corr	ect any	inspecti	on violation	identified by	the food inspect	or or to h	old de	estrov
or dispose of unsafe food, may appeal such order to the	Direct	or of I	Hea	Ith not	later the	n forty-eight	hours after	issuance of such	order	-, -,	

Food Establishment Inspection R	eport Page 🕹	of <u>A</u>
HD Manchester Inspection Report Continuation Sheet	Date_7-15-	24
Establishment EA Tecillaki Town Manchester		
TEMPERATURE OBSERVATIONS		
Item/Location/Process Temp Item/Location/Process Temp	Item/Location/Process	Temp
2 door RIC Chicken 40 F Hot Hold acil Chicken 154 F 1	Hand sink by ice	120F
I raw Beef 37F I rice 144F	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1001
Marinated Caw Chicken 41F Spring coll 195F		
,		
Hot Hold (ice 170 F My Beef 36 F		
Brown rice 180F Hot Hold noodles 152F		
NC Chicken gof		
OBSERVATIONS AND CORRECTIVE ACTION	IS	
Item 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.
Number		
50PF No Hot water at 3 bay		
49C interior of under counter cooler unclean		
16PF interior of ice machine unclean		
43c Scop Handle burried in Flour bin		
370 unlabeled soverze bottles thoughout		
99c exterior of flour bin unclean		
	bay	
170 Caulk around 3 bay unclean not cleanable		
51P NO hose bib vacuum breaker at mop sink		
169 No sanifizer made (CoS)		
490 interior & exterior of cookline equipment o	nclean	
49C Standing liquid on Floor in Stocage coom		
10tt 1100 Pavel towels at hand sink by late.		
age Shelving throughout unclean		
490 WIC ceiling unclean 490 Ceiling vent above 3 bay unclean.		
490 Ceiling Vent above 3 bay unclean.		
Vote Do not use under counter reach in un.	Ell it is socied	
and holding Food at ALF or helping	111 13 30 1100	
Note Hot water must be available by 7-16-20	4 10:00 Canas	+ area
unless hot water is available at 3 bay	and inspected	y gas
by health dept. R	The little	
Person in Charge (Signature) REIVIN	Pata 57 /1=	12=211
nspector (Signature)	Date 07/15	1-24
	Late / - I	

Pink Catagony 7				2 519				2
Risk Category: 3 Food Establ	iisnn	nent	Insp	ecti	on Ke	port	Page 1	of
Establishment type: Permanent Temporary Mobile Other					Date: (6/27/24		
Establishment EISOL Deli		teching Co	muecticar Hea	W.	Time In	11 6	M/PM Time Out 12	:30 AM/PM
Address 631 Mainstreet		DP	H		LHD	yanche	ster	
Town/City Manchester					Purpose	e of Inspection:	Routine P	ге-ор
Permit Holder Janey - Noton sitt	C	onnecticut of Public	Departme Health	nt	Reinspe	ection	Other	
FOODBORNE ILLNESS RISK FA								
Risk factors are important practices or procedures identified as the most prevalent cont				Charles Services			measures to prevent foodborne illi	ness or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered in			in comp			not in compliance	N/A=not applicable N	I/O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type		1		x for C	OS and/or	R COS=correct	ed on-site during inspection	R=repeat violation
IN OUT N/A N/O Supervision	V	COS F			JT N/A N/C		on from Contamination	V COS R
Person/Alternate Person in charge present,	Pf	00	(15)	0,9	\$ O C	Food separated	and protected	(P)COO
The state of the state of the portonino dates	しつ		16	Ø Ç	00	Food-contact su	rfaces: cleaned & sanitize	
Certified Food Protection Manager for Classes 2,		00		0/0	10000		on of returned, previously	Tool Base Record
3, & 4	(c)		17	CO C		A 25	ioned, and unsafe food	POO
Employee Health				/			ture Control for Safety	DE VISIT CONTRACTOR
Management food employee and conditional employee:		TT	18	do	200	Broner cooking	time and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting	P/Pf)		000	Proper reheating	g procedures for hot holding	g POO
4 V O Proper use of restriction and exclusion	Р	00	_		000	Proper cooling t	ime and temperatures	
Written procedures for responding to vemiting and						Decree beat ald	ine and temperatures	P O O
diarrheal events	Pf	00	21 (22)			Proper hot holdi		P 0,0
				0 9		Proper cold hold	ing temperatures	(P)X(O
Good Hygienic Practices Proper eating, tasting, drinking, or tobacco products us	e Pig	1-1-	23	0	09		king and disposition	P/PF O O
g, treating, and treating of the same of t				00			health control: procedure	S P/Pf/C O
No discharge from eyes, nose, and mouth		0				and records	=	171 110 0
Preventing Contamination by Hands				1			mer Advisory	
8 Hands clean and properly washed	P/Pf	00	25	000		Consumer advisory	provided: raw/undercooked foo	d Pf OO
9 No bare hand contact with RTE food or a	P/Pf/C	0			/	Highly Susc	ceptible Population	
pre-approved alternative procedure properly followed	PIPIIC	1010	26	00	0	Pasteurized foods u	used; prohibited foods not offere	d P/C O O
(10) Adequate handwashing sinks, properly supplied/accessible	Pf/C	900		11 777	Fo		es and Toxic Substance	
Approved Source	U		27	01	- Aller		approved and properly use	
11 Ø O Food obtained from approved source	P/Pf/C	100	7	/		Toxic substance	es properly identified,	
12 O O Food received at proper temperature		00		00			s property identified,	P/Pf/C O O
13 Food in good condition, safe, and unadulterated						stored & used		Value of the state
Poquired records available: mallugger shallfish	PP	00	4				th Approved Procedures	
	P/Pf/C	00	29	00	0		variance/specialized	P/Pf/C O O
identification, parasite destruction	00.05					process/ROP cr	iteria/HACCP Plan	IT NOTES AND AREA
		TAIL						
Good Retail Practices are preventative measures to								
	n appro	priate bo	ox for Co	OS and	/or R	COS=corrected c	n-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	٧	COS		TUC	- V - 1		e of Utensils	V COS R
30 Pasteurized eggs used where required	P	00) 43	O In-	use uten:	sils: properly store	ed	000
31 O Water and ice from approved source	P/Pf/C	00) 44	O Ut	ensils/equi	ipment/linens: prop	erly stored, dried, & handled	Pf/C O O
32 O Variance obtained for specialized processing methods	Pf	0) 45	O Sir	ngle-use/si	ingle-service article	s: properly stored & used	P/C 0 0
Food Temperature Control						d properly		000
Despes seeding modes at 1 1 1 1 1 1 1 1 1			180				and Equipment	
133 Proper cooling methods used; adequate equipment for temperature control	Pf/C	00		. Fo	od and n		urfaces cleanable.	00
34 O Plant food properly cooked for hot holding	Pf	00	(47)			signed, constructe		PPC O
35 O Approved thawing methods used	Pf/C		5	IM	arewach!	na facilitica: instal	led, maintained and used;	
36) Thermometers provided and accurate	Pfic		48					Pf/C O O
Food Identification	FIR						nd test strips available	
Food properly labeled; original container	_	101-	49	UNC	11-100g C	ontact surfaces cle		000
Prevention of Food Contamination	THIC)00	1	<u> </u>			cal Facilities	
		1	50	OHO	t and col	d water available;	adequate pressure	Pf (O (O
38 Insects, rodents, and animals not present	Pf/C	0	2 51	Q PI	umbing in	stalled; proper ba	ckflow devices	P/Pf/C O O
Contamination prevented during food preparation, storage & display		00		XX Se	wage and	d waste water pro	perly disposed	PARC)OO
40 Personal cleanliness		00		X To	ilet facilit	ies: properly cons	tructed, supplied, & clean	(Pf/COO
41 Wiping cloths: properly used and stored	_ C	00		O Ga	rbage and	d refuse properly dis	sposed; facilities maintained	400
42 Washing fruits and vegetables	P/Pf/C	00		≫ Ph	ysical fac	cilities installed, m	aintained, and clean	P/PfC O
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is au	ailablo	(56)	≪ Ad	equate v	entilation and ligh	ting; designated areas use	
A A A	ava	andole.		X Na	tural rubb	ber latex gloves no	ot used per CGS §19a-36f	
I de la	7-1	7.1	Viol	ations	docume	ented	Date corrections due	#
Person in Charge (Signature) WWW Date (0 -	4-	4			m Violatio		711124	5
		- 1				Item Violations	7/7/24	5
Person in Charge (Printed) Tank Rangel			Core	e Item	Violations	s	9/27/24	7
2 Observation 1 to	710:	N/C	Risk	Facto	r/Public I	Health Intervention	n Violations	9
Inspector (Signature) 7 , XP//////// Date () / 2	114						ervention Violations	<u> </u>
MINON Ara WALL	, ,					es Violations		11
Inspector (Printed) WWW I S MU			Rec	uires	Reinspe	ction - check box	if you intend to reinspec	
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to co	rrect a	ny ins	pection v	iolation identified	by the food inspector or	to hold destroy
or dispose of unsafe food, may appeal such order to the	Directo	or of He	ealth, n	ot late	r than fo	rty-eight hours at	fter issuance of such orde	er.

reinspection: Monday july 1st 2024

Food Establishment Inspection Report Page Z of 3

LHD Manchester	M ESTO	Inspection Report Continuation			127/24
Establishment EI (0 Deli		Town Man	chester		
Establishment Of 101 P CT		TEMPERATURE OBS			
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Pro	
Bay Marie pico	58F	Bay Marie pico	ADF	handsink H	tw imf
empanodo steak	54F	Chicken'	AIF	brach sanitiz	er-50-100ppm
embanada chix	55F 53-58F	Chorizo Bee F	41F	WIC	38F
sour creary	177F	empanada	AIF	Shrimp	41F
rice at havivalue ines		omparaco		chorizo.	AIF
	J. J.	M3 Freezer	7F	empanada	415
undercounter Freezer	OF	2000r Freezer	-10F	1	
Violations cited in this	OE s report must be	SERVATIONS AND COR e corrected within the time frame	RECTIVE ACTION S below, or as stated		106.11 of the food code.
Number Manager on sit	t (Notc)	FDM): lanet			
		tored in nandw	ach sink	1(05)	
		nt - discarded			ge (cos)
150 ice not prot	1 22	in undercount	* I S		70 000
		otlabeled at			ρ.
39 pf food on grou		málk in cooler	10 00 / 1 1 10() (2 WI COVIII	
	1AV 1/0	nt jeaking/dr	innina - F	tvar torenall	r
10 pf no soab at	- hark h	nandsink near	manadi	a hien	
1 1		entstored on	took teath seed	1 7	1
	1 1 1 1	6 stored on sod			
	I ₁	Chelvina in Wi		01 11001	
110 11111111111111111111111111111111111				- nin 50° C+	-en K
empanada	54F 1h	ot holding temp ux empanada 5	EF A LANT	ALLO DO DI	raaho
be threan =	2-06F	all food produc	+ diccorn	lad valuntar	ill bu
22p Rice nesting	rarge-	owner to place	diccordad	valuntarile	, until repaire
36 pf no thin pro	no ther	mark at so.	anurueu r	voivillarity	(05)
1 pt/2c no certitied				Larren in	1 1 10 10 10 10 10
knowled ado			CI UII SIIC	person in	murge
1000		- 15 C W	rectronno	r	
53 pf toilet paper		18 €			
53 pF paper towel	• • • • • • • • • • • • • • • • • • • •			tohoroma	110 d Lran
establishme	, ,	table not und	CF 110001-	10 Delellio	veuriorn
	/ 4	it Rangel)		1 -27 210
Person in Charge (Signature)	I hand I	N Naviga		Date	1 1- 1- 5
Inspector (Signature)	JUNIU	<u>// </u>		Date	6/27/24

Food Establishment Inspection Report Page 3 of 3

LHD_M	inchester		Inspection Report Continuation She	et	Date 6/27/2	14
Establish	ment ELSOIDEI	ì	Town_Manch	ester		
			TEMPERATURE OBSERV	/ATIONS		
ltem	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
		ОВ	SERVATIONS AND CORREC	TIVE ACTIO	NS	
Item Number	Violations cited in this	s report must be	corrected within the time frames belo	w, or as stated in	n sections 8-405.11 & 8-406.11 of the	food code.
13 p	noice Mach	ine -i	ce being made	in Freez	er - not approved	
1	4) discussed	comme	ercial NSF or equ	watent	ice Machine	
55C			beingstored in	basem	ent-remove	,
	clutter/tra		<i>J</i>			
<i>U</i> p	coffee with	1 out lia	stored on prepto	ible wh	ilie making empan	adas
NIALA X	HANITH DON	+ rann	etral armal tales	lovas A Ma		
1007 (2)	durinatin	1 LEYVE	sted CFPM to be	preseri	I not available	/
MATTI			ding, reneating o	it+ime.	orinspection	
X	Staff (at Ita	st 2) tr	nat is on site, 30 h	irs or m	ore per Week in	١
	managerial	position	n must obtain o	FPM II	n 30 days from	
	this d'ate. t	tealth	pept to email ap	proved	ANSI courses to) ⁰
			•		*	
	Follow-up or	1 COOKIE	s at Front of house	ni est		
						
Person in	Charge (Signature)				Date (/ - 2	7-24
Inspector	(Signature)	rondl	Y Santon	N	Date (6/27/	24

Risk Category: 3 Food Establ	ishn	nen	t Ir	spec	tion Re	port	Page	1 of <u>2</u>
Establishment type: Permanent Temporary Mobile Other					Date:	7/1/24		
Establishment Filomena'S		4287	d Contret	cticut Health	Time In	12:30 A	.M.(PM) Time Out	:45 AMOM
Address 775 main St.			D	H)	LHD A	1anchest		
Town/city Manchester		9			Purpose	e of Inspection:	Routine	Pre-op
Permit Holder Michael Kelley FOODBORNE ILLNESS RISK FA	7.550	of Pu	ablic He	San Control	Reinspe	120.33	Other	
Risk factors are important practices or procedures identified as the most prevalent control			7174					illness or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it		_		complianc		not in compliance	N/A=not applicable	N/O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type IN OT N/A N/O Supervision	Mark ir	cos			OUT N/A N/O		ted on-site during inspection on from Contamination	R=repeat violation
Person/Alternate Person in charge present						Food separated		PO O
demonstrates knowledge and performs duties	Pf	0			90		urfaces: cleaned & sanitiz	red P/Pf/C O O
Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17	9		on of returned, previously tioned, and unsafe food	/ POO
Employee Health							ture Control for Safety	
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	0		18	000		time and temperatures g procedures for hot hold	P/Pf/C O O
4 Proper use of restriction and exclusion	Р	0	0	20 0			g procedures for not hold time and temperatures	ling POO
Written procedures for responding to vomiting and	Pf	0	0	21			ing temperatures	P 0 0
diagrheal events	T.,	Ľ.					ding temperatures	POO
Good Hygienic Practices 6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0		(23)			rking and disposition c health control: procedur	P(PP)
7 No discharge from eyes, nose, and mouth	C 170	_	_	24 🔾	000	and records	c nealth control, procedul	P/Pf/C O
Preventing Contamination by Hands				man-		The state of the s	umer Advisory	
8 Me hard seat and properly washed	P/Pf	0	0	25	00		y provided: raw/undercooked for	ood Pf O O
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 🔾	00		ceptible Population used; prohibited foods not offe	red DIC O
Adequate handwashing sinks, properly supplied/accessible	/Pf/C	0	0	20	7		ves and Toxic Substance	
Approved Source		No.		27	PO		approved and properly u	
11 O Jood obtained from approved source	P/Pf/C	_	-	28	00	A STATE OF THE PARTY OF THE PAR	es properly identified,	P/Pf/C O O
12 Food received at proper temperature Food in good condition, safe, and unadulterated	P/Pf P/Pf	_				stored & used	th Approved Procedure	
Required records available: molluscan shellfish	P/Pf/C	_		29			h variance/specialized	
identification, parasite destruction			0		00	process/ROP c	riteria/HACCP Plan	P/Pf/C O O
Good Retail Practices are preventative measures to	OD RE	TAIL	- PR	ACTICE	S short	ningle and abusine	Labia de lata fa ada	
				for COS a			on-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	V	cos	-	OUT			e of Utensils	V COS R
30 Pasteurized eggs used where required	Р	-	0			sils: properly stor		c 0 0
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C Pf		00	44 0	Utensils/equ	ipment/linens: prop	perly stored, dried, & handle es: properly stored & used	
Food Temperature Control				46 0	Gloves use	d properly	es, properly stored & used	P/C O O
Proper cooling methods used; adequate equipment for	Df/C	0					and Equipment	9,00
temperature control				14/ ()			urfaces cleanable,	P/Pf/C O O
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf	00				signed, construct	ed, and used lled, maintained and used	
36 Thermometers provided and accurate		0					and test strips available	J, Pf/C O O
Food Identification				49 0	Non-food co	ontact surfaces c	ean	7000
Food properly labeled; original container Prevention of Food Contamination	PfC	10	0				ical Facilities	
39 Alinsects, rodents, and animals not present	PAC	0				d water available stalled; proper ba	; adequate pressure	Pf 0 0
39 Contamination prevented during food preparation, storage & display	P/Pf/C	_	_			d waste water pro		P/Pf/C O O
40 Personal cleanliness		0					structed, supplied, & clear	n Pf/C O O
41 Wiping cloths: properly used and stored	С	0		54 🔘	Garbage and	d refuse properly di	sposed; facilities maintaine	d C O O
42 Washing fruits and vegetables	P/Pf/C						naintained, and clean	P/Pf/C O O
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable		36 0	Adequate v Natural rubl	entilation and ligr per latex gloves r	nting; designated areas us not used per CGS §19a-36	sed C O O
1/ 7	,		,		ns docume		Date corrections de	
Person in Charge (Signature) Date	1-	24	_		tem Violatio			0
Person in Charge (Printed) Will A. Welky	x a			Core Ite	m Violation		7-11-24	52
Inspector (Signature) Date 7/1	12.	4				Health Intervention	n Violations ervention Violations	3
Inspector (Printed) Jose Ramicez	1	3				es Violations	c if you intend to reinspe	4
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to	corre	ect any ir	nspection v	iolation identifie	d by the food inspector of	or to hold destroy
or dispose of unsafe food, may appeal such order to the	Directo	or of	Heal	lth, not la	ter than fo	rty-eight hours a	fter issuance of such or	der.

Food Establishment Inspection Report Inspection Report Continuation Sheet LHD Mancheste Establishment Filomena'S Town Manchester TEMPERATURE OBSERVATIONS Item/Location/Process Item/Location/Process Temp Item/Location/Process 13F WIF ambient Hand sick by wasewash Hand SINK by Pizzastotton 100 F 38F 40 F Customer BR Chicken wina 38F marinaca **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 Item Number hand sink by warewash Note all 'c' violations above must be corrected by 7-11-24. much improved. Continue

Date

thermometer available

Person in Charge (Signature)

Inspector (Signature)

Risk Category: 3 Food Estable	lishn	nent l	nspec	tion Ren	ort	Page 1 o	f >>	$\overline{}$
Establishment type: Permanent Temporary Mobile Other				Date: 7	18/24	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -		
Establishment Frontera Quil		4sering con	meeticus Health	Time In_	A	M/PM Time Out		AM/PM
Address 170 Slater St		DP	H	LHD /	lanch	ester		
Town/City Manchester	1			Purpose	of Inspection:	Ro@ne Pre	e-op	
Permit Holder		onnecticut D of Public	Health	Reinspec		Other		
FOODBORNE ILLNESS RISK FA								
Risk factors are important practices or procedures identified as the most prevalent cont		actors of fo	odborne illnes	s or injury. Interv	ventions are control	measures to prevent foodborne illne	ss or injury.	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered in	tem	IN=i	n complianc	e OUT=no	t in compliance	N/A=not applicable N/0	=not obs	served
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appropr	iate box for	COS and/or R	COS=correct	ed on-site during inspection	R=repeat	violation
IN ØUT N/A N/O Supervision	٧	COS R	IN	OUT N/A N/O	Protection	on from Contamination	4	COS R
Person/Alternate Person in charge present,	Pf	00	15 🔾	000	Food separated	and protected	P/C	00
demonstrates knowledge and performs duties	FI	00	16 🔾	00	Food-contact su	rfaces: cleaned & sanitized	P/Pi/C	00
2 Certified Food Protection Manager for Classes 2,	С	00	17 0	0	Proper disposition	on of returned, previously	Р	
3, & 4					served, recondit	ioned, and unsafe food		00
Employee Health					Time/Temperat	ure Control for Safety		
Management, food employee and conditional employee;	P/Pf	00	18 🔾	000	Proper cooking	time and temperatures	P/Pf/C	00
knowledge, responsibilities and reporting						procedures for hot holding		00
4 O Proper use of restriction and exclusion	P	00				me and temperatures		00
5 Written procedures for responding to vomiting and	Pf	00	21 0	000	Proper hot holdi	ng temperatures		00
diarrneal events			22			ling temperatures	(P)	00
Good Hygienic Practices	6)	23 🔾			king and disposition	P/Pf	00
6 Proper eating, tasting, drinking, or tobacco products us	e F/C	100	240	000	Time as a public	health control: procedures	P/Pf/C	00
7 O No discharge from eyes, nose, and mouth		00			and records		17110	
Preventing Contamination by Hands						mer Advisory	a du a de	HILL
8 O Hands clean and properly washed	P/Pf	00	25 0	00	Consumer advisory	provided: raw/undercooked food	Pf	00
9 No bare hand contact with RTE food or a	P/Pf/C	00				ceptible Population		
pre-approved alternative procedure properly followed	10 - 10 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		26 🔾	00	Pasteurized foods t	ised; prohibited foods not offered	P/C	00
10 O Adequate handwashing sinks, properly supplied/accessible	Pf/C	00	-			es and Toxic Substances		
Approved Source			27 🔾	00	Food additives:	approved and properly used	P	00
11 O Food obtained from approved source	P/Pf/C	00	28	00	Toxic substance	s properly identified,	P/Pf/C	
12 C Food received at proper temperature	P/Pf		200		stored & used		P/PI/C	00
13 C Food in good condition, safe, and unadulterated	P/Pf	00				th Approved Procedures		ATM REP
14 O Required records available: molluscan shellfish	P/Pf/C	00	29			variance/specialized	P/Pf/C	00
identification, parasite destruction				Market Comment	process/ROP cr	iteria/HACCP Plan	171110	
			RACTICE					
Good Retail Practices are preventative measures t								
	in appro	priate bo	x for COS a	nd/or R	COS=corrected of	n-site during inspection	R=repeat	violation
OUT N/A N/O Safe Food and Water	٧	COS R	OUT			e of Utensils	A	COS R
30 Pasteurized eggs used where required	P	00			ls: properly store		(c)	00
31 O Water and ice from approved source	P/Pf/C	00	44 0	Utensils/equip	ment/linens: prop	erly stored, dried, & handled	Pf/C	00
32 O Variance obtained for specialized processing methods	Pf	00				s: properly stored & used		00
Food Temperature Control			46 0	Gloves used	· · · · · · · · · · · · · · · · · · ·		C	00
Proper cooling methods used; adequate equipment for	Pf/C					and Equipment		
temperature control		52350 19535	47			urfaces cleanable,	P(PHO)	00
34 O Plant food properly cooked for hot holding	Pf				gned, constructe		100	
35 O Approved thawing methods used	Pf/C					led, maintained and used;	Pf/C	00
36 C Thermometers provided and accurate	Pf/C	00				nd test strips available		
Food Identification		1		Non-food cor	ntact surfaces cl		(c)	00
37 Food properly labeled; original container	P(C	00				cal Facilities		345
Prevention of Food Contamination	0					adequate pressure		00
38 Insects, rodents, and animals not present		00			talled; proper ba		P/Pf/C	00
39 Contamination prevented during food preparation, storage & display	PHATC		52 🔘	Sewage and	waste water pro	perly disposed	P/Pf/C	00
40 Personal cleanliness	Pfic					tructed, supplied, & clean		00
41 Wiping cloths: properly used and stored	C	00				sposed; facilities maintained		00
42 Washing fruits and vegetables	P/Pf/C	00				aintained, and clean		00
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ailable				ting; designated areas used		00
						ot used per CGS §19a-36f		
Sun as some 11	Q-/	/11		ns documen		Date corrections due		#
Person in Charge (Signature)	0/	<u>-7</u>		tem Violation		mmediatly-SVCa		
Porcon in Charge (Brinted)	1	/			em Violations	10 days 07/18		3
Person in Charge (Printed)	-	W.		m Violations		godaus'	1	
Inspector (Signature) TA In In In Inches	3/2	1	Risk Fa	ctor/Public He	ealth Interventio	n Violations	3	3
Inspector (Signature) Lenuse tayne Date 7/8	127	ř.				ervention Violations		
Inspector (Printed) Denise Pay re.	(**, **)			etail Practice		W	7	
Appeals The owner or energies of a feed and blick and a significant	L: 1] [Kequire	s Keinspect	ion - check box	if you intend to reinspect		
Appeal: The owner or operator of a food establishment aggrieved by to	Direct	or of Ha	rrect any in	nspection vic	plation identified	by the food inspector or to	hold, d	estroy,

Foo	d Esta	blishment	Inspec	tion F	Report	Pageo	of
LHD Manchester		Inspection Report Cor			Date	7/8/2	4
Establishment + rollera	anil	Town <u>l</u>	Mane	hester	<u>.</u>		
	0	TEMPERATUR	E OBSERVA	TIONS			
Item/Location/Process	Temp	Item/Location/P	Process	Temp	Item/Location/I	Process	Temp
Cheese 40/41F		Rice		156F	HOTWate	5	1165
Tomato	40F	Chicks		165F			
Pico	38F	tacompat		1605	Dish Mach	ere 210	00F
Chicles	39F	Pork.		1567	1		1
Pico	3915	Chicken-co	ooked	136F	Sani bH em	pty-C	ranged
Indiv. Salsa	40F	Beel-co		1375	alte 1	100HV	
		Ruch alto:	shan	142F	- 0		
		*Discu	issed to	Wiema	P		
		SERVATIONS AND	and the second second second				
Item Violations cited in this	report must be	e corrected within the tim	ne frames below,	or as stated	in sections 8-405.11 & 8	3-406.11 of the f	ood code.
Number				82			
Loc Employer 1	001450	موم الأنكاء	.+1:-1	< /V:1		1 6000 10	0000
le C Employee la		JE WITHO	ul lid	- 10 II	Crien wear	Tprep	ر عالمان
37c Bottles on	COOK	line not la	abelled	1/01d	labels no	+ remo	red
47c Torn gas	v ote	aenonalle	4	1			
49 caskets	4C 14	Dits, Rea	Chins	, WIC	undia	2	
15C Nesting Cil	1 atm	in itala	100-10-	Huco	traus-		
					/ /		,
43C Knives w	rdean	on wall	STORQO	x us	it/measu	ecup	uncle
49cKnife hol	deron	wall und	lian	g	/ 1	V	
39c rebuild	un an	2donr	lieens	er doe	ersandsh	elves	
43C Pan, no no	indle	unclean i	200	laire	s of black	C bee	~s
47c Cardboard	asra	acklines	s in w	L'C, no	tappored	+wx	lean
55PF WIC Ven	ts w	sclean w/	deest	/	40		
47CFoil coveric		stagrac		odad	lis perser		
47PF Interior	ice m	pachine 1	nclea		(1):		
38PF amats at	-dese	tcooler	Hards	ink	and drys	toras	e,
227 Walking	soles a	at 50-55°	F	2		(J.C.)	7000 P
		7/7/24@		2=	agen	200 d (2PI
Rice	242F	- Z			naina 4: 5	Le ten	1, 1
Disc. Beel	cooke	a 7/7/24	52F	/	wild a	Temp	
Sauce	42	F		/ Or	05 J	Date: Fecha Emp: Empleado PASE	
Beelin	Shole	42F		, 4	211/1 / 01	BAR TURNS ORANGE	
		to another	usit.	Servi	ce call m	160°F/71°C	
Therm	_ D	1	VETONA-	11000	AM/ Noon/	6pm Wr	ntten
DISC. POR SE	ST . B	Man Man Man	10 iens	s cogs	/ /	M18	124
Person in Charge (Signature)	1 7 H	MI THURS	//		Dat	ie // p	, _ /
Inspector (Signature)	tain	V.			Dat	$z = \sqrt{2}$	يان

Denise Payne

From:

Leonardo Quintero <leauqui@icloud.com>

Sent:

Tuesday, July 9, 2024 2:44 PM

To:

Denise Payne

Subject:

Fallow up frontera grill Manchester

[You don't often get email from leauqui@icloud.com. Learn why this is important at https://aka.ms/LearnAboutSenderIdentification]

EXTERNAL MESSAGE - Don't just click it, put in a ticket!

Hi Denise!! This is Leo just want to lett you know the fridge was fix last night



Ris	Risk Category: 3 Food Establishment Inspection Report Page 1 of															
Est	abl	shm	ent	type	e: Permanent Temporary Mobile Other						Date:	7/31	/a4	e F		
Establishment Georgies Litches						Conne	cticut Healing		Time In		/ AM/PI	M Time Out		AM/PM		
Address 642 filliard						P	H)		LHD /	Janch	este					
Τοι	vn/	City	V	M	anchesto	J					Purpos	e of Inspect	ion:	Routine P	re-op	
Per	mit	Hol	der	5	V	-	of Pu	ıblic H	7000000		Reinsp	2000-00-00-0	2.5	her		
			-	- 4-	FOODBORNE ILLNESS RISK FA					_						
		W.V. Carrier			important practices or procedures identified as the most prevalent contr	4										
	221 31	WO 740	-	-	compliance status (IN, OUT, N/A, N/O) for each numbered it				complia		The state of the s	not in compliar			N/O=not ob	
P		rity it			Priority foundation item C=Core item V=violation type		T					T		n-site during inspection	R=repea	t violation
	IN	OUT	N/A		Supervision Person/Alternate Person in charge present,	V	cos	R			JT N/A N/			om Contamination		COS R
1	0	0	0		demonstrates knowledge and performs duties	Pf	0	0	16	_		Food separ		protected es: cleaned & sanitize	P/O	000
				SATISFACE OF	Certified Food Protection Manager for Classes 2,	-					1200000	100		f returned, previously		
2	0	0	0		3, & 4	С	0	0	17			See 2		d, and unsafe food	F	00
					Employee Health									Control for Safety		
3	0	0			Management, food employee and conditional employee;	P/Pf	0		18 (and temperatures	P/Pf/C	
	0	_			knowledge, responsibilities and reporting				19 (ocedures for hot holding		
4	$\overline{}$	$\overline{}$			Proper use of restriction and exclusion Written procedures for responding to vomiting and	Р	0	0				Proper coo		and temperatures	F	00
5	0	0	100		diarrheal events	Pf	0	0						temperatures		100
		THE.	The same	and the same of	Good Hygienic Practices	_			23 C					and disposition	PPT	1
6	0	0		0	Proper eating, tasting, drinking, or tobacco products use	e P/C	0	0				Time oc o		alth control: procedure	e	
7	0	0		0	No discharge from eyes, nose, and mouth	С	0	0	24 🤇			and records			P/Pf/C	00
					Preventing Contamination by Hands	0						C	onsumer	Advisory		
8	0	0		_	Hands clean and properly washed	P/P	0	0	25 🤇) <				rided: raw/undercooked foo	d Pf	00
9	0	0	0	()	No bare hand contact with RTE food or a	P/Pf/C	0							ible Population		
	10000	810.08			pre-approved alternative procedure properly followed	DANKERS OF STREET			26 C		0000			prohibited foods not offere		00
10	0	0		1	Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	07	- T	1			and Toxic Substance		1-1-
11	0	0			Approved Source Food obtained from approved source	P/Pf/C			27 C					roved and properly use		00
_	0			_	Food received at proper temperature		00	_	28 🤇			stored & us		operly identified,	P/Pf/C	00
_	0	ŏ		_	Food in good condition, safe, and unadulterated		0	_		_	1 100			pproved Procedures		
14	0	0			Required records available: molluscan shellfish	P/Pf/C		0	29 <		100			iance/specialized		
1-4	_	_		l	dentification, parasite destruction	1 -22			1 1 2 2 2 2		100	process/RC	P criteria	a/HACCP Plan	P/Pt/C	
						DD RE										
	Mari	. 011	r :c _		Good Retail Practices are preventative measures to							V 5000000000000000000000000000000000000				
		N/A I		umbe		appro v			-	_	l/or R			e during inspection		t violation
30		NA		Paste	Safe Food and Water urized eggs used where required	P	cos		00		use uter	nsils: properly	r Use of	Utensils	C	COS R
31					r and ice from approved source	P/Pf/C	_							stored, dried, & handled	(Pfi)c	
	0	0			nce obtained for specialized processing methods	Pf	_	0						operly stored & used	P/C	
					Food Temperature Control							ed properly				00
33					er cooling methods used; adequate equipment for	Pf/C						Uter		I Equipment		
	872		_	210000000000000000000000000000000000000	erature control		0.000	0	47 0	21				ces cleanable,	P/Pf/C	00
					food properly cooked for hot holding	Pf	0					signed, cons				
35					oved thawing methods used nometers provided and accurate		0		48 <)				maintained and used;	Pf/C	00
30	<u> </u>			nem	Food Identification	Pf/C	0	0	10 0	-				est strips available		
37	0	Food	d pro	perly	/ labeled; original container	Pf/C	0		49	ואון כ	JII-1000 C	ontact surfac		Facilities	С	100
-	_			,,,,,,	Prevention of Food Contamination				50 <	OH	ot and co	ld water avail	able: ade	equate pressure	Pf	00
38		Inse	cts,	roder	nts, and animals not present	PIC	9	0				nstalled; prop				00
39	0	Cont	amir	ation	prevented during food preparation, storage & display	P/Pf/C						nd waste water				00
					inliness	Pf/C	0	0						ted, supplied, & clean	Pf/C	
	_				properly used and stored	С	0							ed; facilities maintained	С	00
42	0	Was	hing	fruit	s and vegetables	P/Pf/C	0	0	55 ⊂	O PI	ysical fa	cilities installe	ed, mainta	ained, and clean	P/Pf/C	00
P	ermi	t Hole	der s	hall n	otify customers that a copy of the most recent inspection repo	ort is ava	ailable	.	56	> Ac	dequate v	entilation and	d lighting;	designated areas use sed per CGS §19a-36f	ed C	00
1			===		DNG 107	011	0/	1			docum			Date corrections du		#
Per	son	in C	har	ge (S	Signature) TOUY O Date //	011	de	1			m Violati		-	ned. Fraining		
		(22)		265	Palica Pana	- 1	-)		Priorit	ty Fo	undation	Item Violatio	ns Li	edous	0 1	
Per	sor	in C	har	ge (F	Printed) TIIIOVI POUY O	_,_					Violation		9	odais		
Inspector (Signature) Risk Factor/Public Health Intervention Violations 4																
Inspector (Signature) Outse Outse Date 7/3/129 Repeat Risk Factor/Public Health Intervention Violations Good Retail Practices Violations																
Ins	pec	tor (I	rin	ted)	Denise Pound									ou intend to reinspec	t A	1
					r or operator of a food establishment aggrieved by the	nis orde	er to	corr	ect any	v ins	pection	violation ider	ntified by	the food inspector or	topold	destroy
•	- contain			or dis	spose of unsafe food, may appeal such order to the	Direct	or of	Hea	Ith, not	t late	er than fo	orty-eight hou	urs after i	issuance of such ord	er.	Loon by,

FOO	a Esta	blishment inspec	tion Re	eport	Pageo	+
LHD Manchester	7	Inspection Report Continuation Shee	t	Da	ate 7/3//	24
Establishment <u>Georgies</u>	Kitch	2r Town March	este		/ f	
9		TEMPERATURE OBSERVA	ATIONS			
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location	on/Process	Temp
Butter	415			toodscol	1 bounde	87F
		"trender"			,	
Sourcean	41F	7-50	T.			
0.1		Mr Service this	Jack			
KIBS	35F	100 82 1132 1132	1			
			<u> </u>			
	OB	SERVATIONS AND CORRECT	IVE ACTION	S		
Violations cited in this		e corrected within the time frames below			& 8-406.11 of the fe	ood code.
Number CFPM an s	î.l.o				4-20	,
		0.01	•	8	TIOT WAS	t Switch
Kitches ho	twate	@ 94F - must	beami	o. NOF	- Win	James
		loor open to Kit			2260	200
- 11		ı	ares, c	201010	racor o	1201
witho	ut sc	reens				
8P No hande	ashin	after Returning	to cood	< hust	one le	King
		7 0700	10 000	- 39 311	10 - 16	
outd	00(5) 0	, ,		0	27-40
! Unclear -	owel/i	wet under pasta	2 draw	age,		
11110-111	1	ged Utensil-spoot			A- 1	
	,	1	/			
W Prepped U	victer 1	at 85 from this	monis	g-dus	carded	
20P Cooked Rib	s not co	oded properly-d	iscarda	d1		
	,	2 T A A A A A A A A A A A A A A A A A A	0 -		2-1-2-	0.4.
— CHAI	/owner	- to retrain All S	tat 10	u bober	-tood so	ejery
andi	on ced	wes. Owner to d	locume	ant train	11042 Se	end to
		in Reach in Gode		_	0 1	HDptin la
				\cap		
20P Cooked MA	co Ch	eese @ 84F -d	iscarde	٧		
,						
1 -	- 17	100 1 2 - 11	tons to the second		1	
		livenes - Rost deli			use box	es
previ	ously	for other items the	an food	٦.,		
		ible Wasking				
	40					
Keviewed	Date	Marking Regu	venent	S		
Temp nico	adition	n Rental on site -	Discu	sed ba	1 Maranta	ypp oval
					gra sage	John State
		mant cooling to l	se plan	ned.		
		IA/IB onsite	#*************************************			
		- Menu ingred x	needst	becom	pleter	
Person in Charge (Signature)	APOH	rd o			Date 7316	24
	e //	pest Payne			7/1	\/\
Inspector (Signature)	1 mon VC	in inter	-		Date //3//	24
~	,	()			1 1	

Risk Category: 7 Food Establ	ishn	ner	nt Ir	nsp	ecti	ion Re	port	Page 1 c	f_2_		
Establishment type: Permanent Temporary Mobile Other						Date:	7/31/24				
Establishment HUNGYY VION	terning connecticus Health					Time In A AM/PM) Time Out 4:30 AM/PM					
Address ITINERANT	DPH)					LHD MANCHESTEV					
Town/City Manchester	j					Purpos	e of Inspection	Routine Pre	e-op		
Permit Holder	Co		ublic H	partmer ealth	nt	Reinspe	ection	Other			
FOODBORNE ILLNESS RISK FA	ACTO	RS	ANI	D PL	JBL	C HEA	LTH INTERVI	ENTIONS			
Risk factors are important practices or procedures identified as the most prevalent contra	ributing fa	ctors	of food	dborne .	illness	or injury. Int	erventions are contro	I measures to prevent foodborne illne	ss or injury.		
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				compl			not in compliance	N/A=not applicable N/0	O=not observed		
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	app	ropria	te box	k for C	OS and/or	R COS=correc	ted on-site during inspection	R=repeat violation		
IN OUT N/A N/O Supervision	V	cos	R		IN O	UT N/A N/	o Protecti	on from Contamination	V COS R		
1 Person/Alternate Person in charge present,	- Dr				8		Food separated	and protected	P/C 0 0		
demonstrates knowledge and performs duties	Pf	0		16	9	00	Food-contact s	urfaces: cleaned & sanitized	P/Pf/C O O		
2 Certified Food Protection Manager for Classes 2,	С	0	0	17		5	Proper disposit	ion of returned, previously	500		
3, & 4	C			17			served, recond	tioned, and unsafe food	POO		
Employee Health							Time/Tempera	ture Control for Safety			
Management, food employee and conditional employee;	P/Pf	0	0	18		000	Proper cooking	time and temperatures	P/Pf/C O		
knowledge, responsibilities and reporting				19			Proper reheating	g procedures for hot holding	POO		
Proper use of restriction and exclusion	P	0	0		0/2) @(c	Proper cooling	time and temperatures	POO		
5 Written procedures for responding to vomiting and	Pf	0						ing temperatures	POO		
diarrneal events				_				ding temperatures	POO		
Good Hygienic Practices 6 O Proper eating, tasting, drinking, or tobacco products use	1	т ==	-	23	0	000		rking and disposition	P/Pf O O		
		-	9	24	0	<u>ා</u> ල් c)	c health control: procedures	P/Pf/C		
7 O Mo discharge from eyes, nose, and mouth Preventing Contamination by Hands	С	10	0	G01 10			and records				
8	P/Pf	10	0	25				umer Advisory y provided: raw/undercooked food	7 7 6 6		
No hare hand contact with DTE food or a				20				ceptible Population	Pf O O		
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26	OTO	50		used; prohibited foods not offered	P/C 00		
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	20		The second		ves and Toxic Substances	11/01010		
Approved Source				27	OTO			approved and properly used	POO		
11 Pood obtained from approved source	P/Pf/C	10	0					es properly identified,			
12 O O Food received at proper temperature	P/Pf		-	28	9		stored & used	os propony identinou,	P/Pf/C O O		
13 Food in good condition, safe, and unadulterated	P/Pf	0	0					ith Approved Procedures			
14 O Required records available: molluscan shellfish	P/Pf/C	0	0	29	0		Compliance wit	h variance/specialized	DIDEIC O		
Identification, parasite destruction						100	process/ROP c	riteria/HACCP Plan	P/Pf/C O O		
	DD RE										
Good Retail Practices are preventative measures to											
Company and the control of the contr	n appro			_		d/or R			R=repeat violation		
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	٧	cos			UT			se of Utensils	V COS R		
31 Water and ice from approved source	P P/Pf/C	00		43		-use uten	sils: properly stor	ed	C 0 0		
32 O Variance obtained for specialized processing methods	Pf	0	_					perly stored, dried, & handled es: properly stored & used	Pf/C O O		
Food Temperature Control	<u> </u>	10					d properly	es. properly stored & used			
Dropper popling mostly do used adaptate to 15	T -	T	T	40		ioves use	I Itancile	and Equipment	c O O		
temperature control	Pf/C	0	0	T	_ [F	ood and n	on-food contact s	surfaces cleanable,			
34 O Plant food properly cooked for hot holding	Pf	0	0	47			signed, construct		P/Pf/C		
35 O O Approved thawing methods used	Pf/C			10				illed, maintained and used:	'		
36 C Thermometers provided and accurate	Pf/C	0	0	48				and test strips available	Pf/C O O		
Food Identification				49			ontact surfaces c		(000		
37 Food properly labeled; original container	Pf/C	0	0	0	/			ical Facilities			
Prevention of Food Contamination				50	\bigcirc H	ot and col	d water available	; adequate pressure	Pf O O		
38 Insects, rodents, and animals not present	Pf/C						stalled; proper b		P/Pf/C O O		
39 Contamination prevented during food preparation, storage & display	P/Pf/C						d waste water pro		P/Pf/C O		
40 Personal cleanliness	Pf/C			53	OIT	oilet facilit	ies: properly cons	structed, supplied, & clean	Pf/C O		
41 Wiping cloths: properly used and stored 42 Washing fruits and vegetables	C	10	9	54 0	\bigcirc G	arbage and	refuse properly d	isposed; facilities maintained	C 0 0		
	P/Pf/C	-	15	55 0		hysical fac	cilities installed, n	naintained, and clean	P/Pf/C O O		
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailabl	e.					nting; designated areas used	c 0 0		
11 1/1 1	1					s docume		not used per CGS §19a-36f			
Person in Charge (Signature) Killy Date 7/3	1124					em Violatio		Date corrections due	#		
W 1 W 110	11						Item Violations				
Person in Charge (Printed) Kyle Killay						Violation		10/31/24			
MIMMIN 121	17/	7		Risk	Fact	or/Public	Health Intervention	on Violations	1		
Inspector (Signature) Date 13	109							tervention Violations			
Inspector (Printed) Good Retail Practices Violations Requires Reinspection - check box if you intend to reinspect											
Appeal: The owner or operator of a food establishment aggrieved by the	nic and	25 4-	00-	red	uires	Reinspe	cuon - check bo	x ii you intend to reinspect	1 11 1		
or dispose of unsafe food, may appeal such order to the	Directo	or of	Hea	lth no	ot lat	er than for	rty-eight hours	u by the tood inspector or to	o noid, destroy,		
appear order to the		J. UI	, ica	1 15	Ji ial	or urall IU	Ly CIGITL HOUIS C	artor issuante di such diner			

Foo	od Esta	ablishment Ins	pection	Report	Page	_of
LHD MANCHUS TEV	F:	Inspection Report Continuatio			Date_7/3//	29
Establishment_HMQYV	LION	Town_MA	nchestu			
V		TEMPERATURE OBS	SERVATIONS			
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/L	ocation/Process	Temp
				minter	nitizer	
cold		-		your so		zooppn
Yraw stak	40F			1	sbrow	1 /
					1	
cut temato	40F					
LULTURIALO	70.	+				
4						
brown rice	IOSF					
	0.5	DEEDWATIONS AND COD	DECTIVE ACT	10110		
Violations sited in th		BSERVATIONS AND COR			05 44 0 0 400 44 -6	
Item Violations cited in th	is report must b	be corrected within the time frame	s below, or as state	a in sections 8-4	05.11 & 8-406.11 of	ine rood code.
Number						
b t. 1.1		1 m				
notexticomit I diavi	rnea a	vailable				
notex vomit / diar	12151 41	201-01 2010 00 00	Wilal			
nota memora		conor wipes av	arable			
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Daman in Ohan (C)	1/ 1	1-11			- 7/3	1/24
Person in Charge (Signature)	Kill ,	Mily			Date //	10
Inspector (Signature) Z	and	W'			Date 1/3/	124

Risk Category: 3 Food Estab	lishn	nen	t Ir	nspec	tion	ı Re	port	Pa	ge 1 of	?	
Establishment type: Permanent Temporary Mobile Other		T	te: 7	131124		_					
Establishment HUSKU 1917 ZA				ectican Healif		ne In	13 /	M/PM Time Out	17:30	AN	(PI)
Address Ale West Center Street			P	H	LH	ID	Manch	18ter			
Town/City Manchester					Pu	rpose	of Inspection:	Routine	Pre-op		
Permit Holder Hasan		of P	ublic H			inspe		Other			
FOODBORNE ILLNESS RISK F											
Risk factors are important practices or procedures identified as the most prevalent cont Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if		-	W. C.	complianc		F SHOW THE	ot in compliance	N/A=not applicable	N/O=no	100	rod.
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Marine Committee of the							ted on-site during inspec		peat vic	17 71 11 11
IN OUT N/A N/O Supervision	V	cos	-			N/A N/C		on from Contamination			S R
Person/Alternate Person in charge present		1					Food separated	A A SO NOT THE REAL PROPERTY AND A SOUTH AND A SOUTH ASSESSMENT OF THE SOUTH OF THE SOUTH ASSESSMENT OF THE SOUTH ASSESSMENT OF THE SOUTH ASSESSMENT OF THE SOUTH OF THE SOUTH ASSESSMENT OF THE SOUTH OF THE)c C	
demonstrates knowledge and performs duties	Pf	0	\circ					urfaces: cleaned & sar		of/C C	
2 Certified Food Protection Manager for Classes 2,	С				5			ion of returned, previou		7	
3, & 4		0	0	17	0		served, recondi	tioned, and unsafe foo	id	PC	۲
Employee Health		the second			,			ture Control for Safet			
Management, food employee and conditional employee;	P/Pt	10		18 🐼	0	00	Proper cooking	time and temperatures	s P/	of/C	
knowledge, responsibilities and reporting Proper use of restriction and exclusion			25-2	19 🐼	0	00	Proper reheatin	g procedures for hot h	olding		0
	P	0	\circ					time and temperatures			0
Written procedures for responding to vomiting and diarrheal events	Pf	0		21 🗭				ing temperatures			0
Good Hygienic Practices								ding temperatures	T B		0
6 O Proper eating, tasting, drinking, or tobacco products us	e P/C	10			A			rking and disposition c health control: proce		Pf' C	70
7 O No discharge from eyes, nose, and mouth	C	0	_	24	0	00	and records	c nealth control, proce	D/F	of/C	0
Preventing Contamination by Hands					/		The state of the s	umer Advisory		-	+
8 O O Hands clean and properly washed	P/Pf	10	0	25				y provided: raw/undercooke	ed food	Pf C	00
No hare hand contact with RTE food or a		- Course			/			ceptible Population	Ju 1000	11 0	10
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26	0			used; prohibited foods not	offered	P/C	10
10 O Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0		/	Fo		ves and Toxic Substa		,,,,	10
Approved Source				27	0			approved and properly		PC	00
11 O O Feed obtained from approved source	P/Pf/C	0	0	280	×		Toxic substance	es properly identified,	Total Control		
12 C Food received at proper temperature	P/Pf	0	0	28	9		stored & used			Pf/C	10
Food in good condition, safe, and unadulterated	P/Pf	0	0					ith Approved Procedu			da.
Required records available: molluscan shellfish	P/Pf/C	0	0	29	0			h variance/specialized	P/I	of/C	
identification, parasite destruction	OD DE	TAII	DD	RACTICE			process/ROP ci	riteria/HACCP Plan		.,,,	
Good Retail Practices are preventative measures to	o contro	l the	additi	ion of noth	200000	chom	icals and physics	l abianta inte fonda		-	
				for COS a							1-4'
OUT N/A N/O Safe Food and Water	V	cos		OUT	110/01			on-site during inspection se of Utensils	K-IE	v co	
30 Pasteurized eggs used where required	P	0			In-use	utens	sils: properly stor			-	
31 Water and ice from approved source	P/Pf/C							perly stored, dried, & han	dled E	of/C	
32 O Variance obtained for specialized processing methods	Pf	-	0					es: properly stored & use		7C C	
Food Temperature Control							d properly			C	
Proper cooling methods used; adequate equipment for	Pf/C							and Equipment			
temperature control	FI/C		0	67 X	Food	and no		surfaces cleanable,	5/5		
34 O Plant food properly cooked for hot holding	Pf	0					signed, construct				0
35 O Approved thawing methods used	Pf/C	0	0	48 0	Ware	washir	ng facilities: insta	lled, maintained and u	sed;	ic C	0
36 Thermometers provided and accurate	Pf/C	0	0					and test strips available		_	
Food Identification Food properly labeled; original container	1			49 90	Non-f	ood co	ntact surfaces cl		(c) C	0
Provention of Food Contained	Pf/C	0	0	500			Phys	ical Facilities	News Transfer		
Prevention of Food Contamination S8 D Insects, rodents, and animals not present	(20)	0		50 0	Hot a	nd cold	water available	; adequate pressure			0
Contamination prevented during food preparation, storage & display	P/Pf/C	18	\approx				stalled; proper ba		P		0
40 Personal cleanliness		0					waste water pro	structed, supplied, & cl	P/F		0
Wiping cloths: properly used and stored	10)	0		54	Garba	ne and	refuse properly di	structed, supplied, & ci sposed; facilities mainta	inod P		
42 Washing fruits and vegetables	P/Pf/C	Ō	0	755 XX	Physi	cal fac	ilities installed m	naintained, and clean	P/P		00
Pormit Holder shall notify evaluate that a second of the s	16			56	Adea	uate ve	entilation and ligh	nting; designated areas	used		0
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable		0	Natur	al rubb	er latex gloves n	not used per CGS §19a	1-36f	0 10	
	1011	111	4	Violatio	ons do	cume	nted	Date corrections		#	
Person in Charge (Signature) Date	11/	64	1	Priority I				8/3/24		4	
Person in Charge (Printed)	057						tem Violations	8 9 124		11	
Person in Charge (Printed)	. 1		\dashv	Core Ite				10/31/24		1,2	
Inspector (Signature) 2. 27May Date 7/3	1/14			Reneat	Riek I	uplic F	lealth Interventio	n Violations" ervention Violations		6	
i Allina a Cina da I	10	-	-				es Violations	STORIGHT VIOLATIONS		21	
Inspector (Printed) LWVVI & W				Require	s Re	inspec	tion - check box	x if you intend to reins	spect	4	_
Appeal: The owner or operator of a food establishment aggrieved by the	his ord	er to	corre	ect any ir	nspec	ction v	iolation identified	d by the food inspecto	or or to hol	d deet	rov
or dispose of unsafe food, may appeal such order to the	Directo	or of	Heal	lth, not la	ater th	nan for	ty-eight hours a	fter issuance of such	order.	_, 4031	o y ,

reinspection: August 5, 2024

Food Establishment Inspection Report LHD M Inspection Report Continuation Sheet Date anchester Establishment Town TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Process Temp Item/Location/Process Temp urathalls hat 135F walkincooler AIF 2ZNF intrnat Chix Idlina AUF BOY Marie ham 39F chickenwing 395 provolone incise 39F ÁΛF 001120 Pag 39F HUMUHO Slicon **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 bucket next to stove top I hands ink Stored under gril walk in cooler rusted - discussed timeline on preptable

Date

Person in Charge (Signature)

Inspector (Signature)

		ou esta	blishment inspe		Report		_or
LHD MA	nch es fer		Inspection Report Continuation She		Date 7/31/7024		
Establish	ment HUSKY D	177a	Town Manch	ester	<u></u>		
ar areas			TEMPERATURE OBSERV	/ATIONS			
	/Location/Process	Temp	Item/Location/Process	Temp		ocation/Process	Temp
cake	215play	385			sanitize	r bycket	50 100
					(1) [0]	The	ppm
		+					
		0.00	OFFICATIONS AND CORPE	TIME	IONIO		
14	Violations cited in the		SERVATIONS AND CORRECT CORRECT CONTROL OF CONTRO			5.11 & 8-406.11 of th	e food code.
Item Number		5		3			
51c	mop sink for	11111 +12	akına				
15 p	1 2 2			+ 10 × 0 + 6	cted 110	h alaha ar	2.1
		9 9	nent, opened, no				17
39°C	305.00 (30) 20 7 0		of ranch stored on	FIOUR	in baser	rient	
490	Celling to		chan in basemei	\Box			
49C	cabinets at	tronte	erving area not	Clan			
55C	leakinga	ircond	itioning dives t	romu	cilina	condense	ation\
	Greate al	it to li	consed HUAC FAV	renall	r)		
MATCH	-Tact stving	availah	10	Post			
nnex	Therman	OFFMAN	wildh c				
48 DF	chiarine v	nick of	angue	Ars Aio	1n 0/20	ν	1 N 0
TOPE	CAMITACK	146161 :	< 200 ppm ~ p	erson	m cra	rge re-m	adl
ina La W	and topo u	UCYCI U	VIII MEATITE ONE	pr. 5	0-100 g	prri cos	
MOTOX	19000 10119 US	£10 910	lbpizza trom fro	ont cas	e to rer	reat	
	reinspection	sched	uled 8/5/2024- -Hasan back in				
	AUGUST 12T	n, 2029	-Hasan back in	19 15/16)		
)	ě.		J '	,		
			4				
		- 1 -					
Person in	Charge (Signature)	12				Date 3/1/	12014
	(Signature)	Fima	11/			Date 7/3//	

Risk Category: 3 Food Establ	lishn	nen	t Ir	speci	tion Report Page 1 of 2
Establishment type: Permanent Demporary Mobile Other					Date: 7/31/24
Establishment Jersey Mikes Subs		4eeping.	Connec	cticat Healing	Time In 10:30 AMPM Time Out 11: 45 AMPM
Address 1500A Pleasant Valley rd.				H)	LHD Manchester
Town/City Manchester					Purpose of Inspection: Routine Pre-op
Permit Holder Ken Schanke		of Pul	blic He		Reinspection Other
FOODBORNE ILLNESS RISK FA					
Risk factors are important practices or procedures identified as the most prevalent cont					
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				complianc	The state of the s
P=Priority item Pf=Priority foundation item C=Core item V=violation type		-			
IN OUT N/A N/O Supervision	V	cos	R		OUT N/A N/O Protection from Contamination V COS R
Person/Alternate Person in charge present,	Pf	0			Food separated and protected
demonstrates knowledge and performs duties Certified Food Protection Manager for Classes 2,			-	(16)	Food-contact surfaces: cleaned & sanitized PPTC O
2 3, & 4	С	0	0	17 🐼	Proper disposition of returned, previously seryed, reconditioned, and unsafe food
Employee Health					Time/Temperature Control for Safety
Management, food employee and conditional employee;	P/Pf	0			Proper cooking time and temperatures P/Pf/C O
knowledge, responsibilities and reporting				19 🔾	Proper reheating procedures for hot holding POO
Proper use of restriction and exclusion	P	0	0	20 0	Proper cooling time and temperatures
Written procedures for responding to vomiting and diarrheal events	Pf	0			O Proper hot holding temperatures POO
Good Hygienic Practices		<u></u>		- 6	Proper cold holding temperatures POPPIPPIPPIPPIPPIPPIPPIPPIPPIPPIPPIPPIPP
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0		Time and multiple state of the
7 O No discharge from eyes, nose, and mouth	C	0		24	and records
Preventing Contamination by Hands			_		Consumer Advisory
8 Ø O Hands clean and properly washed	P/Pf	101	0	25	Consumer advisory provided: raw/undercooked food Pf O
No bare hand contact with RTE food or a				THE REAL PROPERTY.	/ Highly Susceptible Population
pre-approved alternative procedure properly followed	P/Pf/C	0	\circ	26 🔾	Pasteurized foods used; prohibited foods not offered P/C O
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0		Food/Color Additives and Toxic Substances
Approved Source				27 🔿	Food additives: approved and properly used POO
11 Food obtained from approved source	P/Pf/C	0	0	28	Toxic substances preparly identified
12 O Food received at proper temperature	P/Pf		0	20	stored & used
13 🕜 C Food in good condition, safe, and unadulterated	P/Pf	0	0		Conformance with Approved Procedures
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	\circ	29	Compliance with variance/specialized
	OD DE	TAIL	DD	ACTICE	process/ROP chieria/HACCP Plan
Good Retail Practices are preventative measures to					
				for COS at	
OUT N/A N/O Safe Food and Water	V		R	OUT	Proper Use of Utensils V cos R
30 Pasteurized eggs used where required	Р		0		In-use utensils: properly stored C O
31 O Water and ice from approved source	P/Pf/C	0	0		Utensils/equipment/linens: properly stored, dried, & handled Pf/C O
32 O Variance obtained for specialized processing methods	Pf	0	0	45 0 9	Single-use/single-service articles: properly stored & used P/C O
Food Temperature Control			100	46 0	Gloves used properly C O
Proper cooling methods used; adequate equipment for	Pf/C				Utensils and Equipment
temperature control					Food and non-food contact surfaces cleanable,
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf	0		F	properly designed, constructed, and used
36 Thermometers provided and accurate		0			Warewashing facilities: installed, maintained and used;
Food Identification	PI/C	0	\subseteq		cleaning agents, sanitizers, and test strips available
37 Food properly labeled; original container	DFIC	0		49 901	Non-food contact surfaces clean
Prevention of Food Contamination	11/10	191	\dashv	50 0 1	Physical Facilities Hot and cold water available; adequate pressure Pf O
38 Insects, rodents, and animals not present	Pf/C	0	<u></u>		Hot and cold water available; adequate pressure Pf Plumbing installed; proper backflow devices P/Pf/C O
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	ă	52 0 5	Sewage and waste water properly disposed P/Pf/C O
40 Personal cleanliness	Pf/C	0	0	53 🔾 🗆	Toilet facilities: properly constructed, supplied, & clean Pf/C O
Wiping cloths: properly used and stored	10	0		54 0	Garbage and refuse properly disposed; facilities maintained C
Washing fruits and vegetables	PIPTIC	0		55 O F	Physical facilities installed, maintained, and clean P/Pf/C O
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable.		56 O A	Adequate ventilation and lighting; designated areas used C C
201	211	211	_		Natural rubber latex gloves not used per CGS §19a-36f
Person in Charge (Signature)	11/0	14			Item Violations ;— O
0:1:				Priority F	Foundation Item Violations SIO 24
Person in Charge (Printed) Otal Can Points				Core Iter	m Violations i0/3 i 24 /0
Inspector (Signature)	211	24		Risk Fac	ctor/Public Health Intervention Violations "
Inspector (Signature) Date	>1/	A7		Repeat F	Risk Factor/Public Health Intervention Violations
Inspector (Printed) Jose Kamirez				Require	etail Practices Violations
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	or to a	orra	oct opvis	es Reinspection - check box if you intend to reinspect
or dispose of unsafe food, may appeal such order to the	Directo	or of L	deal	th not lo	respection violation identified by the tood inspector or to hold, destroy,

	Foo	d Esta	blish	ment	Inspe	ction I	Report	Page 2	of <u>2</u>
но_М	anches ter				tinuation She			Date 7/3/	124
Establishi	ment Jersey M	ikes Si	olos	Town_/	nonche	ster		ľ	/
					OBSERV				
13 CUCW 1-10	/Location/Process	Temp	Item	/Location/P	rocess	Temp		cation/Process	Temp
WIC	Sliced tomator	5 41F	Displa	ay coo	ler	11-	Hand Sin		116F
	Salami	39F	<u> </u>	Juch		41F	Quat E	sucket	400ppm
	Block cheese	39F			Salad	91F	CUStom	er BRSink	95F
	Coast beef	39 F		Beel	<u> </u>	41F			
Cold	Prep table	11 -							
+	5 liced cheese								
	Sliced chase	90 F							
		O.B.	SEDWAT	ONS AND	COPPEC	TIVE ACTI	ONS		
Maria de la composición dela composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición dela composición de la composición dela	Violations cited in this	report must be	e corrected v	within the time	frames belo	w, or as stated	d in sections 8-40	5.11 & 8-406.11 of the	e food code.
Item Number	Otailah C		5040						
A CANADOCATA BOAR NO SAVE	OTGIJAN C	41110	11 3190						
ha.	[]		1		•				
990	Floor unde	c ego	ipment	SUNCI	eall				
49C	Floor unde Wall behind	pep 5	ink u	nc lear	1				
49C	Floor drain	120 dec	oceo	sink ,	inclean				
				O (III X	mejcan				
49c	WIF Floor				,				
15C	Food (bread)								
49C	Interior &	exterio	r of c	cabinet	s at F	cont li	ne uncle	ah	
41c	Wet rag s	stored	DA PC	eo tab	le				
49C	Shelving abo	ve 3	bay 'u	nclear)				
49c		Front 1							
	interior of	cabine-	ts una	les 50	da st	ation	malen	1	
	ice dispense						Officion		
1011	100 01570135	LALD	0011 5	[0[101]	UNCLE	2111			
							100		
11.1.	Did solve		-1	. /			1 1		
Vote	Discussed inc	leasing	Clean	ing tre	equency	1 a5 n	eeded		
172/2	5706d globe	150 Z	nand	Was no	ng ob	served			
NOTE	Test Strips	E the	2/Mame	ter av	ailable				1
Person in	Charge (Signature)	20						Date 7/3	124
nspector	(Signature)	2	2					Date 7/3/	124

Risk Category:	2	Food	l Establi	shm	nen	t In	spe	ctic	on i	Rep	oort	Pa	ge 1 of	2	8	
Establishment t	type: Pe	manent Temporary Mobile							Date		7/17/2	¥				
Establishment	Ken	tucky Fried ch	ickn		4ESPINE	Center	ticat Health		Time	e In_	11:30(12	:30	AMA	PM)
Address 30	7 4	middle TAKE				P	H)		LHD	V	nanche	ster				
Town/City /	jano	hester							Purp	ose	of Inspection	Routine	Pre-	ор		
Permit Holder	Sha	hidul Chowdhory			of Pu	blic Ho			THE REAL PROPERTY.		ction	Other				_
Diet fester		FOODBORNE ILLNESS				-		_								
		ant practices or procedures identified as the most ance status (IN, OUT, N/A, N/O) for each				2-18-20-21	complia		(1) A THE 1/2 TO		ot in compliance	N/A=not applicable		=not ob	TOTAL PROPERTY.	d
		y foundation item C=Core item V=vie	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I		_		-		and the same	70.5		ted on-site during inspec	701	=repea	- (a) (b)	21
IN OUT N/A N		Supervision		٧	cos	R			T N/A			on from Contaminati	on	V	cos	R
1000		n/Alternate Person in charge present		Pf		0	15 0	> <			Food separated		-2/2 12		0	
		nstrates knowledge and performs duti ed Food Protection Manager for Clas		-			6	2 8	20	2		urfaces: cleaned & sar ion of returned, previou	CHECK TO STATE OF THE STATE OF	P(Pf)		
2 0 0	3, & 4	ed 1 000 1 Totection Manager for Clas	363 2,	С	0	0	17	>				itioned, and unsafe foo		P	0	0
		Employee Health						/			Time/Tempera	ture Control for Safet	ty			
3 00		ement, food employee and conditional e	mployee;	P/Pf	0		18 🤆			0	Proper cooking	time and temperature	s	P/Pf/C		
400		edge, responsibilities and reporting ruse of restriction and exclusion		P		0			219		Proper reheatin	ng procedures for hot he time and temperatures	olding		0 (
		n procedures for responding to vomiti	ing and				21 0	1/2	5		Proper cooling	ling temperatures		P	00	
5 00		eal events	3	Pf	0	\circ	22 G	1/				ding temperatures		P		
		Good Hygienic Practices					23 4	0				arking and disposition		P/Pf	0	0
		r eating, tasting, drinking, or tobacco charge from eyes, nose, and mouth	products use	P/C C	00	_	24 🤇		0	80		ic health control: proce	dures	P/Pf/C	0	0
140		Preventing Contamination by Hand	s	10	101	\subseteq				/	and records	umer Advisory		10-10	1	
8 0 9		clean and properly washed		P/Pf	0	0	25 <	5	0	3		y provided: raw/undercooke	ed food	Pf	0	0
9 000)	re hand contact with RTE food or a		P/Pf/C	0	0			(0)	/	Highly Sus	ceptible Population	- X F			
		proved alternative procedure properly	y followed		10000	2000	26		0	O'STATE OF THE PARTY.		used; prohibited foods not		P/C	0	0
10 0	Adequa	ate handwashing sinks, properly supplied	d/accessible	Pf/C	0	0	07	-T-		/		ves and Toxic Substa				
11 00	Food o	Approved Source obtained from approved source	Ti	P/Pf/C			27 (2/5				approved and properly	y used		0	
- Communication		eceived at proper temperature			0		28 🤄	Ø C			stored & used	es properly identified,		P/Pf/C	0	0
13 0 0	Food i	n good condition, safe, and unadulter	rated		0				m	C		ith Approved Procedu	ures			
140000		red records available: molluscan shel	lfish	P/Pf/C	0	0	29 <		0	/	Compliance wit	h variance/specialized		P/Pf/C	0	
	identif	ication, parasite destruction					ACTI		1 300		process/ROP c	riteria/HACCP Plan		1 11 110		\subseteq
		Good Retail Practices are preventative								chemi	icals and physica	al objects into foods				
Mark OUT if nu	mbered ite	em is not in compliance V=violation ty	THE RESERVE OF THE PARTY OF THE		-7.5 17				0.0		THE PARTY OF THE P	on-site during inspection	R	=repea	viola	tion
OUT N/A N/O		Safe Food and Water		٧	cos	-	OU	IT			Proper Us	se of Utensils	AND LEVE	V	cos	
30 O Pa	asteurized	l eggs used where required		Р		0	43 <	⊃ In-	use u	utens	ils: properly stor	ed		С	0	0
		ce from approved source stained for specialized processing me		P/Pf/C Pf	_	00	44 (O Ute	ensils/	/equip	ment/linens: prop	perly stored, dried, & han	idled	Pf/C	-	_
OZ O O VE	andrice of	Food Temperature Control	uious	_F1							properly	es: properly stored & use	ea .	P/C C	00	
33 Pr	oper cool	ing methods used; adequate equipme	ent for	Delo								and Equipment				$\overline{}$
lei	mperature			Pf/C	0.000	0	47 C					surfaces cleanable,		P/Pf/C	0	
34 0 0 Pla	ant food p	properly cooked for hot holding		Pf		0	7, 0				igned, construct			F/FI/C		
		nawing methods used ers provided and accurate		Pf/C Pf/C		8	48					alled, maintained and u	500000000000	Pf/C	0	0
00 0	icimonici	Food Identification		PI/C		\subseteq	690				ntact surfaces c	and test strips available	е	(3)	0	
37 O Food prop	erly label	ed; original container		Pf/C	0	0	07		,,,,,,,,	<i>J</i> u 00		ical Facilities				$\overline{}$
~		Prevention of Food Contamination					50	> Ho	t and	cold		; adequate pressure		Pf	0	0
88 So Insects, ro	odents, ar	nd animals not present	Manufacture II.		0		51		umbir	ng ins	stalled; proper b	ackflow devices		P/Pf/C	0	0
40 O Personal of		nted during food preparation, storage &	display F	P/Pf/C			52 (⊃ Se	wage	and	waste water pro	operly disposed		P/Pf/C		
		erly used and stored		C	0							structed, supplied, & cl isposed; facilities mainta		Pf/C	00	
42 O Washing f				P/Pf/C								naintained, and clean		P/Pf/C		
		ustomers that a copy of the most recent in	-137-		V							nting; designated areas		C	0	
	,, 0.	The most recent in	- Pedilon Tepor	. IS ava	aute.) Na	itural	rubb	er latex gloves r	not used per CGS §19a	a-36f			
Person in Charge	e (Signat	ure)	ate 07-	17.	-71	1	Viola					Date corrections	due		#	
	19	01100117	0 /			1	Priori				tem Violations	717710	4	-	2	-
Person in Charge	e (Printed	a) JHHHID					Core	Item	Viola	tions		10/14/2	4		1	-
Inspector (Signat	tura) A	12-	7/1-	, /	2/	1	Risk I	Facto	r/Pub	olic H	ealth Intervention	on Violations	-		ì	
mapecioi (aigna	ure)	24	ate ///		29	H					Public Health Intes S Violations	tervention Violations			2	
Inspector (Printe	ed)	JOSE Ramisez		1								x if you intend to reins	spect		2	-
Appeal: The ow	ner or op	perator of a food establishment agg	rieved by thi	s orde	er to	corre	ect an	y ins	pection	on vi	olation identifie	d by the food inspect	or or to	hold.	lestr	OV.
10	r dispose	of unsafe food, may appeal such of	order to the F)irecto	or of I	Heal	th. no	t late	r tha	n for	ty-eight hours	after issuance of such	order			-

Г	ood Establish	iment insped	ction r	teport	Pagec	of DC
LHD_Manchester		on Report Continuation Shee			Date	124
Establishment KF		Town Marche	ster			201
	TEM	PERATURE OBSERVA				
Item/Location/Process	and the same of th	m/Location/Process	Temp	Item/I oca	tion/Process	Temp
Hot Upla Chicken	1 1-24 11	71 7 7	1465	. 1 -	7 1	1
Hold Maggets	2 15 ST HOT I	old chicken wing	1901	Quat Buc	1 11	LOOPPM
Mashed po	tates 160 F	Mace cheese	170F	110,	c drive thru	112"E
W/C/eff side	L,	Chicken thiah	LATE	CUSTOMER	BR SINK	92F
Chicken	AIF COL	hold cole said	AIT	W		
Chicken	37F Chick	1	190F			
Chicken	39 F CHICA	UI WACE IO	1,01			
	The second secon					
WIC Right Side						
WIF ambient	IDF					
		TONS AND CORRECT				
Item Violations cited	in this report must be corrected	within the time frames below	, or as stated	in sections 8-405.1	1 & 8-406.11 of the f	ood code.
Number						
38PF Drain Fl	int acrosh a	c. 1 - 2 - 6	11.	- (-la a	a abia a la l	. 1-
Soll Dian FI	ies present mop	SINK area 9	CUSTOM	e(2000 11	rachine Car	pinets
	ains (2) behir	nd ice machin	0 1000	ean		
1 () -	1 1 (
16PF wire 5	nelvina above -	lot Hold line	ionclear	\		
				•		
17-1-1210 -11	1 1			21	, 1	1 1
Vote VIC State	d temps are	recolded t	very	2 hours	and rea	orded.
	ove use obse		A		W	
		V	4	1	1 :	
Note under co	unter cooler o	ambient temp	ARF. A	HI Food M	over to 1	115
5		The state of the s	70 77	11 01	000000	~ []
yo not	use under co	water cooler	OF KK	ent Side	E WIC U	n til
thou wo	- serviced and	Main	Air	2 6 6 1 1	1	
11 - - - - - -		1 1 1		de de lol	V.	
VOYE YEST SK	TIPS & thermore	reter available	2.			
		- VIV VIVIV				
Note Yest Con						
Joto LAC on	cight side not	Functioning	20-01.	Ambigal	Lan 58	F
				rubient	temp. 58	(-
Service	ech scheduled	to fix if the	av. No	food stor	ed in it	
2		- 112 11 100	y . 100 .	190 0		2/1
Person in Charge (Signatur	e) Trawn				Date 07~ /	7-24
1	21/1					9
nspector (Signature)	11/1/1/				Date 7 - (7 -	24

Risk Category: 2	Food Establ	lichm	ent l	nene	cti	on R	enorf	Page 1 c	f 2	
00	rmanent Temporary Mobile Other	18.0 	Carlotta 1.4							
		Ī	Copin	ection	_	Date:	7-8-	5	8	
Establishment K(15	oil energy in	\ _	4espiny C			Time I	n_[:00]	AMPM Time Out 2:	00_	AM/PW
Address 270 M	TW offendaying		OP	H)		LHD	Manche	ster		
Town/City Manch	hester				* 1	Purpo	se of Inspection	n: Pre	-op)
Permit Holder PR	ITUADAM CAZA	Co	of Public I	epartment lealth		Reins	pection	Other		
	FOODBORNE ILLNESS RISK FA									
	nt practices or procedures identified as the most prevalent cont ince status (IN, OUT, N/A, N/O) for each numbered it		100	odborne ili	_		nterventions are conti =not in compliance		ss or injury 0= not ob	
	foundation item C=Core item V=violation type							Water Company of the		t violation
IN OUT N/A N/O	Supervision	v	COS R			M N/A		tion from Contamination	V	COS R
	/Alternate Person in charge present,	Pf	00	15 (5/	0	Food separate	ed and protected	P/C	00
demon	strates knowledge and performs duties	E.E.		16	8/	0		surfaces: cleaned & sanitized	P/Pf/C	00
2 0 Certifie 3, & 4	ed Food Protection Manager for Classes 2,	С	00	17 4	d c			ition of returned, previously ditioned, and unsafe food	P	00
	Employee Health						/jme/Temper	ature Control for Safety	-	
1.5 ()	ement, food employee and conditional employee;	P/Pf	00		$\supset \subset$			g time and temperatures		00
Knowle	edge, responsibilities and reporting tuse of restriction and exclusion	Р	00	-				ng procedures for hot holding time and temperatures		00
Writter	procedures for responding to vomiting and				3 2			ding temperatures	P	
	eal events	Pf	00	22 (56			olding temperatures	P	
/_/	Good Hygienic Practices			23 (0		Proper date m	arking and disposition	P/Pf	
	eating, tasting, drinking, or tobacco products us			24		0		lic health control: procedures	P/Pf/C	00
	charge from eyes, nose, and mouth Preventing Contamination by Hands	С	00				and records			
	clean and properly washed	P/Pf	00	25 0	STC			sumer Advisory ory provided: raw/undercooked food	Df	00
No bar	e hand contact with RTE food or a	T		20	210	/		sceptible Population		
pre-ap	proved alternative procedure properly followed	P/Pf/C	00	26	DE	0		s used; prohibited foods not offered	P/C	100
10 Adequa	ate handwashing sinks, properly supplied/accessible	Pf/C	00		1			tives and Toxic Substances		
400	Approved Source	T		27 6	J/ <			s: approved and properly used	P	00
	obtained from approved source eceived at proper temperature		90	28	$\mathbf{v} \mid \mathcal{S}$			ces properly identified,	P/Pf/C	00
	n good condition, safe, and unadulterated		00		/		stored & used	vith Approved Procedures		
	ed records available: molluscan shellfish	T		00	1			ith variance/specialized	T	
identific	cation, parasite destruction	P/Pf/C		29				criteria/HACCP Plan	P/Pf/C	00
			TAIL P							wilete
Mark OUT if numbered ite	Good Retail Practices are preventative measures to mis not in compliance V=violation type Mark in the measures to the measurement of the measu									
OUT N/A N/O	Safe Food and Water	v	cos R	OL	_	/OI K		d on-site during inspection lse of Utensils	K=repea v	t violation
	eggs used where required	P	00			use ute	ensils: properly sto		C	00
31 O Water and in	ce from approved source	P/Pf/C	00	44 (O Ute	ensils/ed	quipment/linens: pro	operly stored, dried, & handled		00
32 O Variance ob	tained for specialized processing methods	Pf	00	45 (⊃ Sir	igle-use	s/single-service artic	cles: properly stored & used	P/C	00
December 1	Food Temperature Control			46		oves us	sed properly		C	00
133 C Temperature	ing methods used; adequate equipment for	Pf/C	00	-	TEO	od ood		Is and Equipment surfaces cleanable.		
	properly cooked for hot holding	Pf	00	47	3		designed, constru	Control of the second s	P/Pf/C	00
35 O O Approved th			00	100	1/1/			alled, maintained and used;	1	
36 C Thermometer	ers provided and accurate		00	48	cle	aning a	agents, sanitizers,	and test strips available	Pf/C	00
27 C Food	Food Identification			49 (⊃ No	n-food	contact surfaces	clean	С	00
37 Food properly labele	ed; original container Prevention of Food Contamination	Pf/C	00	50	<u> </u>	4		sical Facilities		
38 O Insects, rodents, an		Df/C	00	50 0				e; adequate pressure	Pf	00
39 Contamination prever	nted during food preparation, storage & display		00				installed; proper l and waste water p			00
40 Personal cleanlines	s		00	-				nstructed, supplied, & clean	Pf/C	
41 O Wiping cloths: prope		С	00	54 <	⊃ Ga	rbage a	and refuse properly	disposed; facilities maintained	C	00
42 Washing fruits and			00		⊃ Ph	ysical f	facilities installed,	maintained, and clean	P/Pf/C	00
Permit Holder shall notify cu	stomers that a copy of the post recent inspection rep	ort is ava	ailable.					ghting; designated areas used not used per CGS §19a-36f	C	00
Porcon in Character	m m / Phales and	21-	-01	Viola	tions	docur	mented	Date corrections due	25	#
Person in Charge (Signate			024			m Viola				2
Person in Charge (Printed	PRASAD MAGANTI			Core	Item	undatio Violatio	on Item Violations			3
1			7/	Risk	Facto	r/Public	c Health Intervent	ion Violations		
Inspector (Signature)	Date /-	8-6	14	Repe	at Ri	sk Fact	or/Public Health In	ntervention Violations		
Inspector (Printed)	Jose Ramirez						tices Violations	av if var. late a dit t		
	perator of a food establishment aggrieved by the	his orde	er to cor	rect an	w inc	nection	violation identif	ox if you intend to reinspect	o hold	doctor
or dispose	of unsafe food, may appeal such order to the	Directo	or of He	alth, no	t late	r than	forty-eight hours	after issuance of such order	o riola, (destroy,

Foo	od Esta	blishment Insp	ection	Report Page L	_ of _ L
HD Manchester		Inspection Report Continuation S	heet	Date7 - 8	-24
Establishment KriSpy	krunchy (Chicken Town Manch	nester		
		TEMPERATURE OBSE	RVATIONS		
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
RIC ambient	36F			Handsink by RIC	LIOF
9 00 X W				· · · · · · · · · · · · · · · · · · ·	
RIF ambient	-3 F				
	OB	SERVATIONS AND CORRE	CTIVE ACTI	ONS	
Item Violations cited in the				d in sections 8-405.11 & 8-406.11 of the	e food code.
Number		7887 W.			
Re-op ins	pection.				
	•				
Note Test Strips	S& the	rmometer available	3		
	3				
Note CFPM (Pra	sad Ma	ganti) Cert prou	ided . Ct	flm must be on s	ite
during al	1 operati	ing hours.			
Note No Food o	n site	during in Spect	ion.		
Note All required	Signage.	posted			
Nale and of I	-ar 1)ala		1	given their approval	
vote owner stat	es water	1 sewes & tile	nave o	given their approval	۷.
Note ok to a	perate.	Lirense will be 1	comp L	EF this work	
Note Spec She	eets for	r oven & Fryes	- provide	ed.	
Note PIC States	Fond	delinear will acid	p 7.15	-21	
Note PIC States Restauran	it to	open 7-22-	24.	4 ,	
Person in Charge (Signature)	m.c.	Playas		Date @7/o	8/2024
nspector (Signature)	22			Date 7-8	3-24
2)					

Risk Category: 3 Food Estab	lishn	nen	t Ir	nspe	ctio	n Re	port	Page 1 c	of <u>2</u>
Establishment type: Permanent Temporary Mobile Other					_ D	ate:	7/16	24	
Establishment La Plazita del Mofongo		+cering	Conne	ecticut Health	Т	me In_	10:00	AM/PM Time Out //:	30 AM/PM
Address 425 Broad St.			P	H)	L	HD	mana	hester	
Town/city Manchester					P	urpose	of Inspecti	on: Routine Pre	e-op
Permit Holder Yaztery Martinez		of Pu	blic H		1000	einspe		Other	
FOODBORNE ILLNESS RISK F			0.00	107			1000		
Risk factors are important practices or procedures identified as the most prevalent continuous Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				complia		Scott State of Colors	ot in complian		O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type									R=repeat violation
IN OUT N/A N/O Supervision	V	cos	-			N/A N/C	1	ection from Contamination	V COS R
Person/Alternate Person in charge present			-	15 Q				ated and protected	P/C 0 0
demonstrates knowledge and performs duties	Pf	0	\circ	130	X	0		ct surfaces: cleaned & sanitized	P(Pf/¢ O O
2 Certified Food Protection Manager for Classes 2,	С	0	0	17 G	1			osition of returned, previously	
3, & 4				17 3			served, reco	onditioned, and unsafe food	P 0 0
Employee Health								erature Control for Safety	in the
3 Management, food employee and conditional employee;	P/Pf			18 🤇	0	00	Proper cook	ing time and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting				19 🤇	0	\circ	Proper rehe	ating procedures for hot holding	
Proper use of restriction and exclusion	P	0	0	20 C	2			ing time and temperatures	POO
5 Written procedures for responding to vomiting and	Pf	0	\circ	-	2			nolding temperatures	POO
diarrheal events	1 200	1		22 @				holding temperatures	POO
Good Hygienic Practices 6 Proper eating, tasting, drinking, or tobacco products us	o Dic			23 🐼	0	0		marking and disposition	P/Pf O O
7 No discharge from eyes, nose, and mouth	e P/C	0	-	24 🤇		Ø C	The state of the s	ublic health control: procedures	P/Pf/C
Preventing Contamination by Hands		101	\subseteq	1	4		and records		
8 Hands clean and properly washed	P/Pf	101	0	25 🔾	00	d		onsumer Advisory risory provided: raw/undercooked food	T 0 0
No hare hand contact with DTE food or o	1		\preceq	25	70	Ce .		Susceptible Population	Pf OO
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 (10	0	Pactourized fo	ods used; prohibited foods not offered	DIC O
Adequate handwashing sinks, properly supplied/accessible	PriC	0	0	2010		40 30000		ditives and Toxic Substances	P/C O O
Approved Source	1.60		_	27	10			es: approved and properly used	POO
11 O Cood obtained from approved source	P/Pf/C		0	21	1	9		ances properly identified,	
12 O Food received at proper temperature	P/Pf		\approx	28		0	stored & use		P/Pf/C O
13 O Food in good condition, safe, and unadulterated	P/Pf	-	_		-	1		with Approved Procedures	
Required records available: molluscan shallfish					T	Aura		with variance/specialized	Company of the Residence
identification, parasite destruction	P/Pf/C	0	\circ	29 🤇		Ø		P criteria/HACCP Plan	P/Pf/C O
				RACTIO					
Good Retail Practices are preventative measures t	o contro	l the a	additi	ion of pa	thoger	s, chem	icals, and phy	sical objects into foods.	
	n appro	priate	box	for COS	and/o	R	COS=correc	ted on-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	٧	cos	R	OU'				Use of Utensils	V COS R
30 Pasteurized eggs used where required	Р		0	43	In-us	e utens	sils: properly:	stored	(0)00
31 Water and ice from approved source	P/Pf/C	_	0	# 0	Uten	sils/equi	pment/linens:	properly stored, dried, & handled	Pf/C O O
32 Variance obtained for specialized processing methods	Pf	0	0					rticles: properly stored & used	(10°)00
Food Temperature Control				46	Glov	es use	d properly		100
Proper cooling methods used; adequate equipment for	Pf/C	0						sils and Equipment	
temperature control			CONTRACT	47 30				ct surfaces cleanable,	P/RFIC)
34 O Plant food properly cooked for hot holding	Pf		0	0/4				ructed, and used	
35 O Approved thawing methods used	Pf/C	0		48 🤇				nstalled, maintained and used;	Pf/C O O
36 Thermometers provided and accurate	Pf/C	0	9					rs, and test strips available	
Food Identification 37) Food properly labeled; original container		1-1	_	4919	Non-	food co	ntact surface		000
	Het/C	0	9	5010	NI			hysical Facilities	
Prevention of Food Contamination	120							able; adequate pressure	Pf O O
Insects, rodents, and animals not present 39	P/Pf/C	0	의					er backflow devices	P/Pf/C O O
40 Personal cleanliness				52 C	Sew	age and	waste water	properly disposed	P/Pf/C O O
41 Wiping cloths: properly used and stored		0						constructed, supplied, & clean	Pf/C O O
42 Washing fruits and vegetables	P/Pf/C	9						ly disposed; facilities maintained	C O O
				55	Ada	ical lac	ilities installe	d, maintained, and clean	P/Pf/C O O
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ailable	2					lighting; designated areas used es not used per CGS §19a-36f	C O O
	100	-		Violat	ions	ocume	ented	Date corrections due	#
Person in Charge (Signature)	-16	- 1	4			Violatio		Date corrections due	- "
70/0	(4)	-					Item Violation	ns	2
Person in Charge (Printed)				Core I	tem Vi	olations	3		9
less to the same	11	1	11	Risk F	actor/	Public F	lealth Interve	ntion Violations	7.
Inspector (Signature) Date	10-	L	1	Repea	at Risk	Factor	Public Health	Intervention Violations	
Inspector (Printed) Jose Ramice?							es Violations		9
		-		Requi	res R	einspec	ction - check	box if you intend to reinspect	
Appeal: The owner or operator of a food establishment aggrieved by the	his orde	er to	corr	ect any	inspe	ction v	iolation ident	tified by the food inspector or to	o hold, destroy,
or dispose of unsafe food, may appeal such order to the	Directo	or of l	Hea	ith, not	later t	han for	rty-eight hou	rs after issuance of such order	

Food Establishment Inspection Rep	oort Page 2	of_2
LHD Manchester Inspection Report Continuation Sheet	Date 7/16	124
Establishment La Plazita del MotongoTown Manchester	-	
TEMPERATURE OBSERVATIONS Item/Location/Process Temp	Itam/Lagation/Dragge	Tomp
	Item/Location/Process Malouee BR 5(1)K	7emp 85F
	Stoner BRSIOK	115F
Cheese 39F Cheese 38F	10 101 UP 2101A	11 01
	ant line Hotbac	
Beef 38F 2 door R Fambient -3F	1 Chicken	135F
emanada 38F 2 door RIC eaas 38F	liver	135F
under counter roder cake 375	sice	135F
Shrimp 397 Front line cold hold Pasta 417	. 100	
OBSERVATIONS AND CORRECTIVE ACTIONS Violations cited in this report must be corrected within the time frames below, or as stated in sec	ctions 8-405 11 & 8 406 11 of the	food code
Item Number	cuons 0-400.11 & 0-400.11 of the f	ood code.
37Cunlabeled Squeeze bottles		
	+ straged	
Age Wic Floor unclean		
490 WIC Shelves unclean, speed (ack un	clean	
990 Dry Storage She vina unclean		
Age interior of 2 doc True RIC unclean		
450 to go container used as scoop throughout		
A3C handle purried in product throughout		
38PF Fruit flys present at bar		
16PF interior of ice machine at bar unclean		
10 c What paper towels not in dispenser in employ	iee Bathroom	
Note monitor temps in Hot bar to ensure all foods Monitor Front cold hold unit food should be	are 135F or	seater.
Monitor Front cold hold unit food should be	41For less.)
Note Good glove use observed	w _k j⊼:	
Note Test strips & thermometer available		
Person in Charge (Signature)	Date 7-/	4-24
Inspector (Signature)	Date 7-16	-24

Ris	sk Category: 3 Food Establishment Inspection Report Page 1 of 2																
Est	ablis	hme	ent ty	pe: Permanent Temporary	Mobile Other					Date: 7/10/24							
Est	ablis	hme	ent	Long Gut Mis	spinny		*Setulati	Connect	icut Health	Ĺ	Time In_	11 (MPM Time Out	2:30 A	MPM		
Ado	dress	8		main street			DI		F)								
Τοι	wn/Ci	ty	M	anchester		<u></u>					Purpose	of Inspection:	Routine	Pre-op			
Per	mit H	lold	er				5000000	olic He	Reinspection Other 30 (100)								
					ILLNESS RISK F.												
				re important practices or procedures ident			ctors of	f food!	borne il	lness c	or injury. Inter	ventions are contro	I measures to prevent foodborne	Iness or injury.			
	and the second			compliance status (IN, OUT, N/A,		-			compli			ot in compliance		N/O=not obse	erved		
P=	Priorit			f=Priority foundation item C=Core			_	_					ted on-site during inspection				
_	IN O	UT	I/A N/C			V	cos	R			UT N/A N/O		on from Contamination		COS R		
1	0	0		Person/Alternate Person in cha		Pf	0		15 0			Food separated	The state of the s	100000000000000000000000000000000000000	00		
-	/	-		demonstrates knowledge and p Certified Food Protection Mana				-	16	2	00		urfaces: cleaned & sanitize		00		
2	Ø	$\supset \circ $		3, & 4	ager for Classes 2,	С	0	0	17	20		100	ion of returned, previously tioned, and unsafe food	P	00		
	-			Employee Hea	alth	- Lucia					page 19 page 1		ture Control for Safety		E 55		
3				Management, food employee and		P/Pf	0		18	5	000		time and temperatures	P/Pf/C	00		
	1			knowledge, responsibilities and					19 (Proper reheatin	g procedures for hot holdi	ng P C	00		
4	0	2		Proper use of restriction and ex		P	0	9				Proper cooling	time and temperatures		00		
5	0			Written procedures for respond diarrheal events	ling to vomiting and	Pf	0		21 (ing temperatures		00		
	-	_0	001000	Good Hygienic Pr	actices								ding temperatures rking and disposition		00		
6	0	51	1	Proper eating, tasting, drinking		se P/C	0				0		c health control: procedure	20			
7		5	0	No discharge from eyes, nose,	and mouth	C	0		24			and records	o neatti control. procedur	P/Pf/C	$\circ \circ $		
	1			Preventing Contaminati	ion by Hands					1		Const	umer Advisory		E YOU		
8		\supset		Hands clean and properly wash		P/Pf	0	0	25 0	5		Consumer advisor	y provided: raw/undercooked fo	od Pf C	00		
9	0			No bare hand contact with RTE		P/Pf/C	0			-			ceptible Population				
10				pre-approved alternative proce		0.000 0.000	5,1910		26	$\supset \subseteq$			used; prohibited foods not offer		00		
10		21	See and	Adequate handwashing sinks, pro		Pf/C	0	\subseteq	07 4	10			ves and Toxic Substanc				
11	1	7	To Bloom	Approved Sou Food obtained from approved s		P/Pf/C				2			approved and properly us		00		
12		5	200	Food received at proper tempe		P/Pf			28 6	0		stored & used	es properly identified,	P/Pf/C			
		5		Food in good condition, safe, a		P/Pf	-	-					ith Approved Procedures		1100		
14	00	5 8	1	Required records available: mo	olluscan shellfish	P/Pf/C			29		1		h variance/specialized				
				identification, parasite destruct		3 9 6			100000			process/ROP c	riteria/HACCP Plan	P/Pf/C			
	_			One of Parts' if Parts'		OD RE								31.4	WHIE!		
	Mark C	THE	if num	Good Retail Practices ar bered item is not in compliance		in approp											
-	OUT N/	_		Safe Food and V		v v	cos	-		UT	J/OF R		on-site during inspection se of Utensils	R=repeat v	cos R		
30	-			teurized eggs used where requir		P	0	-			-use utens	ils: properly stor			00		
31	0		Wat	er and ice from approved source	9	P/Pf/C	0	0					perly stored, dried, & handled		00		
32	00	2	Vari	ance obtained for specialized pr	ocessing methods	Pf	0	0	45	⊃ Si	ngle-use/sir	ngle-service article	es: properly stored & used		00		
			-	Food Temperature					46		loves used	properly	*	C	00		
33	0		and the second	per cooling methods used; adeq	uate equipment for	Pf/C	0			-			and Equipment		- 11		
34		3		perature control at food properly cooked for hot he	oldina	Pf	0		47)			surfaces cleanable,	P/Pf/C	00		
				roved thawing methods used	olollig	Pf/C		_	3004	1//		igned, construct	ed, and used illed, maintained and used				
36				rmometers provided and accura	te		0		48				and test strips available	Pf/C			
				Food Identifica					49			ntact surfaces c		С	00		
37	O Fo	ood	ргоре	rly labeled; original container	7 /	Pf/C	0	0	- 10			Phys	ical Facilities				
			200.00	Prevention of Food Co	ntamination	5.17		11.3	50) H	ot and cold	water available	; adequate pressure	Pf (00		
_				ents, and animals not present			0	0					ackflow devices	P/Pf/C			
				on prevented during food preparation	on, storage & display	P/Pf/C		의(⁽⁵²⁾ (X Se	ewage and	waste water pro	operly disposed	P/P(C)C			
				eanliness ns: properly used and stored			0						structed, supplied, & clear		99		
				its and vegetables		P/Pf/C	00						isposed; facilities maintained naintained, and clean				
				notify customers that a copy of the	most recent inspection rep	100,000			56	\supset Ac	dequate ve	ntilation and ligh	nting; designated areas us	ed C	50		
_				- Williams	1111	17	7						not used per CGS §19a-36		,,		
Per	Priority Item Violations Date The Priority Item Violations Date The Priority Item Violations																
	Priority Foundation Item Violations																
Per	rson in Charge (Printed) 105 SCIULE 2011/101 Core Item Violations 10110/24 3																
	188	, 22		I Ommalla	7	1010	4		Risk	Facto	or/Public H	lealth Intervention	on Violations				
ins	pecto	r (Si	gnatu	ire) A. SUIIUV	Date 7	10/2	4						tervention Violations				
Ine	pecto	r (Pi	inted	1 MINEN BLIN	andu			3	_			es Violations	v if you intond to sole	3			
				er or operator of a food establi	ishment aggriound but	hie and	or to	2055	redi	uires	Remspec	olotion identification	x if you intend to reinspe	I held !			
٠,٢	poul.	111	OF	dispose of unsafe food, may ar	aneal such order to the	Diroct	or of L	Jean	th no	y Ins	or then for	ty oight hours	of or incure of and	i to noid, de	stroy,		

Food Establishment Inspection Report LHD Manchester Inspection Report Continuation Sheet Establishment LANG BUT MISS DINN U Town Manch ester TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Process Item/Location/Process Temp 38F Hot hold unit sink surface sanitice 188F Chroken wina 40 F 1) CL chicker hot water 3 bay Bay Mare-cheese 41F WIF 39F **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 note Thermometer/aiconol wipes available 52c stagnant water in bay mark cooker across from cookine cleaning equipment in basement on ground - not in use gan in back exit door by stairwell good equipment/utensil storage very clean + organized CEPM ON S note overall great inspection note no cooking/cooking at time of visit-discussed practices note discussed date Marking test strips available for dish machine /sink surface sanitizer

Person in Charge (Signature

Inspector (Signature)

Risk	sk Category: 7 Food Establishment Inspection Report Page 1 of																		
Esta	abl	ishn	ieni	typ	e: P	ermanent	Temporary Mo	bile Other						Date:	7/31/	24	-		*
Esta	abl	ishm	nent	r	η.	CC K	itchen			teerin	9 Conne	ticut He.	Naga.	Time In_	/ /	Company Control	me Out		AM/PM
Add	res	ss	4	10	o'r	nain 5	st				D	H		LHD M	anchest	ی			
Tow	m	City		m		nches							7	Purpose	of Inspection	: Routi	ne Pre	e-op	
NO.	1,075	Hol	der	-	1				Co	onnection of Pu	cut Dep	artme	nt	Reinspe	ction	Other			
						FOO	DBORNE ILLI	NESS RISK F	ACTO	RS	ANI	Pl	JBL	IC HEAL	TH INTERV	ENTIONS			
	140		_	_			orocedures identified as							147/11/0-7	1000	0.278915 3100		House May an	
	5.055	rity it					tem C=Core item				N=in o	-	-		ot in compliance	N/A=not a sted on-site dur		D=not ob R=repea	-
		OUT	1		1 11011	ity roundation i	Supervision	• - violation type	V	cos	-		-	OUT N/A N/O		ion from Con		v-repea	COS R
					Perso	on/Alternate F	erson in charge pr	resent.				15			Food separate				00
1 <	\supset	0	0		demo	onstrates know	wledge and perforn	ns duties	Pf	0	0	16		00	Food-contact s				00
2	$\overline{}$	0	0				tection Manager fo	r Classes 2,	С	0	0	17	0	0	Proper disposit	ion of returne	d, previously	Р	00
	_				3, & 4				⊥ŭ.		_				served, recond				
+			100000		Mana		nployee Health employee and condit	ional amplayea:				18			Time/Tempera Proper cooking	ture Control	for Safety	DIDGG	
3 (\supset	0				Control of the second of the s	striployee and conditions in the conditions and report the conditions and report the conditions are conditions and report the conditions are conditional conditions are conditional conditions.	Distriction of the control of the co	P/Pf	0	0		0	000	Proper reheating	a procedures	for hot holding		00
4 (0	0					iction and exclusion		Р	0	0	20	ŏ	000	Proper cooling	time and tem	peratures		00
5	5	0			Writte	en procedures	s for responding to	vomiting and	Pf	0	0	21	0	000	Proper hot hold	ling temperate	ures		00
	_	Ľ.	38	000	diarrh	neal events			1.1		\subseteq				Proper cold ho				00
6	$\overline{}$	0	NO.		Drong		Hygienic Practice		- D/O			23	0	000	Proper date ma			P/Pf	00
7 (0					ing, drinking, or tol eyes, nose, and m		e P/C	0	-	24	0	000	Time as a publ and records	ic nealth cont	roi: procedures	P/Pf/C	00
					140 GI		Contamination by				$\overline{}$		_		The state of the s	umer Adviso	rv		
8	0	0		0	Hand		properly washed		P/Pf	0	0	25	0	00	Consumer advisor			Pf	00
9 (0	0			No ba	are hand cont	act with RTE food	or a	P/Pf/C	0					Highly Sus	ceptible Pop	ulation		
							native procedure p					26	0	00	Pasteurized foods			P/C	00
10	\mathcal{L}	0			Adequ		ning sinks, properly s	supplied/accessible	Pf/C	0	0				od/Color Addit	210000000000000000000000000000000000000			
11 ($\overline{}$	0	0.50		Food		proved Source n approved source		DIDEIC			27	0	00			d properly used	P	00
12			0	0			roper temperature		P/Pf/C P/Pf	_		28	0	00	Toxic substant stored & used	es properly ic	ientified,	P/Pf/C	00
13 (ŏ	No.				lition, safe, and un		P/Pf	_	_			C	onformance w	ith Approved	Procedures	4	
14	\sim	0	0	0	Requ	ired records	available: mollusca		P/Pf/C	0	0	29	0	00	Compliance wi	th variance/sp	pecialized	P/Pf/C	00
			Ľ	Ľ	identi	ification, para	site destruction		1025049622168520			119022	0.000	1930	process/ROP of	riteria/HACCI	P Plan	F/FI/C	
		-	×.			Good Potail	Practices are previ		OD RE						icals and abusin	al abianta inta f	d-		
Λ	/lar	k OU	Tifr	umb	ered it	tem is not in co			in appro				-		COS=corrected			R=repea	tyiolation
_	-	N/A		Idillo	Ci Ca ii		Food and Water	lation type Wark	v	cos	1	r —	TUC	Haror IX		se of Utensil		V-Tepea	COS R
30 <	-		_	Past	eurize		where required		Р	0	-			In-use utens	ils: properly sto			C	00
31 (0					lice from app			P/Pf/C	0	0				oment/linens: pro		ried, & handled	Pf/C	00
32	\supset	0		Varia			pecialized process		Pf	0	0				ngle-service artic	es: properly st	ored & used	P/C	00
			annen .				emperature Cont					46	0	Gloves used				С	00
33 (0		SECTION 2			oling methods re control	s used; adequate e	equipment for	Pf/C	0	0		-	Food and no	on-food contact	s and Equipr		_	
34 ($\overline{}$		_				ked for hot holding		Pf			47	()		signed, construc		S 20 200	P/Pf/C	00
						thawing meth				0					g facilities: insta				-
36							d and accurate			0		48			ents, sanitizers,			PCC	
						Foo	od Identification					49			ntact surfaces of			С	00
37	9	Food	d pro	oper	y labe	eled; original			PFC	9	0					sical Facilitie			
20							of Food Contami	nation	- India						water available				00
						and animals n	ot present ood preparation, stor	rage & display	P/Pf/C	0	-				stalled; proper b I waste water pr				00
					anline		ood preparation, stor	age & display		0					es: properly con				00
						perly used an	nd stored		С	0	_				refuse properly of		Control of the Contro		00
42	\supset	Was	hing	g frui	ts and	d vegetables			P/Pf/C	0	0				ilities installed,				00
Pe	erm	it Hol	der s	hall	notify	customers that	a Copy of the most re	ecent inspection rep	ort is av	ailable		56			entilation and lig			С	00
						A	11/11/20				2011	1/:-			er latex gloves				44
Pers	sor	in C	har	ge (Signa	ature)	+XX	_ Date 7-2	31-5	acl		-	-	ns docume	The same of the sa	Date col	rrections due	-	#,
				<u>- (</u>	3	TI	1		_ ' '	7	\neg				tem Violations				Ø
Pers	sor	in C	har	ge (Printe	ed) tem	loc soll	MC				Cor	e Ite	m Violations	3				12
14-		A /-	٠.			\sim	\bigcirc	7. 7/	2.1-	11		Risl	(Fa	ctor/Public F	lealth Interventi	on Violations		0	5
msp	ec	tor (oigr	ıatul	e)	gens	e ayou	Date //	مهرد	7					Public Health In	tervention Vic	oiations	7	-
Insr	ec	tor (Prin	ted)	7	100150	Payne	/							es violations ction - check bo	x if you inter	nd to reinspect		
			he c	wne	er or o	operator of a	food establishme	ent aggrieved by	this ord	er to	corr	ect a	ny ii	nspection v	iolation identifie	ed by the foo	d inspector or t	o hold,	destroy.
				or d	ienne	e of uncafe f	ood may appeal	such order to the	Direct	or of	Hea	th r	ot Is	eter than for	ty-eight hours	after issuance	a of such orda	•	

Foo	d Esta	<u>blishment In</u>	<u>spect</u>	ion R	Report	Page	_ of
LHD Manchester		Inspection Report Continua	2411 54511 54			Date 7/3	1/24
Establishment MACCK	itcher	Town_M	and	geste		-	
		TEMPERATURE OF	•			Salt Beauty of the	
Item/Location/Process	Temp	Item/Location/Proces		Temp	Item/Loca	tion/Process	Temp
Pot. Salad	417	Comonthe				Ter	121F
Pork	38F	Kilbasa	158 -	-164F	Dishm	achine	71605
Plantains	40F	BBQ Kilbas	a 17	ar	Sanity	er Isted mar	400ppm
					7191	lowers	lightly
	OP	SERVATIONS AND CO	PRECTIV	E ACTIO	MC		
Number	report must be	e corrected within the time fran	nes below, or	r as stated i	n sections 8-405.	,A 50 860-86	
37c Mutiple	- CO(), lo	wies of spi	05/	7011	DO-TILEZ	Thorta	Berra.
48C Heat tests		required for			chine		
(Tie	at Inspec	with				
	\subseteq			э <u>`</u>			
CFPM on	site >	Discussed	vania	ے میں	ellowar	nces to	
	der	Discussed nations-HDp	t to f	ollow	-up	1 oreses	+ Keep
		7			_	IT O	reas
Tray (store	ige //	lust > rem)oved	to b	ecliá	red	1
Discussed	wires	lines over po	epa	sea.	/chipp	red hea	der induct)
	Jantes	are		/_		(00	ocace,)
2rd inspec	noite	where sanit	izer	is h	JAX CO	ncentra	tion.
· Ax	ljus+	where sanit Typoritor ed "Farm" u urs reported	O	500	1 /		
Discussed	L stor	ed "Farm" u	saste	+ 10	abetter	& rack	
No ILL tood	Lworke	us reported	1	14/17	3 used	(
							30LE/J.
							0091
Person in Charge (Signature)	**			7-3	31-24	Date	
Inspector (Signature))Tayl	re J				Date	Q

Risk Category: 4 Food Establishment Inspection Report Page 1 of 2												
Establishment type: Permanent Temporar		10110		Date: 7-18-24								
				Connectic	n 4.					- 12:		
Establishment Manchester Early	ceal ning		ASP OF		- Till	Tim	794	11:00 B	1	Out 12:0	00	AMIEW
Address 80 Waddell Rd.				7		LHE	o /V	lanchest	er			
Town/City Manchester						Pur	pose	of Inspection:	Routine	Pre-	-op	
Permit Holder Tyler Morfia		Co	of Pub	at Depar olic Heal	tment th	Rei	nspec	tion	Other			
FOODBORN	E ILLNESS RISK FA				_							
Risk factors are important practices or procedures idea Mark designated compliance status (IN, OUT, N/A					mplian						s or injury =not ob	
P=Priority item Pf=Priority foundation item C=Co		100000000000000000000000000000000000000		28.00		100 Table 200 Ta		t in compliance	N/A=not appli ted on-site during			A THE PARTY OF THE
IN QUT N/A N/O Superv		V		R		1			on from Contan		V	COS R
1 Person/Alternate Person in ch	arge present,	Pf	0		15 🕏			Food separated			P/C	00
demonstrates knowledge and	The state of the s	1.51		\exists \vdash	16 🕏	9			urfaces: cleaned		P/Pf/C	00
2 Certified Food Protection Man 3, & 4	ager for Classes 2,	С	0		17 00	0			on of returned, p tioned, and unsa		Р	00
Employee He								/ime/Tempera	ture Control for	Safety		
Management, food employee and knowledge, responsibilities an		P/Pf	0		18 O	00		roper cooking	time and temper	atures	_	00
4 Proper use of restriction and e		Р	0		19 0	0		Proper reneating	g procedures for time and tempera	not notding	P	00
5 Written procedures for respon		Pf			21 0				ing temperatures		P	
diarrheal events					22 🕏				ding temperature		P	
Good Hygienic P		e P/C	-		23 🐼	0			rking and dispos		P/Pf	00
7 No discharge from eyes, nose		C	00	위:	24 🔿	0		and records	c health control:	procedures	P/Pf/C	00
/ Preventing Contamina							1		umer Advisory			
8 W Hands clean and properly was		P/Pf	0		25 🔾	P	V		y provided: raw/unde		Pf	00
No bare hand contact with RT pre-approved alternative process		P/Pf/C	0		26				ceptible Popula		D/O	
10 Adequate handwashing sinks, pr		Pf/C	0	əH	20 00	7			used; prohibited foo		P/C	00
/ Approved So		1			27	00			approved and pr		Р	1010
11 D pood obtained from approved		P/Pf/C			28	0	THE REAL PROPERTY.		es properly ident		P/Pf/C	
12 O Food received at proper temp		P/Pf	-	\mathcal{O}	20 30	7	B. 3	stored & used			PIPIIC	,00
13 Food in good condition, safe, Required records available: m		P/Pf	0	의	-	/			th Approved Prohibition that the control of the con		-	
14 O O Required records available: m		P/Pf/C	0	O :	29	0			riteria/HACCP PI		P/Pf/C	00
		OD RE									THE S	THE
	re preventative measures to											
Mark OUT if numbered item is not in compliance OUT N/A N/O Safe Food and		n approp	_	R I	OUT	and/or F			on-site during insp e of Utensils	ection F	R=repea	t violation
30 Pasteurized eggs used where requi	and the same of th	P		Action 1			utensi	ls: properly stor			C	COS R
31 O Water and ice from approved source		P/Pf/C			_				erly stored, dried,	& handled	-	00
32 O Variance obtained for specialized p	rocessing methods	Pf	0		45 🔾	Single-	use/sin	gle-service article	es: properly stored	& used	P/C	00
Food Temperature					46 0	Gloves	sused	properly			С	00
Proper cooling methods used; aded temperature control	quate equipment for	Pf/C	0	\circ	_	Eggd a	and no		and Equipmen surfaces cleanab			
34 O O Plant food properly cooked for hot I	nolding	Pf	0	레'	47 🔾			gned, construct		ic,	P/Pf/C	00
35 O Approved thawing methods used			0		48 🔾				lled, maintained	and used;	Delo	
36 Thermometers provided and accura		Pf/C			307311				and test strips av	ailable	Pf/C	00
Food Identific 37 Food properly labeled; original container	ation	Dele			49 0	Non-fo	od cor	ntact surfaces c	4500000		С	00
Prevention of Food Co	ontamination	PI/C	0		50 0	Hot an	d cold		ical Facilities ; adequate press	ulto.	Dr	
38 Insects, rodents, and animals not present	ontammation	Pf/C	0					talled; proper ba		ure	Pf	00
Contamination prevented during food preparati	on, storage & display	P/Pf/C	0					waste water pro				00
40 Personal cleanliness		Pf/C	0						structed, supplied			00
41 Wiping cloths: properly used and stored		C	0						sposed; facilities r		С	00
42 Washing fruits and vegetables		P/Pf/C							naintained, and conting; designated			00
Permit Holder shall notify customers that a copy of the	most recent inspection repo	ort is ava	ilable.						iot used per CGS		С	00
Demos in Oham in: // /// AAA	X - 71	8- 2	U		/iolatio	ons do	cumer	nted	Date correc			#
Person in Charge (Signature)	Date 7-1	0. 2	-7			Item Vi					7	
Person in Charge (Printed) Taler Mov	fin					Founda em Viol		em Violations	1.7	2-10 2	7	4
1 00	. 7,		Λ	F	Risk Fa	actor/Pu	ıblic He	ealth Intervention	n Violations	D-18-2	4	6
Inspector (Signature)	Date 7-18	5-2	4	F	Repeat	Risk F	actor/F	Public Health Int	ervention Violati	ons		
Inspector (Printed) Jose Ram	icz							s Violations	. 16			
Appeal: The owner or operator of a food estab		nis orda	er to o	COLLEGE	tany	inepoor	ispect	lon - cneck bo	x if you intend to	reinspect	hold	dootro
or dispose of unsafe food, may a	ppeal such order to the	Directo	or of H	Health	n not I	later the	an fort	v-eight hours a	of by the 1000 ins	such order	noia, c	destroy,

	Foo	d Esta	blishment l	Insped	tion F	Report	Page 2 Date 7-18-	of_2
LHD MA	Inchester		Inspection Report Conti				Date 7-18-	24
Establishr	nent 80 Wadde	11 Rd. 4	earning town M	anchest	ec			
M. S. Fly			TEMPERATURE					
	/Location/Process	Temp	Item/Location/Pro	ocess	Temp		cation/Process	Temp
2 2000	· KIC					Hand Sin	K in kitchen	135F
	Soy Milk	40F				Quat bu	cket	200ppm
	lactaid	40F 38F						
	hu m mus							
	RIF break	Gam - 2 F						
MILK	coolec	1						
	MIK	40F						Temp Rite. 5
		00	CEDVATIONS AND	0000505	NIE 1071			Fecha Emp:Empleado
	Violations cited in this	report must be	SERVATIONS AND e corrected within the time	frames below	or as stated	In sections 8-40	5 11 & 8-406 11 of	PASS WHEN BLUE BAR TURNS ORANGE
Item Number	/ ~ /		4	mamoo bolow,	or do stated	300a0n3 0 400	7.11 G 0 400.11 01	AZUL CAMBIA A COLOR MARANIA
	EP IN IY	er on	site				-	100 F/71°C
Cute T	,							
39C	ice build u	e in mil	k confee					
	100 001100	(I.III	K COOLCI				111111111111111111111111111111111111111	
							(alterit	
Note	No Cooking of	conlina	at time of ins	Smalica	Lach	Social	incina in on	ali.
1)040	Diesall c	lean 2	g organized	Spection	. 1011011	serves ?	oring iliste	CTION.
			on food sa		cactic	<u> </u>		
Unto	Dedicated	(eg /a/	dented cans	in la	1 < 1	در		
Mode	1 day RI	E Nacl	ake out of	(1000)	1 Sjoia	ge.	col 11/1	1. 11:
1000	temo spri	lice of	heduled. Do no	JE 1/6	1101ء انلور	being 0.	XCO 1 14 0-1	ildaing
Derson in	Charge (Signature)	27/	100	01 056	י וונווע	TIXEC.	Date 7-18	274
	(Signature)	1						
napector	(Signatule)						Date 7-18-	29

_																5 1			
Ris	k C	ate	gory	: 4	1		Food Estab	lishn	nei	nt lı	nsp	ect	tior	Re	port	Page 1	of	_	
Es	tabl	ishi	nen	t typ	e: Pe	ermanent Temporar	ry Mobile Other						Da	ite:	7/29/	2 4			
Es	tabl	ishı	nen	t N	a	nchester R	ehabilitatio		40	eping Conn	ecticus He	iii.	Tir	ne In_	A	M/PM Time Out		AM	/PM
Ad	dre	ss	3	85	5	West Cen	terst		5	P	H		LH	ID /	Janch	ester			
То	wn/	City	9	2	an	chester							Pu	Purpose of Inspection: Routine Pre-op					
Pe	rmit	Но	lder						of	eticut De Public I	lealth		10,000	inspe		Other			
						FOODBORN	IE ILLNESS RISK F	ACTO	RS	AN	D P	JBL	LIC I	HEAL	TH INTERVE	ENTIONS			
		Risk	facto	ors ar	e import	ant practices or procedures ide	entified as the most prevalent con	tributing fa	ctors	s of foo	dborne	Mnes:	s or inj	ury. Inte	rventions are contro	I measures to prevent foodborne illi	ess or injury	<i>'</i> .	
	Ma	rk de	esign	ated	compli	ance status (IN, OUT, N/A	A, N/O) for each numbered	item		IN=in	comp	lianc	e	OUT=n	ot in compliance	N/A=not applicable N	I/O=not ob	serv	ed
P	Pric	ority i	tem	Pf	=Priorit	y foundation item C=Co	ore item V=violation type	Mark in	app	propria	ate bo	x for	cos	and/or	R COS=correc	ted on-site during inspection	R=repea	t viol	ation
	IN	OUT	N/A	N/O		Superv	vision	V	co	SR	18	IN	оит	N/A N/C	Protecti	on from Contamination	V	cos	R
					Perso	n/Alternate Person in cl	harge present,				15				Food separated		P/C	0	0
1	0	0	0			nstrates knowledge and		Pf		0			•			urfaces: cleaned & sanitize			
_	_			MI		ed Food Protection Mar										on of returned, previously	1	2000	
2	0	0	C		3, & 4			С		0	17		0			tioned, and unsafe food	P		0
						Employee He	ealth	I STEEL							Time/Tempera	ture Control for Safety			
3	0				Manag	gement, food employee ar	nd conditional employee;	D/Df			18	0	0	00	Proper cooking	time and temperatures	P/Pf/C	0	0
3	\cup	0	100		knowl	edge, responsibilities ar	nd reporting	P/Pf	C	0	19	0	0	00	Proper reheatin	g procedures for hot holdin	g P	0	0
4	0	0				r use of restriction and		P	C	0	20	0	0	00	Proper cooling	time and temperatures		0	0
5	0				Writte	n procedures for respon	nding to vomiting and	Pf		0						ing temperatures	P	0	0
<u> </u>	$\stackrel{\smile}{-}$		180	A.Y.	diarrh	eal events		FI								ding temperatures -	P	0	0
						Good Hygienic P					23	0	0	00		rking and disposition	P/Pf	0	0
_	0	0	100				g, or tobacco products us		C	0	24	0	0	00	Time as a publi	c health control: procedure	P/Pf/C	0	0
7	0	0		0		scharge from eyes, nose		C	C	0	2.4				and records		FIFIIC		
			THE COLUMN			Preventing Contamina		- 4							Const	umer Advisory			
8	0	0		0	-	s clean and properly wa	The state of the s	P/Pf	C	0	25	0	0	0		y provided; raw/undercooked foo	d Pf	0	0
9	0		10	0		re hand contact with RT		P/Pf/C	C	0					Highly Sus	ceptible Population			
- 22	105-0	3375					cedure properly followed	100000000000000000000000000000000000000			26	0	0	0		used; prohibited foods not offere			0
10	0	0		114	Adequ		roperly supplied/accessible	Pf/C		0					od/Color Additi	ves and Toxic Substance	5		
	_		-	-		Approved Sc					27	0	0		Food additives:	approved and properly use	d P	0	0
	0	0		ļi,	Food	obtained from approved	source	P/Pf/C	-	0	28		0			es properly identified,	P/Pf/C		
	0			0	Food	received at proper temp	perature	P/Pf	-	C					stored & used		177 170		
	0	0	530	1000		in good condition, safe,		P/Pf	C	0					Conformance wi	th Approved Procedures			
14	0	0	0	0		red records available: n fication, parasite destru		P/Pf/C	C	0	29	0	0	0		h variance/specialized	P/Pf/C	0	0
	-	-	-	-	ideriti	ication, parasite destruc		OD RE	TA	II DE	2007	ICE	-	1000	process/ROP c	riteria/HACCP Plan	5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -	1	
	_					Good Potail Practices	are preventative measures								inala and abusin	Labia da lata fa a da			
	Mar	01	T if	numh	orod it	em is not in compliance		in appro											
_	_	N/A		Idillo	ered it	Safe Food and		T appro	-	S R			nu/or	K		on-site during inspection	R=repea	_	
	0	NA	Marin Street	Paet	auriza	d eggs used where requ	Contract of the Contract of th	P	100000	0	-	TUC	In un	0.11000	sils: properly stor	e of Utensils	V		R
-	0	-				ice from approved sour		P/Pf/C	-	0						perly stored, dried, & handled	C Pf/C		_
_	ō	0				btained for specialized		Pf	-	0	45		Single	-use/si	nale-service article	es: properly stored & used	P/C		00
						Food Temperatur			_	10	46	0	Glove	25 1150	d properly	o. property stored & used		0	
				Prop		ling methods used; ade				T	10		01010	20 4000		and Equipment		10	19
33	0					e control	4	Pf/C	C	0	2000	T	Food	and no		surfaces cleanable,			T =
34	0	0				properly cooked for hot	holding	Pf	-	0	47				signed, construct		P/Pf/C	0	0
						hawing methods used				0						lled, maintained and used:	-	-	+
	0	800				ters provided and accur	ate			0	48					and test strips available	Pf/C	0	0
						Food Identific	tentage			0,100	49				ntact surfaces cl		0	0	0
37	0	Foo	d pr	oper	y labe	led; original container		Pf/C	0	0		-1.				ical Facilities			
			115			Prevention of Food C	ontamination				50	01	Hot a	nd cold		: adequate pressure	Pf	0	0
38	0	Inse	ects,	rode	nts, a	nd animals not present		Pf/C		00		-			stalled; proper ba		P/Pf/C		
39	0	Con	tami	natio	preve	ented during food preparat	tion, storage & display	P/Pf/C							waste water pro		P/Pf/C		
40	0	Per	sona	l cle	anline	SS				0						structed, supplied, & clean	Pf/C		
41	0	Wip	ing o	cloth	s: prop	erly used and stored		С	_	0						sposed; facilities maintained	С		Ö
42	0	Wa	shing	g frui	ts and	vegetables		P/Pf/C	C	0						naintained, and clean	P/Pf/C		
F	erm	it Ho	lder s	hall	notify c	ustomers that a copy of th	e most recent inspection rep	ort is ava	ilab	ile.	56	0	Adeq	uate ve	entilation and ligh	nting; designated areas use	d C		0
W. T.	_	-				1		,		20				ocume		not used per CGS §19a-36f		44	
Per	sor	in	Cha	ge (Signa	ture)	Date 7/	29/	24	1				/iolatio		Date corrections due		5-	
				J- (-10	~_/						Item Violations			# 0	
Pe	sor	in	Chai	ge (Printe	d) Stephan	il lastaxi	5						olations		900000	3	21	
					_			1	_						lealth Intervention	n Violations	9	1	
Ins	pec	tor (Sign	natui	e) /	Jenise Ta	un Date 7/a	29/2	رلا		Rep	eat I	Risk	Factor/	Public Health Int	ervention Violations	-	0	\neg
					~	7) - '/								es Violations		5	*	\neg
				ted)		enisetaune					Red	uire	s Re	inspec	ction - check box	x if you intend to reinspec		,	
Ar	pea	al: T	he o	owne	er or o	perator of a food estab	olishment aggrieved by t	his orde	er to	corr	ect a	ny ir	nspec	ction v	iolation identifie	d by the food inspector or	to hold	dest	roy.
				or d	spose	of unsafe food may	appeal such order to the	Directo	or o	f Hea	Ith n	of la	ter th	nan for	ty-pight hours	offer issuance of such order		1000000	and the second

FUC	ou Establisilliel	it inspection	Report Pa	age or
LHD Manchester		t Continuation Sheet	Date	7/29/24
Establishment Manches	or Rehabilitation own	Marchester		, ,
	TEMPERAT	URE OBSERVATIONS		
Item/Location/Process	Temp Item/Location	on/Process Temp	Item/Location/Pro	ocess , Temp
Lact. Milk	38F Rice Pilog	203F	HOT Wate	Litchen 120F
		7,007	To war	3/14/1/
Clam chowder	39F			
			Quat buc	Ket \$00ppm
Cheese Sliced	40F			
Hamburges	40F			
Whipped Spread	39 F			
1 1 1 2				
Tomato	36F			
Violations sited in thi		AND CORRECTIVE ACT		
itom	s report must be corrected within the	e time frames below, or as stated	d in sections 8-405.11 & 8-4	06.11 of the food code.
Number CFPm : 00	site V			
	07.70			
49c Floors behi	2 - 1 0 - 2 11 - 6	V.C. 2		
THE PLOOIS DEN	usa Agru + Cool	Line unclean		
10 C Unclear co	sopener Wilder	/hamle		
160 Unclean co	in openes blad	0		
	I.			
		A		
tots + Par	s build-up 1	luch better		
	1		D- 1-1.	101 Ch 11-1
Include c	loors in MAINT	cleaning school	raintchipping on	1 Side Stainless H
Discusses	d adding man	and last van	- clean d. 1	المن المناه
0.360360	adding more:	space befuse	n characan	es in aish
Vack	s so not storer	Lunder 10011	munted Da	pestowel
10:-1-> 11	nit - cardboa	1		11
Window u	vii = carapa	sa toreyhau	st. > Should k	x cleanable
Discussed	ill tood worker	r Maria		Material
			Lasta	
	forms 1A	+1B *1N	whire	
Discussed	date marking	(also and)	1	~
Discussed	Cate your	(Observed)	date cut/mad	e uson product
1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Discussed	pest control > r	each out to	plumbers ab	out cleaning
11125	her treat them	rioi jusi ilap	<u>~</u> .	
				, <u>=</u> ,
1		0.4	1 0 0000	0 1 5 - 2 - 2 - 1
bisha penia	e monitor replace	ra machine no	TON -CHAN	ושטייטיטיטן
	Check.			
(GI)	N 2			1 1
Person in Charge (Signature)			Date	7/29/24
	7.)		Date	1/1/
Inspector (Signature)	puse Tayle		Date	7/29/24



Manchester Health Department 479 Main Street Manchester, CT 06040

Establishment: Date of Inspection:
Market on Main St - Pre Op. (Lic. on hold) 7-22-24
New menu - Not bores head product Bogness new source
pread-Stranus
Discussed 7 days max on RIE TES foods - exemptions
on some choose/meants.
Discussed Oty purchased to use in 7 days
Send spec sheets for new equipment New coffee unit replacing Burn
New coffee unit repacing Burn
Deli > 10-5pm M-Sat
Discussed labeling torgrab-n-go's (Avery label's)
Discussed labeling forgrab-n-go's Avery label's Discussed motor coverfor Deli case (Radiator coversaemetal) Floors next to counter undean
Counter tops doors anipped
Hallow stirres notallowed
Tea container - interior unclean
I door cabinet missing FRP - Shelf integapat floor
Cynats / Fry in camter area
Allergen sign-send NewCopy
Initial (Inspector) Initial (Person in Charge)

								2
Risk Category: Food Establi	ishm	nent	Insp	oec	tion R	eport	Page 1 o	f
Establishment type: Permanent Temporary Mobile Other					Date:	7/22/	24	
Establishment Market on Main	Time In					nA	AM/PM Time Out	AM/PM
Address 793 Main St		OP	H		LHD Y	Manche		
Town/City Marchester	Co		Donartm	ont		se of Inspection		1 1 1 4
Permit Holder		onnecticut of Public	Health		17	ection	Other 'LIC was	ontola
FOODBORNE ILLNESS RISK FA	417 74 20 10	1000		7.70	150-157	No. of the second secon	ALCOHOL STATE OF THE STATE OF T	
Risk factors are important practices or procedures identified as the most prevalent contri								
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it P=Priority item Pf=Priority foundation item C=Core item V=violation type			in com			=not in compliance		D=not observed R=repeat violation
IN OUT N/A N/O Supervision	V	cos R		1	OUT N/A N		ion from Contamination	v cos R
Person/Alternate Person in charge present,	1000	000 1				Food separated		P/C 0 0
demonstrates knowledge and performs duties	Pf	00)				urfaces: cleaned & sanitized	P/Pf/C O O
Certified Food Protection Manager for Classes 2					1000	The second secon	ion of returned, previously	
2 O O O 3, & 4	С	00) 17	0	0	The state of the s	itioned, and unsafe food	POO
Employee Health				in and		Time/Tempera	ture Control for Safety	
Management, food employee and conditional employee;	P/Pf	00	18	0			time and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting			19				ng procedures for hot holding	POO
4 O O Proper use of restriction and exclusion	P	00		0			time and temperatures	POO
5 Written procedures for responding to vomiting and	Pf	00)			Proper hot hold		POO
diarrneal events			_ 22	-			lding temperatures	POO
Good Hygienic Practices	- T D/O		_	0	000		arking and disposition	P/Pf O O
6 O Proper eating, tasting, drinking, or tobacco products use		00		0	000		ic health control: procedures	P/Pf/C O
7 O No discharge from eyes, nose, and mouth Preventing Contamination by Hands		100	4	H		and records	umar Advisam	
8	P/Pf	00	25	0	00		umer Advisory ry provided: raw/undercooked food	Pf OO
No hare hand contact with RTE food or a	-		20		0 0		sceptible Population	111 00
9 pre-approved alternative procedure properly followed	P/Pf/C	0	26	101	00		used; prohibited foods not offered	P/C 00
10 O Adequate handwashing sinks, properly supplied/accessible	Pf/C	00					ives and Toxic Substances	1.70 0 0
Approved Source		-		0	00		approved and properly used	POO
11 O Food obtained from approved source	P/Pf/C	00	7		000 000		es properly identified,	
12 O O Food received at proper temperature		00		0	00	stored & used	F F 7	P/Pf/C O
13 O Food in good condition, safe, and unadulterated	P/Pf	00					ith Approved Procedures	
Required records available: molluscan shellfish	P/Pf/C	00	29	0	00		th variance/specialized	P/Pf/C
identification, parasite destruction					- 1	process/ROP o	riteria/HACCP Plan	
	20100-0000	TAIL		SALENEY SEA				
Good Retail Practices are preventative measures to					-			Danis and initiation
	v		11	-	and/or R			R=repeat violation
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	P	COS F		OUT	In uso uto	ensils: properly sto	se of Utensils	V COS R
31 Water and ice from approved source	P/Pf/C						perly stored, dried, & handled	Pf/C O O
32 O Variance obtained for specialized processing methods	Pf	0					les: properly stored & used	P/C 0 0
Food Temperature Control		10.10				sed properly	co. properly stored a deed	c 0 0
Proper cooling methods used: adequate equipment for	7,000						s and Equipment	
temperature control	Pf/C	0			Food and		surfaces cleanable,	DIDITO O
34 O O Plant food properly cooked for hot holding	Pf	00	5 41	0	properly d	lesigned, construc	ted, and used	P/Pf/C O
35 O Approved thawing methods used	Pf/C	00	5	3	Warewas	hing facilities: insta	alled, maintained and used;	PIC DO
36 C Thermometers provided and accurate	Pf/C	0	5 40		cleaning a	agents, sanitizers,	and test strips available	P(IC O O
Food Identification					Non-food	contact surfaces of	clean	(6)00
37 C Food properly labeled; original container	Pf/C	0					sical Facilities	
Prevention of Food Contamination		1	50				e; adequate pressure	Pf O O
38 Insects, rodents, and animals not present						installed; proper b		P/Pf/C O O
39 Contamination prevented during food preparation, storage & display		00		_		and waste water pr		P/Pf/C O
40 Personal cleanliness 41 Wiping cloths: properly used and stored		00					structed, supplied, & clean	Pf/C O O
42 Wiping cloths, properly used and stored	C	00					disposed; facilities maintained	C 0 0
42 Vashing Iruits and vegetables	P/PI/C	1010					maintained, and clean hting; designated areas used	P/P(C) O
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is av	ailable.	30	-			not used per CGS §19a-36f	
(/- 1			Vi		ons docur		Date corrections due	#
Person in Charge (Signature) Date Date	123	2/70			Item Viola		Date corrections due	\$
	1	1.				n Item Violations		
Person in Charge (Printed) Sabine Kawnan	idy	2.			em Violatio			4
		1				c Health Interventi		\$
Inspector (Signature) Jenustayne Date 7/2	79	٦					tervention Violations	
Inapactor (Brinted) Do 160 Do	1					tices Violations		4
Inspector (Printed) Denise Parne	ala I		[Re	equir	es Keinsp	ection - check bo	ox if you intend to reinspect	a hald do to
Appeal: The owner or operator of a food establishment aggrieved by the	Direct	or of L	orrect	any i	inspection	forty-eight hours	ed by the food inspector or t	o noia, destroy,

Food Esta	ablishment Inspectio	n Report P	age 2 of 2
LHD Manchester	Inspection Report Continuation Sheet	Date_	7-22-24
Establishment Marketon Marketon	in Town Marcheste		Si .
	TEMPERATURE OBSERVATION		
Item/Location/Process Temp	Item/Location/Process Te	mp Item/Location/Pr	rocess Temp
Pre-operational		1101 water	121
after being closed	u HOLD"	Delican	35 _F
W C Baing Croscer	1,000		
	BSERVATIONS AND CORRECTIVE And corrected within the time frames below, or as		406.11 of the food code.
Number			3.000
48C 3 Baysink-no	COULL OF FRD		
38c anat present	Cattle Control		
Joe Mar present			
Hac Pro Cariol	1	T Proprie	
Fra Wall - 190	ers - holder uncluded at cleaning painting		
550 Walls - addition	al Cleaning/painting	y needed	
	J ·	7 0	
maleial - india	polar should be use	aball	
mais - mais	play should be wa	anash	
	J		
30 day inspection	n Keguered		
- 1	1		
		-	
0	0		
Porcen in Charge (Circutture)	lite	■ 23.00	07/22/2029
Person in Charge (Signature)	vuu.	Date	7 20 01
Inspector (Signature)	me -	Date	10204

Risk Category: 2 Food Establ	ishn	nen	t In	snecti	on Ren	ort	Page 1 c	of 2
Establishment type: Permanent Temporary Mobile Other		1011		.opcou	<u> </u>	1/2/24		
20 - 11			Connec	cticus	Date:	4-1		
Establishment (V) C Donald S		Weedin'		The state of the s	Time In	11:30 AN	DPM Time Out 12	:30 AM/PM
Address (44 Deming St.			P	H)	LHD M	anchest	er	
Town/City Manchester					Purpose o	of Inspection:	Routine Pro	e-op
Permit Holder Lovenza Morales		of Pu	iblic He		Reinspect		Other	
FOODBORNE ILLNESS RISK FA Risk factors are important practices or procedures identified as the most prevalent conti								
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it		700		compliance	The same from the con-	in compliance	The second secon	Ss or injury. O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appr	opria	te box for Co	OS and/or R	COS=correcte	d on-site during inspection	R=repeat violation
IN OUT N/A N/O Supervision	٧	cos	R		OT N/A N/O		n from Contamination	V COS R
Person/Alternate Person in charge present,	Pf	0	0	15 0	-	ood separated a	The state of the s	P/C 0 0
Certified Food Protection Manager for Classes 2	-			16 0	THE REAL PROPERTY.		faces: cleaned & sanitized n of returned, previously	P/Pf/C O O
2 V O 3, & 4	С	0	0	17 🐼 🤇		: 10명 및 전 :	oned, and unsafe food	POO
Employee Health				/			ire Control for Safety	
Management, food employee and conditional employee;	P/Pf	0		18 🗷 🔾		Proper cooking ti	me and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting Proper use of restriction and exclusion	Р	0				Proper reheating	procedures for hot holding me and temperatures	
Written procedures for responding to vemiting and	701951			21 0	200	Proper hot holdin	ne and temperatures	P 0 0
diarrheal events	Pf		0	22 0	500 F	Proper cold holdi	ng temperatures	P 0 0
Good Hygienic Practices				23 8 9	Ø O O F	Proper date mark	king and disposition	P/Pf O O
6 Proper eating, tasting, drinking, or tobacco products use 7 No discharge from eyes, nose, and mouth		0		24 00 0			health control: procedures	P/Pf/C O O
7 No discharge from eyes, nose, and mouth Preventing Contamination by Hands	С	0	0			and records		1,,,,,,,
8 9 Hands clean and properly washed	P/Pf	0		25 0 0			mer Advisory provided: raw/undercooked food	Pf 0 0
No hare hand contact with RTE food or a		102.00	1,000	20 0 0			eptible Population	11100
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0 0	D & F	asteurized foods us	sed; prohibited foods not offered	P/C 00
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0				es and Toxic Substances	
Approved Source		Jun -		27 0 9	of of F	ood additives: a	approved and properly used	POO
11 Ø 560d obtained from approved source	P/Pf/C			28 🐼 🔾			s properly identified,	P/Pf/C O O
11 6 5 5 6 od obtained from approved source 12 6 7 Food received at proper temperature 13 7 Food in good condition, safe, and unadulterated	P/Pf P/Pf	_	_			stored & used		11111000
Peguired records available: mallugger aballfigh					/		Approved Procedures variance/specialized	
identification, parasite destruction	P/Pf/C	0	0	29 0			eria/HACCP Plan	P/Pf/C O
GOO	OD RE	TAIL	- PR	ACTICES				
Good Retail Practices are preventative measures to								
				for COS and	d/or R		n-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	V P	cos		OUT In	una utanail	Proper Use s: properly stored		V COS R
31 Water and ice from approved source	P/Pf/C	_	-				rly stored, dried, & handled	C 0 0
32 O Variance obtained for specialized processing methods	Pf		0				: properly stored & used	P/C 0 0
Food Temperature Control					oves used			000
Proper cooling methods used; adequate equipment for	Pf/C	0					and Equipment	
temperature control Plant food properly cooked for hot holding							rfaces cleanable,	P/Pf/C O O
35 O Approved thawing methods used	Pf	00				ned, constructed	d, and used ed, maintained and used;	
36 Thermometers provided and accurate	Pf/C	0					ed, maintained and used; nd test strips available	Pf/C O O
Food Identification	1, ,,,					tact surfaces cle		000
37 O Food properly labeled; original container	Pf/C	0	0			Physic	al Facilities	10,1-10
Prevention of Food Contamination		, ,					adequate pressure	Pf O O
38 Insects, rodents, and animals not present	Pf/C	0		51 O Plu	umbing inst	alled; proper bac	ckflow devices	P/Pf/C O O
Contamination prevented during food preparation, storage & display Personal cleanliness	P/PIC	0		52 O Se	ewage and v	vaste water prop	ructed, supplied, & clean	P/Pf/C O O
41 Wiping cloths: properly used and stored	C	0		54 O Ga	arbage and re	s. property consti	posed; facilities maintained	Pf/C O O
42 Washing fruits and vegetables	P/Pf/C			55 O Ph	nysical facili	ties installed, ma	aintained, and clean	P/Pf/C O O
Permit Holder shall notify customers that a copy of the most recent increasing regulation and lighting; designated areas used C O								
A	1	mar sursers		Violeti-	atural rubbe	r latex gloves no	t used per CGS §19a-36f	
Person in Charge (Signature) Date 7	2/2	120	4		m Violation		Date corrections due	#
	1		1			em Violations		8
Person in Charge (Printed) Lorenza Morales	١			Core Item	Violations		10/2/29	4
Inspector (Signature)						alth Intervention		
Date Date		-	-		sk Factor/P ail Practices		rvention Violations	(1
Inspector (Printed) Jose Kamilez				Requires	Reinspecti	on - check box	if you intend to reinspect	1 1
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to	corre	ect any ins	pection vio	lation identified	by the food inspector or t	o hold, destroy
or dispose of unsafe food, may appeal such order to the	Directo	or of	Heal	lth, not late	er than forty	-eight hours aft	er issuance of such orde	

Food Establishment Inspection Report

Inspection Report Continuation Sheet

Page 2 of 2

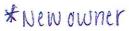
Date 7-2-24 LHD Manchester Establishment McDonalds - Deming St. Town Manchester

		TEMPERA	TURE OBSERV	ATIONS		
Item/Location/Process	Temp	2 1 1	ation/Process	Temp	Item/Location/Process	Temp
Cold prep table drive tho	A1 :		ed tomataes	39F	Hand Sink by drivethe	100F
Sliced cheese		1 12	tar sauce	41F	Quat Bucket	150ppm
2 door KIC burrito	39F		w burger	39F	3 Bay Quat	150 ppm
5 liced tomatoes	41F	6000 R		71-	Dish machine chlorine	lodgem
Cold Scaver liquidegg		2111	Creamer	36F	Customer BR SINK	105 F
I can burger	40F	300	cags	39 F		
Hot, Hold Chicken	130F	Burger c	ooked to	2004		
+13h	160F	SEDVATIONS	S AND CORREC	TIVE ACTIO	DAIC	Europa de la composición dela composición de la composición dela composición de la c
Item Violations cited in this					in sections 8-405.11 & 8-406.11 of the f	ood code.
Number Corenza Cf	PM m	Sito				
01.	11 011	0110				
10 -1	. []		11	7		
490 Interior of				onclean		
49c Hood trim o	vec gri	11 uncle	an			
390 Ice Build	upin	WF				
39c Ice Build 94c Wet nesting	of hot	- holding	travs			
)			
				9		
				-1117		
.)	9			98V		
Note Monitor Frage	cooler	cooler	must be	291F.	If over 41F, ha	ve
it serviced	and	do not u	se until	fixed.		
Note Sanitizer d	Spensin	19 Quat	at 150 p	om. Dis	scussed monitoring	
concentration	· ·		1		' ' '	
Note Time as a	control	useda	+ burger 5	tation I	or tomatoes, cheese.	
Note Test strips	& the	(Maneter	quailable		01 101 101 100 1 01 1000	
					pment. Grill press	-
cleaned eve				in cypi	111011, 91111 PICSS	
	<u> </u>	()	N A	-1-5	2/2	10000
Person in Charge (Signature)		orare	1 1 1000	-112	Date $\frac{7}{2}$	12024
Inspector (Signature)	- /_	フ -			Date	8

Risk Category: Food Establ	ishn	nent	Ins	spec	ctio	n Rep	ort Page 1 o	f_2_		
Establishment type: Permanent Temporary Mobile Other					-	ate:	10/24/24			
Establishment McDonalds		+sering !	connectic	ut Health	Т	ime In_	AM/PM Time Out_	AM/PM		
Address 70 West Center St	DPH)					LHD Manchester				
Town/City Manchester		onnecticu	rt Depar	Purpose of Inspection: Routine Pre-op						
Permit Holder		of Pub	lic Heal	th		einspe				
FOODBORNE ILLNESS RISK FA Risk factors are important practices or procedures identified as the most prevalent conti								no ne inium.		
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				mplian				D=not observed		
P=Priority item Pf=Priority foundation item C=Core item V=violation type								R=repeat violation		
IN OUT N/A N/O Supervision	V	cos			-	N/A N/O		V COS R		
Person/Alternate Person in charge present,	Pf	0	0 -		-		Food separated and protected	P/C 0 0		
demonstrates knowledge and performs duties Certified Food Protection Manager for Classes 2,	-			16 🔾		0	Food-contact surfaces: cleaned & sanitized Proper disposition of returned, previously	P/P(IC)OO		
2 O O Certified Food Flotection Manager for Classes 2,	С	0	$ \cdot $	17 0	0		served, reconditioned, and unsafe food	POO		
Employee Health				19.60			Time/Temperature Control for Safety			
Management, food employee and conditional employee;	P/Pf	0					Proper cooking time and temperatures	P/Pf/C O O		
knowledge, responsibilities and reporting Proper use of restriction and exclusion	P	0					Proper reheating procedures for hot holding Proper cooling time and temperatures	P O O		
5 Written procedures for responding to vomiting and							Proper hot holding temperatures	P 0 0		
diarrneal events	Pf						Proper cold holding temperatures	POO		
Good Hygienic Practices 6 Proper eating, tasting, drinking, or tobacco products us	e P/C		\neg		III Common		Proper date marking and disposition	P/Pf O O		
7 O No discharge from eyes, nose, and mouth	C	00		24 🔘	0	00	Time as a public health control: procedures and records	P/Pf/C O		
Preventing Contamination by Hands							Consumer Advisory	Della Belgista		
8 O Hands clean and properly washed	P/Pf	f 0		25 🔾	0	0	Consumer advisory provided: raw/undercooked food	Pf OO		
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C			2010			Highly Susceptible Population	15/0 6 6		
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0		26 🔾	10		Pasteurized foods used; prohibited foods not offered od/Color Additives and Toxic Substances	P/C O O		
Approved Source	1.170	101		27 0	10	0	Food additives: approved and properly used	POO		
11 O Food obtained from approved source	P/Pf/C	0		28 🔾		0	Toxic substances properly identified,	ALGORITHM OF THE SECTION OF THE SECT		
12 O O Food received at proper temperature		00	2	20 0	1		stored & used	P/Pf/C O		
13 O Food in good condition, safe, and unadulterated Required records available: molluscan shellfish		f 0 0				С	Compliance with Approved Procedures Compliance with variance/specialized			
14 C C Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0) :	29 🔾	0	0	process/ROP criteria/HACCP Plan	P/Pf/C O		
	OD RE					DELTH!				
Good Retail Practices are preventative measures to										
Mark OUT if numbered item is not in compliance V=violation type Mark i OUT N/A N/O Safe Food and Water	n appro	cos	-	OUT		or R		R=repeat violation		
30 Pasteurized eggs used where required	P	0	200		-	se utens	Proper Use of Utensils ils: properly stored	V COS R		
31 O Water and ice from approved source	P/Pf/C						oment/linens: properly stored, dried, & handled	Pf/C O O		
32 O Variance obtained for specialized processing methods	Pf	0		45	Sing	le-use/sir	ngle-service articles: properly stored & used	P(C)00		
Food Temperature Control Proper cooling methods used; adequate equipment for				46 🔾	Glo	ves used	properly	C O O		
temperature control	Pf/C	0	$\supset \mid \mid -$		Foo	d and no	Utensils and Equipment on-food contact surfaces cleanable,			
34 O Plant food properly cooked for hot holding	Pf	0	<u> </u>	47 🔾)		igned, constructed, and used	P/Pf/C		
35 O Approved thawing methods used				48 🔾	Wa	rewashin	g facilities: installed, maintained and used;	Pf/C O O		
Thermometers provided and accurate	Pf/C				clea	ining age	ents, sanitizers, and test strips available			
Food Identification 37 Food properly labeled; original container	Pf/C			49	Nor	1-TOOG CO	ntact surfaces clean Physical Facilities	(0)0		
Prevention of Food Contamination	1 1/0	10.10		50 0	Hot	and cold	I water available; adequate pressure	_ Pf O O		
38 Insects, rodents, and animals not present	Pf/C						stalled; proper backflow devices	PECOO		
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness		0	_				waste water properly disposed	P/Pf/C O O		
41 Wiping cloths: properly used and stored	C Pt/C	000	-				es: properly constructed, supplied, & clean refuse properly disposed; facilities maintained	Pf/C O O		
42 Washing fruits and vegetables		0					ilities installed, maintained, and clean	C O O		
Permit Holder shall notify customers that a copy of the most recent inspection repo		V		56	Ade	quate ve	entilation and lighting; designated areas used			
	\ _	anabie.				ural rubb	er latex gloves not used per CGS §19a-36f nted	#		
Person in Charge (Signature) Hina Hieshate 60	3/2	3/12	JY F	riority	lten	Violatio	ns ASAP (3days)			
Person in Charge (Printed) Hina Lyen	1	1	F	riority	Fou	ndation I	tem Violations ASAP 10days	4		
The state of the s	T	. 1				iolations/ Public H	lealth Intervention Violations			
Inspector (Signature) Jenuse Tayne Date ()	1 PK	4	F	Repeat	t Ris	Factor/	Public Aealth Intervention Violations			
Spector (Printed) Program Good Retail Practices Violations Requires Reinspection Check box if you intend to reinspect										
Appeal: The owner or operator of a food establishment aggrieved by the	his ord	ertoo	orrec	requir	ines	ection wi	tion check box if you intend to reinspect	o hold doctor		
or dispose of unsafe food, may appeal such order to the	Direct	or of H	lealth	n, not	later	than for	ty-sight hours after issuance of such order	r		

All note on page 2 dpayne@marchestercT.gov 2nd-Yellow: Owner/Operator/Person in Charge

FOOU Establishment inspection Report Page 5 of 5											
LHD Mancheste		Inspection Report Continuation	Sheet	Date	1/24						
Establishment McDon	alds	Town_Max	chester								
		TEMPERATURE OBSE	RVATIONS								
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp						
Tomato	39F	Chicken Breast	147F	Chloine	100000						
Shelledeggs	37F	Chicken Nuggot	154F	- Constant	100ppm.						
Milkdispenser	40F			Greviewedqui	CV Charle						
Essision		Hamburger Waru	2000 (2000)								
Eggs in WIC	32F	- Hambury	1435	don't Swirl +	621214 B.						
Milk Confairer	AIFX										
		Cooked burger	161F								
		U									
Violations cited in the	O roport must l	BSERVATIONS AND CORR	ECTIVE ACTIO	DNS							
		be corrected within the time frames t	below, or as stated	in sections 8-405.11 & 8-406.11 of th	e food code.						
Number CFPM on Si	te										
mat. and	11000		, , , , n	(0/0-11)							
Delle I fark	25,9 X	Inevs Temp ~	arked	(Ubserved)	W.						
···		Α.			173						
51PF Hot water 1			1 21	= 01 - 125 EF (CO!	rection						
THE HOT Water I	reates	just repaired. +	for wate	284-108.8	1115						
Maynte	sara-	o Return this da	u. Mana	eger to Monitor le	moeratu						
) tify	health Bept a	n 6/28/	24 Temp Range	<u>-</u>						
51P Spray fauc	to We a	3 Bay - Extern	lainto sic	V Requires 3-4	aso 1						
491 00.4				7	7						
49C gaskets go	enerall	yurdear.									
lec Interior ic	e na	chire shell d.	1001000								
450		1 / 1-1	1	1							
45c Filters n	10T COV	vered/protected	i .								
Mec Pansin st	scace	4001000									
49.	10 11 11	1'	9 323	. 140							
49c Sugar sp	111 +14	ARD under su	gar disp	erser, Unclear							
49c McCalle	ni tion	terior with soi	119	clean.							
400	1 - 1 >	The second second	1.5 , w	/ Sincuse							
49c McCayle 1 49c Dessert.	STAUTION	n war puny	20 und	ear/coversuncle	195017COL						
Disa		1		\sim \sim	A A						
Br scussea	- 1emp	os of cooking/h	ot holdu	g, Reconcid	_ IV\anag						
to asiL	shali	open ended q	un Airon	Decinal Land	_ '						
C 1	(16	yes erace q	WE 23 (10103	pe rourang							
Moor drain	cores	not secured at	سارح								
				bull was a but	the man						
		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	in the	. July cooked but	. 197						
not po	rected	. Covered this	day,	0 .							
Batter de	ad at	-dove thru sin	Kandin A	icisense							
1 1 1	- 11	المراجعة الم	- surpa								
mont IIII	sook s	slightlywarn - r	NOUTON.								
		NO 0	i								
•	١ ١										
Person in Charge (Signature)	-	Lucs'		Date							
Inspector (Signature)	Y	· Pa		1	1/24						
, (g.:u.u.u)	/ V // L A	~ \ (111AA \		Hate Id 1-1-							



1st - White: Health Department

Risk Category: 2 Food Estab	2 - Control of the co										
Establishment type: Permanent Temporary Mobile Other					Date:	1/10/202	4				
Establishment Mine's p1270		Leeping	Connec	cticut Health	Time In	10 3	PM Time Out	AM/PM			
Address 267 E. Cen'ter St		DI		H)	LHD /	nanchesi	tr_				
Town/City Manchester					Purpose	e of Inspection:	Routine Pr	e-op			
Permit Holder Ali Kirca - changing owners	1			partment paith	Reinspe		Other				
FOODBORNE ILLNESS RISK F	ACTO	RS A	ANI	D PUBLI	C HEAL	LTH INTERVEN	ITIONS				
Risk factors are important practices or procedures identified as the most prevalent con	tributing fa	actors of	f food	lborne illness d	or injury. Int e	erventions are control me	easures to prevent foodborne illne	ess or injury.			
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered in	item	IN	l=in d	compliance	OUT=r	not in compliance	N/A=not applicable N/	O=not observed			
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appro	pria	te box for C	OS and/or	R COS=corrected	on-site during inspection				
IN OUT N/A N/O Supervision	V	Lanca Control	R	TT	UT N/A N/O	7	from Contamination	_v cos R			
Parsan/Altarnata Parsan in abarga propert		000									
	Pf	0	\circ	(15)00		Food separated as		(P/C X O			
demonstrates knowledge and performs duties				16 0	20	Food-contact surfa	aces: cleaned & sanitized	P/Pf/C O			
2 Certified Food Protection Manager for Classes 2,	С	0		17		Proper disposition	of returned, previously	500			
3, & 4	-		\neg	11			ned, and unsafe food	POO			
Employee Health	-				100		re Control for Safety				
Management food employee and conditional employee:	T	T		18 0 0			ne and temperatures	DIDUO O			
knowledge, responsibilities and reporting	P/Pf	0		10		Proper cooking un	ne and temperatures	P/Pf/C O O			
4 Proper use of restriction and exclusion		-		19	200	roper reheating p	procedures for hot holding				
Topol dos of restriction and excidenti	P	0	\odot	20 0		Proper cooling tim	e and temperatures	POO			
5 Written procedures for responding to vomiting and				21 00 9	000	Proper hot holding	temperatures	POO			
diarrheal events	Pf	0	\circ	22	200	Proper cold holdin	o temperatures	P 0 0			
Good Hygienic Practices			\neg		500	Proper date marki	ng and disposition				
6 O Proper eating, tasting, drinking, or tobacco products us	o Tric	Tol		20 0		Timper date marki	ing and disposition	P/Pf O O			
7 O No discharge from eyes, nose, and mouth				24 0 0			ealth control: procedures	P/Pf/C O O			
The distriction of the first the distriction of the	C	0	\mathcal{L}			and records		1.11.110			
Preventing Contamination by Hands						Consum	er Advisory				
8 O Hands clean and properly washed	P/Pf	0		25 0		Consumer advisory pr	ovided: raw/undercooked food	Pf OO			
No bare hand contact with RTE food or a	12000000000		leros				ptible Population	1.100			
pre-approved alternative procedure properly followed	P/Pf/C	101		26 0) (3		ed; prohibited foods not offered	10/01010			
10 Adequate handwashing sinks, properly supplied/accessible	Deta	0	=	20 0							
broporty cappined accessible	Pf/C	0	\subseteq				s and Toxic Substances				
Approved Source				27 0 0		Food additives: ap	proved and properly used	POO			
11 Pood obtained from approved source	P/Pf/C	0		00			properly identified,				
12 O Food received at proper temperature		0		28		stored & used	,	P/Pf/C O			
13 Food in good condition, safe, and unadulterated		0			A		Approved Procedures				
Descipation 1 This is a second	1		\preceq		1	Compliance with	Approved Procedures				
identification, parasite destruction	P/Pf/C	0		29 0			rariance/specialized	P/Pf/C O O			
	00.00				188	process/ROP crite	ria/HACCP Plan				
0. 10. 10. 10.	OD KE	IAIL	PK	ACTICES				YEAR DOOR OF THE			
Good Retail Practices are preventative measures to	to contro	I the a	dditio	on of pathog	gens, chem	nicals, and physical ob	ojects into foods.				
Mark OUT if numbered item is not in compliance V=violation type Mark	in approp	priate b	box f	for COS and	d/or R	COS=corrected on-	site during inspection	R=repeat violation			
OUT N/A N/O Safe Food and Water	V	cos	R	OUT		Proper Use of		V COS R			
30 Pasteurized eggs used where required	Р	0	_		use uton	sils: properly stored	or Oterisiis				
31 O Water and ice from approved source	P/Pf/C		5	43 0 11	-use uteri	siis. property stored		c 0 0			
32 O Variance obtained for specialized processing methods		-	_	44 000	ensiis/equi	pmenulinens; properi	y stored, dried, & handled	Pf/C O O			
variance obtained for specialized processing methods	Pf	0	0	45 O SI	ngle-use/si	ingle-service articles:	properly stored & used	P/C O O			
Food Temperature Control				46 O G	oves used	d properly		C 00			
Proper cooling methods used; adequate equipment for	Pf/C					Utensils ar	nd Equipment				
temperature control	FIIC	0	\circ	A FO	ood and no	on-food contact surf	faces cleanable				
34 O Plant food properly cooked for hot holding	Pf	0	\overline{a}	121/1021		signed, constructed,	워크워크 "이라이트" (" () 유명이 18명이 의료하다 이용하다	P/Pf(C)			
35 O Approved thawing methods used		0					d, maintained and used;	<u> </u>			
36 Thermometers provided and accurate	DUC	0	\preceq	48 O VV	arewasill	ng racilities. Installet	u, maintained and used;	Pf/C O O			
	PT/C	امار	=				test strips available				
Food Identification 37 Food properly labeled: original container	-	1		49 NO	on-tood co	ontact surfaces clea		(c) O O			
The second secon	P//C					Physica	I Facilities				
Prevention of Food Contamination				50 O Ho	ot and cold	d water available; ad	dequate pressure	Pf OO			
38 Insects, rodents, and animals not present	Pf/C	0	$\overline{}$	51 O PI	umbing in	stalled; proper back	flow devices	P/Pf/C O O			
39 Contamination prevented during food preparation, storage & display	P/Pf/C			52 0 0	unnonng m	d waste water prope	allow devices				
40 Personal cleanliness				52 O T	Waye and	u waste water prope	rry disposed	P/Pf/C O			
41 Wiping cloths: properly used and stored		0		53 0 10	net raciliti	ies: properly constru	icted, supplied, & clean	Pf/C O			
	С	0		54 O Ga	arbage and	refuse properly dispo	osed; facilities maintained	000			
42 Washing fruits and vegetables	P/Pf/C	0	\supset	55 O Ph	nysical fac	cilities installed, main	ntained, and clean	P/Pf/C O			
Permit Holder shall notify customers that a copy of the most recent inspection rep				56 O Ac	dequate ve	entilation and lightin	g; designated areas used	c 00			
A copy of the most recent inspection rep	ort is ava	maple.		O Na	atural rubb	per latex gloves not	used per CGS §19a-36f				
Did M	1	70	,	Miolations	docume	ented					
Person in Charge (Signature)	110	12	101				Date corrections due	#			
Date /	1	1		Priority Ite			7/13/2024				
Person in Charge (Printed) ANULM SINGS	1	50				Item Violations					
- sissing in miney				Core Item			10/10/2024	7			
Inometer (Simoton A WAMMAIN 5116	Inn	2.4		Risk Facto	or/Public F	Health Intervention \	/iolations	2			
Inspector (Signature)	1/0	14		Repeat Ri	sk Factor	Public Health Interv	vention Violations	-			
INITON EXMONIT		350		Good Reta	ail Practic	es Violations	A STATE OF THE SHAPE OF THE SHA	7			
Requires Reinspection - check box if you intend to reinspect											
Appeal: The owner or operator of a food establishment aggrieved by the	his orde	er to o	OFF	ect any inc	poetics	iolation identified	y the feed interior	a hald I i			
or dispose of unsafe food, may appeal such order to the	Directo	or of H	leal	th not late	er than for	rty-eight hours after	r issuance of such order	o noia, aestroy,			

	FOO	<u>a esta</u>	<u>biisnmen</u>	t inspec	tion r	keport	Page	or <u> </u>
LHD_MO	inches ter	-	Inspection Report C	ontinuation Sheet			Date 7/10/29	<u> </u>
Establishr	ment MiKCS DI	170	Town_	Manches	ter		•	
			TEMPERATU	RE OBSERVA	TIONS			
1	/Location/Process	Temp	Item/Location		Temp		ation/Process	Temp
	True	38F	2 door Freeze		-2F	not wat	tr nis.	106F
cheest		40F	pay Marie	cookline	203		ADDISE MODEL PER SECURIO	
saiar	ni	418	Marinara		37F	reneat	Marinara	1675
			cheese.		38F	Meatbal	I not held	197F
301601	True-pizzadoug	139F	pepperoni		40F	aread CN	of in the	O IT A 10000
- 1000	· Unity		chickeniw	9-1-1-1-1	39F	quatsal	MITTLER	200 pps x
30001	undercounter	36F	hamburg	ers	40F			
		OB	SERVATIONS AN	ID CORRECT	VF ACTIO	NS	NEW CERTAIN SERVICE	
Item	Violations cited in this						.11 & 8-406.11 of the	food code.
Number								
49c	eaviking at	handsi	nk not clea	n				
	eggs stored a	The second secon	W NOTE OF SHEET OF STREET		aar iin	MOVEMILL	ter hil pies	26
15p	-11 11			111 0 00	201 012	MOCOUL	11 Cr Dy FICE	_U
1 M	dough prep			1020E & 102 E		CC \$600		
	shelving ab							
ATC	coca cold ref	rigerati	or being u	ised for b	read-	discusse	donly for	
	bottled bever							
	NSF eavipm		19,00	Cuitore	repeace	<u> </u>	Capition	210 40
15 p	beet stored a		dit to not E	and in i	YAAK E	rager	CAS	
						i e e e e e	(03)	
47'C	bounjie cord		The second secon	S	r open			
37c	Squeeze bott	tes labe	is are toa	ea				
	squeeze bott			ean				
49c	shelving in k	itchen	not clean					
<u>.</u>	J	•						
nutek	Food thermo	meter	aicono) w	ipes avai	lable			
	overall clear			7				
	person in cha	0,0	and the same of th	ny temp	<u></u>			
	good grove v	Se Alace	rupal	y inp.)————			
				10 01000	7	. 111 0 22	a li whan	
	new owner	Mar	iji ojiig	ry - class	· Z - W	lucin	WIL WITCH	c - -
	ready to che							erable
	Greturn ap				CFPM	at itasi	-48 his	
	before char							
V	reach out to	o water	, building	, tire for	their	req Vire	ments.	
	Charge (Signature)			1	1		Date 7/	10/202
Inspector	· (Signature) L.	rondu		nue	X		Date 7/10/2	24

Risk Category: Z Food Establ	lishn	nen	t Ir	nspe	ecti	on Re	port	Page 1 o	if 2	
Establishment type: Permanent Temporary Mobile Other							1130]202			
Establishment MIKES D122 a		4 serie	or Conne	cticut Heal	š.	Time In		M)PM Time Out		_AM/PM
Address 267 E. Center stielt			D	H		LHD	mano	hester		=
Town/City Manches fer					1	Purpos	e of Inspection	Routine Pre	e-op	
Permit Holder Manist Singh		of Pu	ablic H	3.000000		Reinsp		Other		-
FOODBORNE ILLNESS RISK FA Risk factors are important practices or procedures identified as the most prevalent cont									1-1-	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				compli			not in compliance		ss or injury D=not ob	
P=Priority item Pf=Priority foundation item C=Core item V=violation type									_	t violation
IN OUT N/A N/O Supervision	V	cos			IN O	JT N/A N/	o Protecti	on from Contamination	v	COS R
1 Person/Alternate Person in charge present,	Pf	0	0	15	D	000	Food separated			00
demonstrates knowledge and performs duties				16	9	20		urfaces: cleaned & sanitized	P/Pf/C	00
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17	50		A 1.55	ion of returned, previously	Р	00
Employee Health								tioned, and unsafe food		
				18	510	000		time and temperatures	D/Df/C	00
knowledge, responsibilities and reporting	P/Pf	0	0			000	Proper reheating	g procedures for hot holding		00
4 Ø Proper use of restriction and exclusion	Р	0	0			000	Proper cooling	time and temperatures		00
5 Written procedures for responding to vomiting and	Pf	0			3 /C			ing temperatures	P	00
diarrheal events				22 (0/			ding temperatures	P	
Good Hygienic Practices 6 O Proper eating, tasting, drinking, or tobacco products us	o Dic	Tal		23	2	000		rking and disposition	P/Pf	00
7 O No discharge from eyes, nose, and mouth	e P/C		00	24	0	0	and records	c health control: procedures	P/Pf/C	00
Preventing Contamination by Hands					-			umer Advisory		
8 6 Hands clean and properly washed	P/Pf	0	0	25	80	500		y provided: raw/undercooked food	Pf	00
9 No bare hand contact with RTE food or a	DIDEIC				/			ceptible Population		
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26	2		Pasteurized foods	used; prohibited foods not offered	P/C	00
Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	J				ves and Toxic Substances		
Approved Source				27	2	0		approved and properly used	P	00
11 Ø Seod obtained from approved source 12 Seod obtained from approved source	P/Pf/C			28	0			es properly identified,	P/Pf/C	00
12 O Food received at proper temperature 13 Food in good condition, safe, and unadulterated	P/Pf P/Pf	00	9			100	stored & used	Ab Annual Day of		
Dequired speeds evallable, as III as a life to				T				th Approved Procedures h variance/specialized		
identification, parasite destruction	P/Pf/C	-	0	29		1		riteria/HACCP Plan	P/Pf/C	00
GO	OD RE	TAIL	PR	ACT	ICES				4-1-	A PER INSE
Good Retail Practices are preventative measures to										
	n approp	-	_			i/or R				t violation
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	V P	cos	1000		UT		Proper Us	e of Utensils	V	COS R
31 Water and ice from approved source	P/Pf/C	10000	0	43		use uten	sils: properly stor	ed perly stored, dried, & handled	C	00
32 O Variance obtained for specialized processing methods	Pf	_	0	45		nale-use/s	single-service article	es: properly stored & used		00
Food Temperature Control	hank						ed properly	se. properly exerce a acce		00
Proper cooling methods used; adequate equipment for	Df/C	0						and Equipment		
temperature control				47				surfaces cleanable,	P/Pf/C	00
34 O Plant food properly cooked for hot holding	Pf	0		13.5			signed, construct		171 110	
35 O Approved thawing methods used 36 Thermometers provided and accurate	Pf/C	00	0	48				illed, maintained and used;	Pf/C	00
Food Identification	PI/C	0	9	60	Y N	eaning ac	ontact surfaces c	and test strips available	(c)	00
37 Food properly labeled; original container	Pf/C	0	0		A III	J1-1000 C		ical Facilities	10	00
Prevention of Food Contamination				50) He	ot and co		; adequate pressure	Pf	00
38 Insects, rodents, and animals not present	Pf/C	0	0	51) PI	umbing ir	nstalled; proper b	ackflow devices		
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	0	52	⊃ Se	wage an	d waste water pro	perly disposed	P/Pf/C	00
40 Personal cleanliness		0		53		ilet facilit	ties: properly cons	structed, supplied, & clean	Pf/C	
41 Wiping cloths: properly used and stored 42 Washing fruits and vegetables	C	0						sposed; facilities maintained	С	00
	P/Pf/C							naintained, and clean		00
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable		30) Ni	etural ruh	ber latey doves	nting; designated areas used not used per CGS §19a-36f	С	00
Tall:00:11 71	1			docum		Date corrections due		#		
Person in Charge (Signature)	50	12	9	Prior	ity Ite	m Violati	ons	. —	+ -	
Bernen in Cherma (Brints d'		- 3	/	Prior	ity Fo	undation	Item Violations	8/9/24		1
Person in Charge (Printed)	2.		_	Core	Item	Violation	IS	10/30/124	1	1
Inspector (Signature) X , STWW Date 7/3	112.	4		Rene	racto	sk Factor	Health Intervention	on Violation's ervention Violations		
INITON A MINNI	1	-	-				ces Violations	STVERMON VIOLAMONS	2	,
Inspector (Printed) UVVV OTATION				Regi	uires	Reinspe	ction - check bo	x if you intend to reinspect		
Appeal: The owner or operator of a food establishment/aggrieved by the	nis orde	er to	corre	ect ar	y ins	pection v	violation identifie	d by the food inspector or to	hold, c	destroy.
or dispose of unsafe food, may appeal such order to the	Directo	or of	Heal	th. no	t late	er than fo	rty-eight hours	ffer issuance of such order	- 504//-	THE CANADA STATE

new o	wher Foo	d Esta	ıblishment Ins	pection I	Report Page Z	of
	inchester		Inspection Report Continuation		Date_7/3//	124
Establishn	nent MiKe's pro	7.20	Town Man	Chester		
14.50.00			TEMPERATURE OBS	ERVATIONS		
	Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
	aringra	182F	sausage		quat sanificer	200ppm
meath	20115	181F	Marinara			2.0.5
2.4.1.	4:		pepperoni		not water-hs.	89F
reach	in-chicken	40F	1 11			
paratte		20-				
purge		30F				
T						
		OF	SSERVATIONS AND COR	DECTIVE ACTI	ONIC	
Itom	Violations cited in this				in sections 8-405.11 & 8-406.11 of t	the food code.
Item Number						
10	1	1 =	1			
44 C	Floors/wall	s by 3	bay not clean s flies presen			
38 pF	Fruit Flies /	drain	cties presen	t by har	Muush sink	
221.	1		, , , , , , , , , , , , , , , , , , , ,			
	10.000 1 10.00	7 10	1. 20 001	15 6 15 4 10 21	Ha: 1 4	
	neum aep	t TU	provide 30 day	D FLORA	IMI date to	
	replace be	mile	cords to hold	lidsat	cookline. Mi	vs †
	he smooth	P Maril	ucleanable	REALD	out to healt	h
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	atpi at	Lgran	dy@manch	esitiet	gur when	
	Fixed frep	raced				
	,					
	ANCEVAIL NIE	N N + A	KANDIZAN			
	overall cle		1/0:/ 0:			
	good Storac	ge or	equipment			
	discussed 1	abeli	na idatema	rking	for all Read	U
	+1 00+ 600	NC				J
	TO EAT POOL			<i>J</i>		
			CEPM provided S Well V Hing CEPM V			
	Jasbir sin	10h -	CEPM provided	this do	711 V	
	Maniit - CF	for a	5 111011 7		- 9	
	out leeny	raov	D WEIT			
	Dail	= - ge	Hing CFPM V			
		J	J			
	FORD COLVIC	01110	nco to ho nro	widad.	this Mail- ox	ain
	1.4 010010 1001	c 10.00	nse to be pro 1th dept	VIACA	This olay- oko	ay
	TO OPEN PER	nea	in dept			,
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		1				
_	/	1,(1	o Cinhh			
Person in	Charge (Signature)	'USPI	1. 5 11/1/1		Date	<i>f</i> = 1
Inspector	(Signature) 📈 , 🦞	PIONO	W 0		Date 7/30	124

									15			
isk Category: 3 Food Establishment Inspection Report Page 1 of 3												
Establishment type Permanen Temporary Mobile Other	er					Date:	718/202	4				
Establishment Noodles + company	,		4-Section Co	onnecticut Hea	Q.	Time In AM/PM Time Out AM/PM						
Address 1442 C pleasant valley Ro			DE	H		LHD 🏳	ianche	stek				
Town/City Manchester						Purpose	of Inspection:	Routine	е-ор			
Permit Holder Manamed			of Publi	Departme ic Health		Reinspe		Other				
FOODBORNE ILLNESS RIS					-		A SECRETARIAN SERVICE					
Risk factors are important practices or procedures identified as the most prevale	ent contributir	ng fac	ctors of fe	oodborne	illness o	r injury. Inte	rventions are control m	neasures to prevent foodborne illne	ss or injury.			
Mark designated compliance status (IN, OUT, N/A, N/O) for each numb	pered item	0.9	IN=	in comp	iance	OUT=n	ot in compliance	N/A=not applicable N/4	O=not observed			
P=Priority item Pf=Priority foundation item C=Core item V=violation	type Mar	rk in	approp	riate box	for Co	OS and/or	R COS=corrected	d on-site during inspection	R=repeat violation			
IN OUT N/A N/O Supervision		٧	COS F	2	IN OC	T N/A N/C	Protection	from Contamination	V COS R			
1 Person/Alternate Person in charge present,		D.	00	15	05	00	Food separated a	and protected	P/C O O			
demonstrates knowledge and performs duties Certified Food Protection Manager for Classes 2		Pf	00	16			Food-contact surf	faces: cleaned & sanitized of returned, previously	P/Pf/C O O			
3, & 4		С	0) 17	9		served, recondition	oned, and unsafe food	POO			
Employee Health								re Control for Safety				
Management, food employee and conditional employee	ee;	P/Pf	00	18				me and temperatures	P/Pf/C O O			
knowledge, responsibilities and reporting			0,000	19				procedures for hot holding	POO			
Proper use of restriction and exclusion		Р	00					ne and temperatures	POO			
Written procedures for responding to vomiting an	a	Pf	00				Proper hot holding		POO			
diarrheal events Good Hygienic Practices				(22)			Proper cold holdin		PXO			
6 C Proper eating, tasting, drinking, or tobacco produ	-t F	0/0				000		ing and disposition	P/Pf O O			
7 O No discharge from eyes, nose, and mouth		P/C	00		\circ			health control: procedures	P/Pf/C			
Preventing Contamination by Hands		С	0	4			and records					
8	Te	D/Df	00	25	olo	5 6		ner Advisory	Dr 1010			
No hard hand contact with DTE food as a		751		23				provided: raw/undercooked food	Pf O O			
pre-approved alternative procedure properly follor	wed P/P	Pf/C	00	26				ed; prohibited foods not offered	P/C O O			
Adequate handwashing sinks, properly supplied/access		(C)	00	5 201	010	1		es and Toxic Substances	P/C O O			
Approved Source	331016			27	olc			pproved and properly used	POO			
11 Solution Feed obtained from approved source	P/P	Pf/C	00					properly identified,	_			
12 O Food received at proper temperature		P/Pf					stored & used	properly identified,	P/P/IC O			
13 5 C Food in good condition, safe, and unadulterated		P/Pf	00			(Approved Procedures				
14 O Required records available: molluscan shellfish						888	Compliance with	variance/specialized				
identification, parasite destruction	P/P	Pf/C	0	29			process/ROP crite	eria/HACCP Plan	P/Pf/C			
	GOOD											
Good Retail Practices are preventative measurements	sures to co	ntrol	the add	dition of	pathog	ens, chem	nicals, and physical o	bjects into foods.				
Mark OUT if numbered item is not in compliance V=violation type	Mark in ap	prop	riate bo	ox for Co	S and	or R	COS=corrected on	-site during inspection	R=repeat violation			
OUT N/A N/O Safe Food and Water	1	V	COS F		UT		Proper Use		V COS R			
30 Pasteurized eggs used where required	F	D	0	43	O In-	use utens	sils: properly stored		c 00			
31 Water and ice from approved source		Pf/C	0	O 44	O Ute	ensils/equi	pment/linens: proper	rly stored, dried, & handled	Pf/C O O			
32 O Variance obtained for specialized processing methods	F	of	0) 45	O Sir	igle-use/si	ngle-service articles:	properly stored & used	P/C 0 0			
Food Temperature Control				46		oves used	d properly		C 00			
Proper cooling methods used; adequate equipment for	r F	Pf/C	00		-1-			and Equipment				
temperature control 34		-		47			on-food contact sur		PPCOO			
		Pf	00				signed, constructed					
35 Approved thawing methods used Thermometers provided and accurate	- P	OF/C	00	48				ed, maintained and used;	Pf/C O O			
Food Identification	Jr	1/0	0				ents, sanitizers, an intact surfaces clea	d test strips available				
Food properly labeled; original container	10	ofC	00		INO	11-1000 CC			000			
Prevention of Food Contamination	1.	C				t and sole	d water available; a	al Facilities	17/10/0			
38 Insects, rodents, and animals not present	I c	OF/C					stalled; proper bac		Pf O O			
39 Contamination prevented during food preparation, storage & display	, B	fic)	00	52			d waste water prop		P/Pf/C O O			
Personal cleanliness			00	53				ructed, supplied, & clean	Pf/C O O			
Wiping cloths: properly used and stored		C	0	54				osed; facilities maintained	c 00			
Washing fruits and vegetables		f/C	0	55				intained, and clean	P/Pf/C O			
Bormit Holdon chall petific auctom and that a second state of the					Ad	equate ve	entilation and lighting	ng; designated areas used	000			
Permit Holder shall notify customers that a copy of the most recent inspection	on report is	ava	nable.					t used per CGS §19a-36f				
- In a day	7/01	0	-1	Viol	ations	docume	ented	Date corrections due	#			
Person in Charge (Signature) Watel Date	11010	2	-/_			m Violatio		7/11/24	a			
Description of the							Item Violations	7/18/24				
Person in Charge (Printed)						Violations		10/5/24	12			
Inspector (Signature) Date	7101.	20	74	Risk	-acto	r/Public F	Health Intervention	Violations	3			
Date Date	10/	LU					Public Health Inter es Violations	vention violations	10			
Inspector (Printed) WILD 6 CANN								f you intend to reinspect	12			
Appeal: The owner or operator of a food establishment aggrieved	d by this s	ordo	er to or	orrect c	ov inc	nection :	iolation identificati	by the food incremspect	o hold dead			
or dispose of unsafe food, may appeal such order in	to the Dire	ecto	or of He	ealth, n	ot late	r than for	rty-eight hours after	by the lood inspector or t	o noia, destroy,			

Food Establishment Inspection Report Page 2 of 3

LHD_M	anchester		Inspection Report Continuation Shee	t	Date 7 / 8 / 202	24
Establishr	ment_NOOdICS+	compo	iny Town Manches	tiv		
			TEMPERATURE OBSERVA	ATIONS		
Item	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Front i	par mariel i doo		Bay Marce - shrimp	91F	Front under counter	
Shred	lord threse	39F	cheese tortillini	415	chicken raw	32F
Frant	jour marce 12de	(A)	cooked hoodies	41F		
CUT H	imiti)	39F	cut tomato-prepped	50F	not marinava	135/
FPTM	CMP25A	AOF	cut tomato-prepped	ago	alfred o	150F
2 door s	tanding	625	BAY Maril potsticker			
Shrim		56F	agtic cram	39F	Sp/Igh Itt cooling	35F
SHAK	1 noodles	53/55F	Mentionly	395	In the bath	
		OE	SERVATIONS AND CORRECT	IVE ACTIO		
Item	Violations cited in this	report must b	e corrected within the time frames below	, or as stated	in sections 8-405.11 & 8-406.11 of the	food code.
Number						
LITC	handsink (Attrar	it counter, alumin	in Li	il taned to sink	
1110					it in the contraction	
410			counter under p.			
3.			sanitizer bucket in		in ures	
MITTEN	good handwa	shing	observed by staff	:		
220/476	ALDOSY STAN	dina Ri	andell not function	of ma v	properly. Ambient	at
			TOF, Steak at 53F,			
	00.10/11/1/	ip all	or, or can act 35°,	riouai	CS (C) 5'5', FOUCK	look o
	product to	pe aisi	carded by person	incha	rge. Not to use unitil	repaired
			d as liner above		11	Ī
56C	Front nood	not cle	an - overdue for cle	aning		
490	Figor under t	GUIDIY	nent along cookline	not	lean	
200-200-200-200-200-200-200-200-200-200	chemicals n	9	1	K		
	back hands					
			if house not clear	0		
					and and all the	210
217	walk in cool	4010 01	ored on shelving un	der 11	igula egg carions	ID
/11.0	The second secon		tial to a look and an are			
410	rag stored u	natio	utting board at p	lep to	lbil	
39 C			igs stored on floo			
37C	oil in spray	bottle	not tabeledlin e	colab	spray bottle)	
10 C	noembion	ees mi	ist wash hands sign	n in w	unmens restranm	
			J. William C. J.		· · · · · · · · · · · · · · · · · · ·	
notex	health den)+ +0 F	allow up in the	cola	h sprau notto	
	pelna used	FOIL	ollowup with		Joing Doile	,
	Charge (Signature)	N.	alle		Date 7/8/	2u
	(Signature)	Le MANA	A COLOR		Date 7/8/7	-
mapector	(orginature)	PUULU	A		Date / / \ / /	119

	Foo	d Esta	blishmen	t Inspec	ction I	Report	Page	of <u>3</u>
	anchester	**	Inspection Report (Continuation Sheet	t	Da	te 7/8/20	724
Establishr	nent NOODICS T	-compa	M Town_	Manche	ster			
				IRE OBSERVA				
ltem	/Location/Process	Temp	Item/Location	n/Process	Temp	Item/Location		Temp
INDIC.						hat water	ch.S.CFro	NT 85F
STORK	+In(40F				inst Wate	V Wis	87F
Marin	c dream	395						3.
Dining	sen tender	39F				aunt coniti	ler	400 por
DACT	MILLIAN	407				3 10 011	vci	HOUPPIY
hasia	<u> </u>	101				2 Duy		
1 2 4 1 3 1	Lak hadanine	are s				-		
HOT W	iater-womens	85F					T	emp▶Rite. §
HOT W	rater-mens	101+						Date:
	Violations cited in this		SERVATIONS A				8.0.406.44	mp: mpleado PASS WHEN BLUE
Item	Violations cited in this	s report must be	s corrected within the	une names below	, or as stated	in sections 6-405.11	α 0-400.11	SAR TURNS ORANGE
Number		=						■ 160°F/749C
	good equipr	manti	HANGIL	CHARANA				- 100 1//10
	good equipr	nenj	VICIISIT (Storage	t			
				V				
-								
			1974					
						,		
								-
	3.							
			- Au					
Down :	Charge (Signature)	MARC	Los_				7/0	-/2/1
rerson in	Charge (Signature)	bear all					Date 7/8	194
Inspector	(Signature)					ī	Date 7 18 17 1	14

Risk Category: Food Establ	iehn	nen	t In	en	eci	tio	n R	eno	rt		Page 1 of	2	
Establishment type: Permanent Temporary Mobile Other				.op			ate:		1 1	24			
		erite.	o Contract	dicut He			me I	n	1	AM/PM Time Ou	,4		AM/PM
Establishment Oak Street Pub			BI		N. C. C.			<u>"</u>	1000	hanter	ut		HIAILL IAI
Address 30 Oak Town/City Manchester		إلا	PI	П			HD	se of	nspection	Rautine	Pre-	on.	
Town/City 1 anches	0	onnecti	cut Dep	partme	nt				F) (2000)	Other		Op.	
Permit Holder FOODBORNE ILLNESS RISK FA	ACTO	of Pu	ANI	nalth	IIRI	_		pectio					
Risk factors are important practices or procedures identified as the most prevalent conti						-					odborne illnes:	s or injury.	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it			_		_				compliance	N/A=not applicab		=not obs	
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	_	_	te bo	x for	COS	and/	or R	COS=correc	cted on-site during ins	pection R	t=repeat	violation
IN OUT N/A N/O Supervision	٧	cos	R	98	-		N/A			ion from Contamin	ation	-	COS R
1 O Person/Alternate Person in charge present,	Pf	0	0	-	_					d and protected		RC	00
demonstrates knowledge and performs duties		_		16	0	0	0	-		urfaces: cleaned & :	The state of the s	R/Pf)C	00
2 Certified Food Protection Manager for Classes 2,	С	0	0	17	0	\circ				tion of returned, prev		P	00
3, & 4 Employee Health	_			-			DESIST.			itioned, and unsafe			a new line
Management food ampleyed and conditional ampleyed		T		18	0	0	0			time and temperatu		P/Pf/C	00
knowledge, responsibilities and reporting	P/Pt		0	-						ng procedures for ho			00
4 O O Proper use of restriction and exclusion	P	0	0	-						time and temperatu			00
5 O Written procedures for responding to vomiting and	Pf		0		0	0	0	O Pro	per hot hold	ding temperatures		Р	00
diarrheal events	PI									lding temperatures		Р	00
Good Hygienic Practices				23	0	0	0			arking and disposition		P/Pf	00
Proper eating, tasting, drinking, or tobacco products us		0		24	0	0	0			ic health control: pro	ocedures	P/Pf/C	00
No discharge from eyes, nose, and mouth	С	0		-				and	d records				
Preventing Contamination by Hands 8	D/D	10		25		0		Cor		umer Advisory ry provided: raw/underco	nokod food	Df	
No hare hand contact with DTE food or o			\vdash	20		$\overline{}$		COI		sceptible Populatio		Pf	00
pre-approved alternative procedure properly followed	P/Pf/C		0	26		0	0	Pas		used; prohibited foods		P/C	00
10 O Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0							ives and Toxic Sub		1.70	0 0
Approved Source			100	27	0	0		The second second		: approved and prop		P	00
11 O O Food obtained from approved source	P/Pf/C	0	0	20	0	0		To	xic substanc	es properly identifie	d,		
12 C Food received at proper temperature		f O	-	20		$\overline{}$			red & used			P/PI/C	00
Food in good condition, safe, and unadulterated	P/P	f 0	0							ith Approved Proc			
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29	0	0	0			th variance/specializ		P/Pf/C	00
	OD RE	TAI	DD	ACT	TICE	-0		pic	cess/ROP (criteria/HACCP Plan			
Good Retail Practices are preventative measures to							s ch	emicals	and physic	al objects into foods			
	n appro							-	The second secon	on-site during inspec	tion F	=repeat	violation
OUT N/A N/O Safe Food and Water	٧	cos	-	_	TUC					se of Utensils		V	COS R
30 Pasteurized eggs used where required	Р	0	0	43	0	In-us	se ute	ensils:	properly sto			С	00
31 Water and ice from approved source	P/Pf/C	0	0							perly stored, dried, &		Pf/C	00
32 O Variance obtained for specialized processing methods	Pf	0	0							les: properly stored &	used		00
Food Temperature Control		-		46	0	Glov	es us	sed pro	A STATE OF THE STA			С	00
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0	0	-		Foor	d ond	non f		s and Equipment surfaces cleanable,			
34 O Plant food properly cooked for hot holding	Pf		_	47						ted, and used		P/P(Ĉ	00
35 O Approved thawing methods used		0		-						alled, maintained an	d used.	$\overline{}$	2007 244
36 O Thermometers provided and accurate		0		48						and test strips avail		Pf/C	00
Food Identification				49					ct surfaces			С	00
37 C Food properly labeled; original container	Pf/C	0	0						Phys	sical Facilities			
Prevention of Food Contamination				50	0	Hot:	and c	old wa	ter available	e; adequate pressure	е	Pf	00
38 Insects, rodents, and animals not present		0	_							ackflow devices		P/Pf/C	00
39 Contamination prevented during food preparation, storage & display	P/Pf/C		_	52	0	Sew	age a	and wa	ste water pr	operly disposed			00
40 Personal cleanliness 41 Wiping cloths: properly used and stored	_	0	_	53	0	Toile	t faci	ilities:	properly cor	structed, supplied, &	& clean	Pf/C	00
42 Wiping cloths, properly used and stored	P/Pf/C	0		54		Garb	age a	ina retu	se properly o	disposed; facilities mai maintained, and clea	intained	<u>(c)</u>	00
										hting; designated ar		C	00
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is av	ailable	Э.	-00	0	Natu	ral ru	bber la	atex gloves	not used per CGS §	19a-36f		
1	11	21	T					nente		Date correction			#
Person in Charge (Signature)	110	7	t					tions			1	C	5
Person in Charge (Printed) Ten Donnell									Violations	July 2	424		/
Person in Charge (Printed) IEN DONNELLY	-1						olatio		th Intervent	on Violations		- 2	7
Inspector (Signature) Leuse Tayne Date 7/1	11/2	14								on violations itervention Violations	s	+	-
00 0			\neg	God	od R	etail	Prac	tices V	iolations			,	<i>y</i>
Inspector (Printed) Denise Paynard				Red	quire	es R	einsp	ection	- check bo	x if you intend to re	einspect		
Appeal: The owner or operator of a food establishment aggrieved by the	his ord	er to	COTT	ect a	iny i	nspe	ection	viola	tion identifie	ed by the food inspe	ector or to	hold, o	estroy,

Foo	d Esta	blishment Inspec	tion F	Report Page	of 3
LHD Manchester		Inspection Report Continuation Sheet		Date	1/24
Establishment OOK Stree	et Pub	Town Marche	wher		
		TEMPERATURE OBSERVA	TIONS		
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Marganne	40F			Hot water	IIIF
210	.1 -	No Hor Holding			
Cheeseslices	41F	0			
Bacon	HIF				
	OB	SERVATIONS AND CORRECT	IVE ACTIO	ONS	
Item Violations cited in this		corrected within the time frames below,			e food code.
Number					
540 Dumpster	Covers	sopen			
16PF ICE Mac 47c Toaster	hine	inter unclean			
HTC Tooster	a + c	Same said			
110 100570	no i C	emare day			
				,	
Treener -	meats,	Good stored prop	ser lu		
		1000, 000,000	J	<u> </u>	
			20		
17: 1	10/-	1.00	0.0		
Keviewed:	14/12	forms with CF	PM	Copies provided	
,	Allerg	ens - noton meno	ما لغال را	at started.	
	dis	cussed ways to	inses	rt into menu.	w
	Ca	mpliance.		1.)	
			+ 00	7 1 0	
D' 1	475	process documen			
Discussed	- datu	narking -	KTEF	ood./ cays	
		d		^ ^	
	- 0	ALLOS A	CAN	inch	
Kitch	nen	Clean + Or	Just 1		
/			U		terat any
				dpayne@manches	30.93
XX Mop Sink	-10sta	Mation - Conta	of I	Payne	
Person in Charge (Signature)		Donnelle		Date	
Inspector (Signature)	Trail	he -		Date 7///	124
opooto: (orginature)	/ WX			Date ///	101

isk Category: 3 Food Establishment Inspection Report Page 1 of 2										
Establishment type: Permanent Temporary Mobile Other					_ [ate: 7	18124			
Establishment OCTOBER KITCHEN		4.Service	onne	cticut Healing		ime In_	1 A	M(PM) Time Out_	AM/PM	
Address 309 Green Rd			P	H)	L	.HD	Mano	hester		
Town/City Manches Fer	,			Purpose of Inspection: Routine Pre-op						
Permit Holder MUNUMU	Co	onnecti of Pu	cut De ublic H	partment ealth	F	Reinspe	ction	Other		
FOODBORNE ILLNESS RISK F Risk factors are important practices or procedures identified as the most prevalent con			17711		_					
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered	No. of the last of		****	complia		1500 St. 1000	ot in compliance		D=not observed	
P=Priority item Pf=Priority foundation item C=Core item V=violation type			-	te box t	or CO	S and/or	R COS=correc	ted on-site during inspection		
IN OUT N/A N/O Supervision	V	cos	R		UO I	N/A N/C		on from Contamination	V COS R	
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0	15		00	Food separated	and protected urfaces: cleaned & sanitized	P/Pf/C O O	
Certified Food Protection Manager for Classes 2,	С	0	0	17	/		Proper disposit	ion of returned, previously	P 00	
3, & 4 Employee Health		201	-					tioned, and unsafe food ture Control for Safety		
Management, food employee and conditional employee;	T _{D/D}			18		00		time and temperatures	P/Pf/C O O	
knowledge, responsibilities and reporting	P/Pf			_		00	Proper reheating	g procedures for hot holding	POO	
Proper use of restriction and exclusion Written procedures for responding to vertice and	Р	0	0	-		00	Proper cooling	time and temperatures	P 0 0	
Written procedures for responding to vomiting and diarrheal events	Pf	0	0	21 (20		Proper not noid	ling temperatures ding temperatures	P O O	
Good Hygienic Practices				23 (rking and disposition	P/Pf O O	
6 Preper eating, tasting, drinking, or tobacco products us				24 🤇		100		c health control: procedures	P/Pf/C O O	
No discharge from eyes, nose, and mouth	C	0	0		1		and records		PIPIIC O	
Preventing Contamination by Hands 8	P/Pf	0	0	25	10			umer Advisory y provided: raw/undercooked food	Pf O O	
a bare hand contact with RTE food or a		10000		20				ceptible Population	TH TO C	
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 <		0		used; prohibited foods not offered	P/C O O	
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0		/	1		ves and Toxic Substances		
Approved Source	- I - I - I - I	1_		27 🛈	10	0		approved and properly used	POO	
11 Po Food obtained from approved source 12 Pool Food received at proper temperature	P/Pf/C	00		28 🤇		2	Toxic substance stored & used	es properly identified,	P/Pf/C O O	
13 C Pood in good condition, safe, and unadulterated	P/Pf	_	3			9		ith Approved Procedures		
Required records available: molluscan shellfish	P/Pf/C		0	29 🤇		0		h variance/specialized	DIDIIO CO	
Identification, parasite destruction							process/ROP c	riteria/HACCP Plan	P/Pf/C O O	
Good Retail Practices are preventative measures	to contro					ne chom	sicale, and physica	I objecto into feede		
	in approp		743						R=repeat violation	
OUT N/A N/O Safe Food and Water	V	cos	-	OU	-			se of Utensils	V COS R	
30 Pasteurized eggs used where required	Р	-	0	43 ⊂	⊃ In-u	se utens	sils: properly stor	red	c 00	
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C	_	0					perly stored, dried, & handled	Pf/C O O	
32 Variance obtained for specialized processing methods Food Temperature Control	Pf	0	0				ngle-service article d properly	es: properly stored & used	P/C 0 0	
Dropper cooling methods used; adequate assignment for		Г		40 0	7 010	ves used		and Equipment	000	
temperature control	Pf/C	0	0	47 (Foo	d and no		surfaces cleanable,	D/D//O	
34 O Plant food properly cooked for hot holding	Pf	0		47	pro	perly des	signed, construct	ed, and used	P/Pf/C O	
35 O Approved thawing methods used 36 Thermometers provided and accurate		0		48				illed, maintained and used;	Pf/C O O	
Food Identification	Pt/C	0	0	49			ents, sanitizers, a ontact surfaces c	and test strips available	600	
37 Food properly labeled; original container	Pf/C	0	0	73	NOI	1-1000 CC	STATE OF THE STATE	ical Facilities	000	
Prevention of Food Contamination				50 🤇	Hot	and cold		; adequate pressure	Pf 0 0	
38 Insects, rodents, and animals not present		0		51 (Plu	mbing in	stalled; proper ba	ackflow devices	P/Pf/C O O	
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness	P/Pf/C						d waste water pro		P/Pf/C O O	
41 Wiping cloths: properly used and stored	C	00						structed, supplied, & clean isposed; facilities maintained	Pf/C O O	
42 Washing fruits and vegetables	P/Pf/C	0	0					naintained, and clean	C O O	
Permit Holder shall notify customers that a copy of the most recent inspection rep		200		56 ⊂	Ade	quate ve	entilation and ligh	nting; designated areas used	c 0 0	
4	0	1982				docume		not used per CGS §19a-36f Date corrections due	#	
Person in Charge (Signature) Date 7	-8-	-2	١	Priorit	y Item	Violatio	ons			
Person in Charge (Printed)				Priorit	y Fou	ndation	Item Violations	16101-		
Person in Charge (Printed)	100	9	_			iolations	s Health Intervention	101812024	2_	
Inspector (Signature) . STONOW, Date 718	1/24			Repe	at Risi	Factor	Public Health Inf	tervention Violations		
MANA MININAMI	1			Good	Retai	Practic	es Violations		2	
Appendix The support of a food adulting the first distribution of the	it.t.	181		Requ	ires F	einspe	ction - check bo	x if you intend to reinspect		
Appeal: The owner or operator of a food establishment aggrieved by to or dispose of unsafe food, may appeal such order to the	this order	er to	Corre	ect any	/ insp	than for	iolation identifie	d by the food inspector or to	hold, destroy,	

Foo	d Esta	ıblishment in	spection	Report	Page or	f_ <u></u>
LHD Manchester		Inspection Report Continu	ation Sheet		Date 7/8/202	24
Establishment <u> 0CT00Cf K</u>	itchen	Town M ()	nchester			
		TEMPERATURE O	BSERVATIONS			
Item/Location/Process	Temp	Item/Location/Proce	ess Temp	Item/Lo	cation/Process	Temp
MIF	-2F	illic	365	not wat	er handsink	1165
UU LI	7.	VVIC		101 / 00(1	OI HUHAJIM	110
. 1	70 =	WIF	7 F			
WIC.	39F				X.	
conked potato	37F					
THE POTRETO	40F					
Maria la la la la la la della	701					
porklenicken tender	3 41F/41F					
	.43					
	OF	SERVATIONS AND CO	ORRECTIVE ACT	IONS		
Violations cited in thi	s report must b	e corrected within the time fra	mes below, or as state	ed in sections 8-40	05.11 & 8-406.11 of the fo	ood code.
item		1 1	inoo bolow, or do oldic	50 III 600000II 6 10		ood oodo.
Number CFPM: M(mamr	ned/Kevin				
	1					
note good utensil	PALLID.	mentstorage				
	1 - 1 - 11	. //				
15c Food not con	vered/i	protected in i	NIF			
note Thermom	eter 8	available				
	CI CI C	walland .				
note very clear	+ OVO	ganized				
	- 4					
note no cooking	, coolir	ra attime i	rinspect	101)		
to the U	nect 1		ia ang 🔥 🎉 🔞 🛣	9+A)		
	1.	1	ining (1111)	·	
note discussed	dente	d can polic				
		1	/			
	10					
Person in Charge (Signature)	700	760			Date 78-7	ry
Inspector (Signature)	pron a	N			Date 7/8/	24

2			-	
Risk Category: 5 Food Establ	lishm	nen'	t In	Inspection Report Page 1 of 2
Establishment type: Permanent Temporary Mobile Other				Date: 7/17/24
Establishment Olive Garden		*EEDINE	Corinec	Time In 12:30 AM/PM Time Out 1:45 AM/PM
Address 1550 Measant Valley d.			D	LHD Manchester
Town/City Manchester				Purpose of Inspection: Routine Pre-op
Permit Holder COURN KIRNZIES	Co			Department c Health Reinspection Other
	ACTO	RS /	ANI	ND PUBLIC HEALTH INTERVENTIONS
				foodborne illness or injury. Interventions are control measures to prevent foodborne illness or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered in				in compliance OUT=not in compliance N/A=not applicable N/O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type			_	
IN OUT N/A N/O Supervision	V	cos	R	The post territory
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0	15 % Food separated and protected P/C C
Cartified Food Protection Manager for Classes 2				Proper disposition of returned proviously
2 SP C Caralled 1 ood Protection Warrager for Classes 2,	С	0	0	served, reconditioned, and unsafe food
Employee Health	min stra			Time/Temperature Control for Safety
Management, food employee and conditional employee;	P/Pf	0		18 S O Proper cooking time and temperatures P/Pf/C O
knowledge, responsibilities and reporting				19 0 0 Proper reheating procedures for hot holding POC
Written procedures for recogning to vemiting and	P	0	9	
diarrheal events	Pf	0	\circ	21 0 Proper hot holding temperatures POC 22 0 Proper cold holding temperatures POC
Good Hygienic Practices			300	23 Ø O Proper date marking and disposition P/Pf O C
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0	Time as a public health control: procedures
7 O No discharge from eyes, nose, and mouth	С	0	0	and records P/Pf/C
Preventing Contamination by Hands				Consumer Advisory
8 Hands clean and properly washed No bare hand contact with RTE food or a	P/Pf	0	9	
pre-approved alternative procedure properly followed	P/Pf/C	0	0	Highly Susceptible Population 26 Pasteurized foods used; prohibited foods not offered P/C C
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	
Approved Source	1			27 O S Food additives: approved and properly used P C
11 S O Food obtained from approved source	P/Pf/C	0	0	Toxic cubotaness properly identified
12 Food received at proper temperature 13 Food in good condition, safe, and unadulterated	P/Pf	_	0	stored & used
Food in good condition, safe, and unadulterated	P/Pf	0	9	
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	\circ	29 Compliance with variance/specialized process/ROP criteria/HACCP Plan
	OD RE	TAIL	PR	PRACTICES
Good Retail Practices are preventative measures to				dition of pathogens, chemicals, and physical objects into foods.
Mark OUT if numbered item is not in compliance V=violation type Mark i				ox for COS and/or R COS=corrected on-site during inspection R=repeat violation
OUT N/A N/O Safe Food and Water	V	-	R	The state of the s
30 Pasteurized eggs used where required 31 Water and ice from approved source	P	_	0	
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C Pf	_	0	, , , , , , , , , , , , , , , , , , , ,
Food Temperature Control				40 000
Proper cooling methods used; adequate equipment for	Delo			Iltensils and Equipment
temperature control	Pf/C		\circ	Food and non-food contact surfaces cleanable,
34 O Plant food properly cooked for hot holding	Pf	0		
35 O Approved thawing methods used 36 Thermometers provided and accurate		0		
36 Thermometers provided and accurate Food Identification	Pt/C	0	9	JI Clearling agents, samulzers, and test strips available
37 Food properly labeled; original container	Df/C	0		Non-food contact surfaces clean
Prevention of Food Contamination	111/0		\preceq	Physical Facilities 50 Hot and cold water available; adequate pressure Pf C
38 Insects, rodents, and animals not present	Pf/C	0	0	
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	0	52 Sewage and waste water properly disposed P/Pf/C O
40 Personal cleanliness		0		
41 Wiping cloths: properly used and stored 42 Washing fruits and vegetables	C	0		
	P/Pf/C			
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable.		56 Adequate ventilation and lighting; designated areas used C C Natural rubber latex gloves not used per CGS §19a-36f
2	0/0	1		Violations documented Date corrections due #
Person in Charge (Signature)	70	4	_	Priority Item Violations —
Person in Charge (Printed) Wil mane lellera 7/13	7-124	1		Priority Foundation Item Violations 7 27 24 1 Core Item Violations (0) 17 24 4
1. 7.	7 ^	1	\neg	Risk Factor/Public Health Intervention Violations
Inspector (Signature) Date /-/	1-2	9		Repeat Risk Factor/Public Health Intervention Violations
Inspector (Printed) Jose Ramirez				Good Retail Practices Violations Requires Reinspection - check box if you intend to reinspect
	his orde	er to	corre	prect any inspection violation identified by the food inspector or to hold, destroy,
or dispose of unsafe food, may appeal such order to the	Directo	or of b	Heal	ealth, not later than forty-eight hours after issuence of such order.

Food Establishme	nt Inspection	Report	Page 2	of <u>2</u>
HD MANCHESTER Inspection Report	t Continuation Sheet		Date	7/24
Establishment Olive Garden Tow	m_manchester		,	ı
TEMPERAT	TURE OBSERVATIONS			
Item/Location/Process Temp Item/Locat Cold Cawer under grill Hot Hold pasta 40F Shrimp 39F Chicken 40F Cold hold Mac & cheese 40F Voasted tomates 40F Shredded cheese 41F Pasta Gujioli 40F Calimari con	chill ATF ASagna 153F Ch dip 141F Ch dip 141F Ch dip 38F Almon 38F ASTA 41F Coked to 162F AND CORRECTIVE ACT	Hand Sin Quat 130 3 Bay Hot Hold Bar cooled Customer	cation/Process IX expoling XKet Sink Potatosop Half & Half BR Sink 93f1	150ppm 127F 175F 41F
47C Gaskets damaged through 37C Unlabeled Spray Squeeze 55C Holes (Screwholes) in FRF 49C WIC Fan Unit (Coversión: ATPF Knives in Wall mount chipped	e bottlesthau around 3 Ba	shout coo,		
				
Note New Dish machine installed las	st month.			
Note Good glove use & handwashin	g observed.		1 - 1	
Note Great Managerial Control PIC	Willmarie Very	cnowledgeab	le on food	Safety.
Vote Monitor all cooking equipment / co	on tainers. Discar	d as need	led when do	maged
Note Test Strips & thermometer as	vailable			,
NOTE PIC States auskets orde	red on back	order	975.52	
Person in Charge (Signature)	V		Date 7-13	7-24
Inspector (Signature)			Date 7-/	7-24

tisk Category: 3 Food Establishment Inspection Report Page 1 of												
Establishment type: Permanent Temporary Mobile Other					Date:	7-19-2	14					
Establishment Pastrami on Wry		**Echin	o Conne	ecticus Health	Time	In 2:00 A	MM/PM Time Out 3:3	O AMPM				
Address 291 East Center St.		DI	D	H)	LHD	Manches	ter.					
Town/City Manchester	9				Purpo	Purpose of Inspection: Routine Pre-op						
Permit Holder	C	onnection of Pu	cut De ublic H	partment ealth	partment Reinspection Other							
FOODBORNE ILLNESS RISK F												
Risk factors are important practices or procedures identified as the most prevalent cont Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				dborne illnes compliand	Contract of the second	Interventions are control T=not in compliance		Proposition of the Control of the Co				
P=Priority item Pf=Priority foundation item C=Core item V=violation type				-				O=not observed R=repeat violation				
IN OUT N/A N/O Supervision	V	cos	_		OUT N/A		on from Contamination	V COS R				
1 Person/Alternate Person in charge present,	Pf	0	0	15	00	○ Food separated		P/C 0 0				
demonstrates knowledge and performs duties Certified Food Protection Manager for Classes 2,	1:1			160	X 0	VINNER	urfaces: cleaned & sanitized	P(P)COO				
2 0 Certified Flood Florection Manager for Classes 2, 3, & 4	С	0	0	17	0		ion of returned, previously tioned, and unsafe food	P 0 0				
Employee Health						Time/Tempera	ture Control for Safety					
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	0		18	00	O Proper cooking	time and temperatures	P/Pf/C O O				
4 Proper use of restriction and exclusion	P	0	0	19 🔾	00	Proper reneating	g procedures for hot holding time and temperatures	POO				
5 Written procedures for responding to vomiting and	Pf		0	21 0	50	Proper hot hold	ling temperatures	P 0 0				
diarrheal events	Pi	0		22	00	O Proper cold hole	ding temperatures	POO				
Good Hygienic Practices 6 O Proper eating, tasting, drinking, or tobacco products us	2 0/0			23 🐼	00	Proper date ma	rking and disposition	P/Pf O O				
7 No discharge from eyes, nose, and mouth	se P/C			24 🔾	0	and records	c health control: procedures	P/Pf/C O O				
Preventing Contamination by Hands							umer Advisory					
8 9 P Hands clean and properly washed	P/Pf	0	0	25	00	Consumer advisor	y provided: raw/undercooked food	Pf OO				
9 No bare hand contact with RTE food or a	P/Pf/C	0	0				ceptible Population					
pre-approved alternative procedure properly followed Adequate handwashing sinks, properly supplied/accessible	PIC	1 1000	0	26 0	90		used; prohibited foods not offered	P/C 00				
Approved Source	Colo			27	00		ves and Toxic Substances approved and properly used	POO				
11 500d obtained from approved source	P/Pf/C	0	0				es properly identified,					
12 C Food received at proper temperature	P/Pf		0	28	& O	stored & used	es properly identified,	PPC 0 0				
13 Food in good condition, safe, and unadulterated	P/Pf	0	0	Act and			ith Approved Procedures					
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29 🐼	00		h variance/specialized	P/Pf/C O O				
	OD RE	ΤΔΙΙ	PR	RACTICE	S	process/ROP ci	riteria/HACCP Plan					
Good Retail Practices are preventative measures t	to contro	I the a	additi	ion of path	ogens, cl	hemicals, and physical	I objects into foods.					
Mark OUT if numbered item is not in compliance V=violation type Mark i				for COS a			on-site during inspection	R=repeat violation				
OUT N/A N/O Safe Food and Water	V	cos	R	OUT		Proper Us	e of Utensils	V COS R				
30 Pasteurized eggs used where required 31 Water and ice from approved source	P	-	0	43 0	In-use ut	ensils: properly stor	ed	c 0 0				
32 O Variance obtained for specialized processing methods	P/Pf/C Pf	_	00	45 0	Single-us	equipment/linens: prop	perly stored, dried, & handled es: properly stored & used	Pf/C O O				
Food Temperature Control						sed properly	es. properly stored & used	P/C O O				
Proper cooling methods used; adequate equipment for	Df/C	0				Utensils	and Equipment					
lemperature control						d non-food contact s		P/Pf/C O O				
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf	0				designed, construct		1				
36 Thermometers provided and accurate		00					lled, maintained and used; and test strips available	Pf/C O O				
Food Identification				49	Non-food	d contact surfaces cl	lean	000				
Food properly labeled; original container	PfC	6	0			Phys	ical Facilities					
Prevention of Food Contamination							; adequate pressure	Pf O O				
38 Insects, rodents, and animals not present 39 Contamination prevented during food preparation, storage & display		0				g installed; proper ba		P/Pf/C O O				
40 Personal cleanliness	P/Pf/C	0				and waste water pro	operly disposed structed, supplied, & clean	P/Pf/C O O				
41 O Wiping cloths: properly used and stored	C	0		54 🔾	Garbage :	and refuse properly di	structed, supplied, & clean sposed; facilities maintained	Pf/C 0 0				
42 Washing fruits and vegetables	P/Pf/C			55 🔘 [Physical	facilities installed, m	naintained, and clean	P/Pf/C O O				
Permit Holder shall notify customers that a popy of the most recent inspection repr	ort is ava	ailable		56 0	Adequate	e ventilation and ligh	nting; designated areas used	c 0 0				
			. 1	Violetic	natural r	upper latex gloves n	not used per CGS §19a-36f					
Person in Charge (Signature)	erson in Charge (Signature) Date 7-19-2V Violations documented Date corrections due # Priority Item Violations Priori											
Person in Charge (Printed) Miguel Por ano			1	Priority F	oundation	on Item Violations	7-29-2	4 5				
Person in Charge (Printed)	6		\dashv	Core Ite	m Violati	ons	10-10-24	2,				
Inspector (Signature) Date 7-/	9-	24		Repeat I	Risk Fac	ic Health Intervention	n Violations ervention Violations	4				
1 1 2 2	1-0		\neg	Good Re	etail Prac	ctices Violations		3 /				
Inspector (Printed) Jose Kamicez				Require	s Reins	pection - check box	x if you intend to reinspect					
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	his orde	er to	COTT	ect any ir	rspectio	n violation identified	d by the food inspector or t	o hold, destroy,				

Food Establishment Inspe	ction I	Report	Page(∠ of ∠
LHD Manchester Inspection Report Continuation Shee		Date	-19-29	
Establishment Pastrani on Way Town Manch	ester			
TEMPERATURE ORGERY	ATIONS			
TEMPERATURE OBSERV Item/Location/Process Temp Item/Location/Process	7	1411		
	Temp		tion/Process	Temp
WIC Chicken 418 Cold Reptable cookline		Hand Sink		
Salsa 417 Cleam	38F	CUS tomer	BR 511	k 85F
Sour cream 417 tuna	38F			
Corned Beef AIF Potones cooked to	190F			
WIF ambient - 2 F under conter cooler at ba				
Cold free table cookline 387 milk	•			
diced ham 38F				
Chicken 38F				
OBSERVATIONS AND CORRECT	TIVE ACTI	ONS		
Item Violations cited in this report must be corrected within the time frames below	v, or as stated	d in sections 8-405.1	1 & 8-406.11	of the food code.
Number				
100+ 100 c (6 0 0 1 1 1 1 1 1 1 1				
LOPF interior of hand sink by WIC uncl	ean			
LOPE NO Soap at hand Sink by WIC				
490 VIC Shelves unclean				
276 (20) 1 1 6 6 111 11 1				
310 Unlabeled Squeeze bottles through	24_			
16PF interior of Salad cold prep table und	1000			
to the total of salas cots pick laple one	· lean	,		
16PF Soda gun nozzle & holder at 1	Dac UI	nclean		
289F unlabeled spray bottle w/ cleaning s	rolution	at bar		
		S Contraction		
	1 1 1			
Note All Food & Chemicals must be lal	peled			
Vote Hood due to be & cleaned July	AUGUS	5+		
Note Monitor WIC Food temps. All Food	5 in	WIC CUTT	ently ,	at 41F
Vote Test Strips & thermometer available			1)	
Note Good glove use observed				
Vote Discussed increasing cleaning Freque	encil n	E Solo a	c20 <	
Person in Charge (Signature)	- y	_		-19-29
nspector (Signature)				19-24
				AND THE RESERVE TO A STATE OF THE PARTY OF T

											1.04		
Risk	Category:	3 Food Estab	lishn	nen	t In	spec	tior	n Repor	t	Page 1	of <u>3</u>	_	
Estab	olishment t	ype Permanent Temporary Mobile Other_					- Da	ate: 6/2	6/24				
Estab	olishment	peoples choice,		4 septin	o Connec	cticat Health		,	- 4	AM/PM Time Out 12	:00	AM	PM
Addr	ess 170	middle Toke West	1		DI		LH	1D M)ester		($\overline{}$
Town	/city M	anchester					Pu	re-op					
		BOD		onnection of Pu	cut Dep	partment ealth	Re	einspection	1	Other			
		FOODBORNE ILLNESS RISK F	ACTO	RS.	ANE	PUB	LIC I	HEALTH	INTERV	ENTIONS			4
		are important practices or procedures identified as the most prevalent con-		actors c	of food	borne illnes	ss or inji	jury. Intervention	ons are contr	ol measures to prevent foodborne ill	ness or injur	y.	
		ed compliance status (IN, OUT, N/A, N/O) for each numbered				complian		OUT=not in c	-		N/O=not o	bserve	d
		Pf=Priority foundation item								cted on-site during inspection	R=repe	at viola	tion
IN	OUT N/A N		٧	cos	R	-	-	N/A N/O		tion from Contamination	V	533,000	
1 0	00	Person/Alternate Person in charge present,	Pf	0	0	15 0				d and protected			_
		demonstrates knowledge and performs duties Certified Food Protection Manager for Classes 2,		-		(10)	X			surfaces: cleaned & sanitize	d F(Pi)		0
2 0		3, & 4	С	0	0	17	0			tion of returned, previously litioned, and unsafe food	1		0
		Employee Health		4	- 19		/	Time	e/Tempera	ature Control for Safety			-
3 2		Management, food employee and conditional employee;	P/Pf			18	0			time and temperatures	P/Pf/	co	0
	/=	knowledge, responsibilities and reporting			\circ	19 🔾	0	O S Brop	er reheati	ng procedures for hot holdir	g I	0	_
4 👽	9	Proper use of restriction and exclusion	P	0	0		0	O Prop	er cooling	time and temperatures		0	0
5 🔾		Written procedures for responding to vomiting and	Pf	0		21 🗭	0	O Prop	er hot hold	ding temperatures		0	
17.5		diarrheal events Good Hygienic Practices				22 🐼				lding temperatures		0	
6 0	000	Proper eating, tasting, drinking, or tobacco products us	se P/C	0		23		7		arking and disposition lic health control: procedure	P/Pf	0	0
7 C	0	No discharge from eyes, nose, and mouth	C	0	-	24	0		records	ne neam control, procedure	S P/Pf/C		0
		Preventing Contamination by Hands					,	- Junia		sumer Advisory			
8 C	0 0	Hands clean and properly washed	P/Pf	0	0	25	0	Cons		ry provided: raw/undercooked for	d Pf	0	0
9 0	1000	No bare hand contact with RTE food or a	P/Pf/C			/		1	lighly Sus	sceptible Population	Balt 8		
0	36	pre-approved alternative procedure properly followed		1		26 0	0	Paste	eurized foods	used; prohibited foods not offere	d P/C		0
10)	19	Adequate handwashing sinks, properly supplied/accessible	PC		0	-				ives and Toxic Substance			
11 0	10	Approved Source Food obtained from approved source	DIDGO			27 🔾	0	Food	d additives	: approved and properly use	ed F	0	0
12 0		Food received at proper temperature	P/Pf/C		9	28	0			ces properly identified,	P/Pf/		0
13 😧		Food in good condition, safe, and unadulterated	-	0					ed & used	rith Approved Procedures			
14 0	000	Required records available: molluscan shellfish	T			20		Com		th variance/specialized	2040	T	
		identification, parasite destruction	P/Pf/C		\circ	29 🔾				criteria/HACCP Plan	P/Pf/0		0
- hour						ACTIC							
Mo	ek OUT if nur	Good Retail Practices are preventative measures											
	T N/A N/O	nbered item is not in compliance V=violation type Mark Safe Food and Water	in appro			or COS a	O	R COS		on-site during inspection	R=repea	_	
30	-	steurized eggs used where required	P	cos	0	OUT		e utensils: pr		se of Utensils	V		
31 (NAME AND ADDRESS OF THE OWNER, WHEN	ater and ice from approved source	P/Pf/C		0	44	I Itensi	ils/equinment	/linens: nro	perly stored, dried, & handled	Pf/C	00	_
32 🔾	O Va	riance obtained for specialized processing methods	Pf	_	0	45 🔾	Single	e-use/single-s	ervice articl	les: properly stored & used	P/C	100	_
		Food Temperature Control						es used prop			С		_
33		oper cooling methods used; adequate equipment for	Pf/C	0	0		. Tilli		Utensil	s and Equipment			
	ter	nperature control ant food properly cooked for hot holding		100-00						surfaces cleanable,	P(Pf)C	0	
35		proved thawing methods used	Pf							ted, and used			$\overline{}$
36		ermometers provided and accurate			00					alled, maintained and used;	Pf/C	0	0
	- Marie Paris Name -	Fand Identification	N244		100	49 X	Non-f	food contact	sanitizers,	and test strips available	6		
(37) X	Food prope	erly labeled; original container	PfC	0	0		TVOIT-1	ood contact		sical Facilities			$\underline{}$
		Prevention of Food Contamination	-0	1-1		50 🔾	Hot a	nd cold water	er available	e; adequate pressure	Pf	0	_
		dents, and animals not present	Pf/C	0	0	51 0	Plumb	bing installed	d; proper b	ackflow devices		0	$\stackrel{\sim}{\sim}$
		ion prevented during food preparation, storage & display	P(Pf)C			(52)	Sewa	ige and wast	e water pr	operly disposed	P/P	0	ŏ
40 0	Personal c	leanliness		0	-	53 🔾	Toilet	t facilities: pr	operly con	structed, supplied, & clean		0	
42	Washing fr	ths: properly used and stored ruits and vegetables	C	0						disposed; facilities maintained	C		0
			P/Pf/C	-		(5)X	Physic	ical facilities	installed, r	maintained, and clean	P/Pf(C		
Pern	nit Holder sha	Il notify customers that a copy of the most recent inspection rep	ort is ava	ailable		30 0	Natur	al rubber lat	ex aloves	hting; designated areas use not used per CGS §19a-36f	d C	0	\circ
		11-1-1	to	V .				ocumented	CX GIOVOS	Date corrections due		#	
Perso	n in Charge	(Signature) / Date (/	14/6	4		Priority	Item V	Violations					-
Doros	n in Chara-	(Printed) David 1 1/2 1/20	-/	I				dation Item \	/iolations	7/5/24		6	
r e150	n in Charge	a value availe		0		Core Ite			Inter a const	9126124		6	
Insped	ctor (Signat	ure) 7 . X7 MOUN Date 6/1/	n 174	1		Reneat	Risk F	Factor/Public	intervention Health In	on Violations tervention Violations		5	
		1 ALLKONO CHOMODIL	1-1		\neg	Good R	etail F	Practices Vic	lations	ACTION VIOLENDIS		7	_
	ctor (Printed					Require	es Rei	inspection -	check bo	x if you intend to reinspec		V	
Appe	al: The own	ner or operator of a food establishment aggrieved by t	his orde	er to	corre	ect any i	nspec	ction violation	on identifie	ed by the food inspector or	to hold,	destro	by,

Food Establishment Inspection Report

LHD Manch PS H Inspection Report Continuation Sheet Date Town_Manchester Establishment Dennies Chaire Item/Location/Process Temp Item/Location/Process Temp Item/Location/Process 98F hanaumshsink my undercounte Ataka Freezer 295-139F oor underbunt DIZZO COUCE internal chix wing **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 nozzies not clean 10 C sink not secure to wall Floor in back room back room- it not being used whitegranul 10 C Person in Charge (Signature) Inspector (Signature)

	ou Esta	blishment Ins			
<u>Manchester</u>		Inspection Report Continuat	on Sheet	Date <u>6/26/2</u>	24
blishment Plones (hoice.		chester		
Item/Location/Process	Temp	TEMPERATURE OB Item/Location/Proces		Item/Location/Process	Temp
Reminesoution 100000	Temp	item/200dioi//1000	remp	item/Eodation/1700033	Temp
Violations cited in t		SERVATIONS AND CO		NS n sections 8-405.11 & 8-406.11 of the	bo food and
m violations sized in the	ns report must be	corrected within the time ham	es below, or as stated if	1 sections 6-405.11 & 6-406.11 of the	ne 100a code.
c cove base	n/ 2 h/1	y not secured	+0111011		
DE CUHHINA LA	arde pa	Aville and a	1000911		
DE CVITTING 100	UIUS IITI	aviry gauge	1		
HX SPYV TO FE	dispial	101			
Massing H		arkina			
7 0 1 1 1 1 1 1 1 1 1 1 1	MATIN	MINITI			
PIL TOOM ALLOW	CAL DA				
CA FOOD aller	gy not	100 n site.	a.c., S. (a. 1	AA.C. (2) 22 22 24 A.	
thermome	gy not eters/au	100 n site.	wailabil	for Temps OF H	rud prod
thermome	gy not eters/au	100 n site.	wailabil	for Temps of to	oud prod
Food aller thermome	gy not eters fau	100 n site.	wa'labil	for Temps OF AC	rod prod
Food aller	gy not eters/au	100 n site.	wa'ilabil	for Temps OF HO	od prod
Food aller	gy not	100 n site.	wailabil	for Temps of H	od prod
Food aller	gy not	100 n site.	wailabil	for Temps OF HO	rod prod
Food aller	gy not	100 n site.	wa'ilabil	for Temps OF H	rod prod
thermome	gy not	100 n site.	wailabil	FOR Temps OF FO	od prod
Food aller	gy not	100 n site.	wailable	for Temps of to	od prod
Food aller	gy not	100 n site.	wailable	for Temps of H	and prod
th Food aller	gy not	100 n site.	Wa'llabil	FOR Temps OF AC	od prod
EX FOOD aller	gy not eters fau	100 n site.	Wa'llabil	FOR Temps OF FO	od prod
thermome	gy not	100 n site.	wailable	For Temps OF FO	od prod
the Food aller	gy not	100 n site.	wailable	for Temps of Ho	and prod
thermome	gy not eters fau	100 n site.	wailable	FOR Temps OF HO	rod prod
thermome	gy not eters fau	100 n site.	wailable	For Temps of to	od prod
thermome	gy not eters fau	100 n site.	wailable	For Temps of Ho	rod prod
on in Charge (Signature)	gy not eters fau	100 n site.	wailable	FOR Temps OF HO	5/24

Risk Category: 3 Food Establ	lishn	nent	Ins	pecti	ion Rep	ort	Page 1 c	of_2_	
Establishment type: Permanent Temporary Mobile Other					Date:	1-18-	24		
Establishment Pepe'S Restaurant		treeting!	Connecticu	" Healing	Time In_	12:00	AMPM Time Out 1:3	2 AM/FM	
Address 300 WMT		DF		1)	LHD M	anches	ster		
Town/City Manchester					Purpose	of Inspection	n: Routine Pro	e-op	
Permit Holder Andrew Ala	Co	onnecticu of Pub	rt Depar olic Healt	artment alth Reinspection Other					
FOODBORNE ILLNESS RISK FA	ACTO	RS A	AND	PUBL	IC HEAL	TH INTER\	/ENTIONS		
Risk factors are important practices or procedures identified as the most prevalent cont								ss or injury.	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	tem	IN	=in co	mpliance	OUT=no	t in compliance	N/A=not applicable N/	O=not observed	
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appro	priate	box for C	COS and/or F	R COS=corre	ected on-site during inspection	R=repeat violation	
IN GUT N/A N/O Supervision	V	cos	R	IN &	UT N/A N/O	Protec	tion from Contamination	V COS R	
Person/Alternate Person in charge present,	De			15			ed and protected	P/C 0 0	
demonstrates knowledge and performs duties	Pf	0		16)0	% 0	Food-contact	surfaces: cleaned & sanitized	P/PCOO	
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0		_ /			sition of returned, previously ditioned, and unsafe food	POO	
Employee Health		SS. (SS. C.)					rature Control for Safety		
	T	TT		18 0			ng time and temperatures	P/Pf/C O O	
wanagement, rood employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	0) -	19 0		Proper reheat	ting procedures for hot holding		
4 Proper use of restriction and exclusion	Р	0				roper cooling	g time and temperatures	POO	
5 Written procedures for responding to vomiting and	De			21 0 5	000	Proper hot ho	Iding temperatures	POO	
diarrheal events	Pf	0		22			olding temperatures	POO	
Good Hygienic Practices			2	23 🐼	000	Proper date m	narking and disposition	P/Pf O O	
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0	이.	24 0		Time as a pub	olic health control: procedures	P/Pf/C O O	
7 No discharge from eyes, nose, and mouth	С	0	일['	24		and records	W.	PIPIIC O	
Preventing Contamination by Hands				/			sumer Advisory		
8 9 Hands clean and properly washed	P/Pf	0	2 2	25 00 0			ory provided: raw/undercooked food	Pf OO	
9 No bare hand contact with RTE food or a	P/Pf/C	0					sceptible Population		
pre-approved alternative procedure properly followed Adequate handwashing sinks, properly supplied/accessible	Drio			26 0			ds used; prohibited foods not offered	P/C O O	
	Pf/C		_	7			itives and Toxic Substances		
Approved Source 11	Torogo	Tol		27	S. S		s: approved and properly used	POO	
12 C Food received at proper temperature		00		28 🐼 🤇			ices properly identified,	P/Pf/C O	
13 C Food in good condition, safe, and unadulterated		0	_		-	stored & used	with Approved Procedures		
Poquired records available; mallugger shallfish				1	- KNA	Compliance v	with variance/specialized		
14 O o identification, parasite destruction	P/Pf/C	0		29 00/			criteria/HACCP Plan	P/Pf/C O	
				CTICES	S				
Good Retail Practices are preventative measures t	o contro	ol the ac	ddition	of patho	gens, chemi	cals, and physic	cal objects into foods.		
Mark OUT if numbered item is not in compliance V=violation type Mark i				COS an			d on-site during inspection	R=repeat violation	
OUT N/A N/O Safe Food and Water	V	cos	R	OUT		Proper U	Jse of Utensils	V COS R	
30 Pasteurized eggs used where required	Р	_				ils: properly st		c 0 0	
31 O Water and ice from approved source	P/Pf/C		의년	44 O U	tensils/equip	ment/linens: pr	operly stored, dried, & handled	Pf/C O O	
32 Variance obtained for specialized processing methods	Pf	0	의년	45 O S	ingle-use/sin	gle-service arti	cles: properly stored & used	P/C O O	
Food Temperature Control Proper cooling methods used; adequate equipment for	-	T T	- 4	46 0 6	loves used			000	
temperature control	Pf/C	0	$\supset \mid \vdash$	TE	ood and no		ils and Equipment		
34 O Plant food properly cooked for hot holding	Pf	0	 				t surfaces cleanable, cted, and used	P/Pf/C O O	
35 O Approved thawing methods used		0		V			talled, maintained and used;	4	
36 C Thermometers provided and accurate	Pf/C	0	514				, and test strips available	Pf/C O O	
Food Identification		1-1				ntact surfaces		1000	
37 Food properly labeled; original container	Pf/C	0		J7"	200		sical Facilities		
Prevention of Food Contamination				50 O H	ot and cold		le; adequate pressure	Pf (O (O	
38 O Insects, rodents, and animals not present	Pf/C	0					backflow devices	P/Pf/C O O	
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0					properly disposed	P/Pf/C O O	
40 Personal cleanliness	Pf/C	0					nstructed, supplied, & clean	Pf/C O O	
41 O Wiping cloths: properly used and stored	С	0		54 O G	arbage and	refuse properly	disposed; facilities maintained	c 00	
42 Washing fruits and vegetables	P/Pf/C	10					maintained, and clean	P/Pf/C O O	
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ailable.	5				ghting; designated areas used	c 0 0	
	E						not used per CGS §19a-36f	7	
Person in Charge (Signature)	8121	4			s documer em Violation		Date corrections due	#	
A.I. A		•				em Violations	7-20-24		
Person in Charge (Printed)					Violations		10-18-24	4	
	18-	21	. 0	Risk Fact	or/Public H	ealth Intervent	tion Violations		
$\langle \rangle 2$	(0)	<u>~ T</u>		Sood Re	tail Practice	S Violations	ntervention Violations	6	
Inspector (Printed) 3050 Samire2			F	Requires	Reinspect	tion - check b	ox if you intend to reinspect		
Appeal: The owner or operator of a food establishment aggrieved by the	his orde	er to c	orrec	t any in	spection vio	olation identifi	ied by the food inspector or t	o hold, destroy	
or dispose of unsafe food, may appeal such order to the	Directo	or of H	lealth	, not lat	er than fort	y-eight hours	after issuance of such order	r.	

Food Esta	ablishment Inspec	ction Report	Page 2 of 2
LHD Manchester	Inspection Report Continuation Shee		Date 7-18-24
Establishment Pepels Restaura	nt Town Manchest	rec	7 10
	TEMPERATURE OBSERVA	ATIONS	
Item/Location/Process Temp	Item/Location/Process		ocation/Process Temp
2 door RIC True	Pizza Station cold prop	Hand Si	of by 2 bay 93F
1 Chicken wing 41F	Chicken	40F	, ,
meatball 41F	Pepperani	40 F	
Sheed MOZZ 41F	Sauce	40 F Basement	W/C Rastrami
1. Sliced tomatoes 41F	Shred Mozz	40F	Ham
Cold Preptable	Chicken cooked to	170F	Block cheese
Beef 38F	Salad Bar Repperoni	39F	
5liced charge 39F	Boiled egg	37F	
	BSERVATIONS AND CORRECT De corrected within the time frames below	FIVE ACTIONS	05 11 8 9 406 11 of the food and
Item Number	be corrected within the time frames below	, or as stated in sections 0-40	5.11 & 6-400.11 of the lood code.
4 - 1		,	
490 Blue wire Shelving	by 2 bay sipk	unclean	
490 Ceiling unclean	throughout cookline	•	
490 Shelving by ware			
16 PF Deli Slicer in baser	ment unclean		
	ling fan cover unclear	1	
490 Shelving in WIC of	~ !		
47c WIF Gasket damag			
			×
11-1 01-1-1-1-1-1	Z 1 - 21		
Note PIC knowledgeable	e on food Safety.	av av	
Note remove tools from.	kitchen area. Store	in designated an	rea away From Kitchen.
Note Discussed Proper da	te marking		·
Note Routine pest control No	signs of pest.		
Note Discussed increasing	cleaning Frequency a	s needed.	
Note Good glove use	observed 1		1
Person in Charge (Signature)	- Ch		Date 7/18/24
Inspector (Signature)	2		Date 7-18-24

sk Category: 3 Food Establishment Inspection Report Page 1 of										
Establishment type: Permanent Temporary Mobile Other					Date:	7/15/23				
Establishment Pizza Mia		teeting	Conne	eticut Meality	Time In_	AM/PM	Time Out_	AM/PM		
Address 55 East Center St			D	H)	LHD/Y	Janchester	-			
Town/City Marchester					Purpose	of Inspection: R6	outine Pre-	-op		
Permit Holder	Co	onnectic of Pu	ut Dep blic He	partment ealth Reinspection Other						
FOODBORNE ILLNESS RISK FA	ACTO	RS	ANI	D PUBLI	C HEAL	TH INTERVENTION	S			
Risk factors are important practices or procedures identified as the most prevalent contr		ctors o	f food	lborne illness d	or injury. Inte	erventions are control measures to	o prevent foodborne illnes	s or injury.		
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				compliance				=not observed		
P=Priority item Pf=Priority foundation item C=Core item V=violation type				T T T						
IN OUT N/A N/O Supervision	V	cos	R		UT N/A N/C		Charles and the second	V COS R		
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	(Pf)	0	0			Food separated and prote		F(C)O O		
Certified Food Protection Manager for Classes 2,	\sim			16 0 0	00	Food-contact surfaces: cl Proper disposition of retu		P/Pf/C O O		
2 O Standa 1 ood 1 loteddolf Manager for Glasses 2,	(c)		0	17 0		served, reconditioned, an		POO		
Employee Health						Time/Temperature Cont				
Management food employee and conditional employees	Tarne			18 0	200	Proper cooking time and		P/Pf/C O O		
knowledge, responsibilities and reporting	P/Pf		0	19 0	000	Proper reheating procedu	ures for hot holding	POO		
4 O Proper use of restriction and exclusion	Р	0	0			Proper cooling time and t		P 0 0		
Written procedures for responding to vomiting and	Pf	0				Proper hot holding tempe		P00		
diarrheal events						Proper cold holding temp		POO		
Good Hygienic Practices	0/0			23 🔾		Proper date marking and		P/Pf O O		
6 O Proper eating, tasting, drinking, or tobacco products use 7 O No discharge from eyes, nose, and mouth	e P/C	0		24 0		Time as a public health c	ontrol: procedures	P/Pf/C		
Preventing Contamination by Hands	C	0	$\overline{}$			and records Consumer Adv				
8 O Hands clean and properly washed	P/Pf	0	0	25 0		Consumer advisory provided:		Pf O O		
No hard hand contact with DTE food or o				20 0		Highly Susceptible F		11100		
pre-approved alternative procedure properly followed	P/Pf/C		0	26 0	00	Pasteurized foods used; prohib		P/C 00		
10 O Adequate handwashing sinks, properly supplied/accessible	0	0			ood/Color Additives and T					
Approved Source				27 0		Food additives: approved	and properly used	POO		
11 O Food obtained from approved source	P/Pf/C			28 0		Toxic substances properl	ly identified,	P/Pf/C O O		
12 O O Food received at proper temperature			0	20		stored & used		11111000		
13 O Food in good condition, safe, and unadulterated Required records available: molluscan shellfish	P/Pf	0	9			Conformance with Appro				
identification, parasite destruction	P/Pf/C	0	0	29 0		Compliance with variance process/ROP criteria/HA0		P/Pf/C O		
	OD RE	ΤΔΙΙ	PR	ACTICES	3	process/NOF citteria/17/A	COFFIAII			
Good Retail Practices are preventative measures to						nicals, and physical objects in	to foods.	ALCOHOLD IN THE		
				for COS and		COS=corrected on-site dur		R=repeat violation		
OUT N/A N/O Safe Food and Water	V	cos	_	OUT		Proper Use of Uten		V COS R		
30 Pasteurized eggs used where required	Р	0	0	43 O In	-use utens	sils: properly stored		c 00		
31 O Water and ice from approved source	P/Pf/C	0	0	44 O Ut	tensils/equi	ipment/linens: properly stored	d, dried, & handled	Pf/C O		
32 O Variance obtained for specialized processing methods	Pf	0	0			ingle-service articles: properly	y stored & used	P(C)00		
Food Temperature Control		,		46 O G	loves use			C 00		
Proper cooling methods used; adequate equipment for	Pf/C	0	0	F		Utensils and Equ				
temperature control 34	Pf					on-food contact surfaces c		P/PICO		
35 O Approved thawing methods used		0		1//		signed, constructed, and using facilities: installed, main				
36 Thermometers provided and accurate		0		148 (ents, sanitizers, and test s		Pf/C O		
Food Identification		1				ontact surfaces clean	inpo aranabio	C 00		
37 Food properly labeled; original container	Pf/C	0	0			Physical Facil	lities			
Prevention of Food Contamination				50 O H	ot and col	d water available; adequat		Pf 00		
38 O Insects, rodents, and animals not present		0		51 P	lumbing in	stalled; proper backflow de	evices	P/P(IC)		
39 Contamination prevented during food preparation, storage & display	P/Pf/C					d waste water properly disp		P/Pf/C O O		
40 Personal cleanliness		0				ies: properly constructed, s		Pf/C O O		
41 Wiping cloths: properly used and stored 42 Washing fruits and vegetables	C	0	_			refuse properly disposed; fa		C 0 0		
	P/Pf/C					cilities installed, maintained		P/Pf/C O O		
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is av	ailable				entilation and lighting; desi per latex gloves not used p		C O O		
		,	-		s docume		corrections due	#		
Person in Charge (Signature) Jump Date 7/1	15-/2	24		- Control of the Cont	em Violatio	The second secon				
40.00	Priority Foundation Item Violations 10 augs									
Person in Charge (Printed) / UM Wellaha				Core Item	Niolation:	s 90d	Hus	7.		
Inspector (Signature)	E 1-	13				Health Intervention Violatio	ons	4		
Inspector (Signature) Jenus Payre Date 7//	2/0	- >				/Public Health Intervention	violations	3		
Good Retail Practices Violations Requires Reinspection - check box if you intend to reinspect										
Appeal: The owner or operator of a food establishment aggrieved by the	nis ord	er to	corr	ect any ins	spection v	iolation identified by the f	food inspector or to	hold destroy		
or dispose of unsafe food, may appeal such order to the								. Hold, desiroy,		

Foo	<u>d Esta</u>	<u>blishment l</u>	Inspect	ion R	eport	Page	<u></u>	<u> </u>
LHD Manchester		Inspection Report Conti				Date 7/1	5/2	33_
Establishment Pizza N	اه	Town <u>\(\) \</u>	nanche	ster		•		
	\	TEMPERATURE	OBSERVATI	IONS				Parket and the
Item/Location/Process	Temp	Item/Location/Pro	ocess	Temp	, Item/Loca	tion/Process		Temp
Tomato Sliced	38F	Sauce	17	71 F	Handsu)L	>	855
Diced	38F				. 1			
Lasagra	39F				Dishm	achere	710	60F
Salami	39F					1		
Tonato	38 F							
EggiPlant	37 F							
Sauce	355							
Creamer	37F							
VE-1-E2-15-05		SERVATIONS AND						
Item Number PF No person		corrected within the time			1		of the fo	ood code.
		e. Emplo				ined	+1	be
		de - then I						
	Λ.	correct. 01		9				n site
duam	all+	mes prep/	CONKER	76 0	tc.		,	642
1100		1 1 1 7			· 100	1	1- 1	0
		s for heat	200			4 /		10
46c Single us	e Cup	as a scoop	Mult	· loco	ctions)		, , .	,
22P garie bus	•		A con-		A	ded.		
		smaller co						
Dutar.	discor	d. Do not	leave ou	d, chi	ill, lear	ve orde	etc.	
	and h	rolder rust	y, wo	dear				
510 Mop buch	let wir	th waste	water (stand	Ting)			
to go con	tainers	not potec						
Ice at ba	rnot	covered/p	nketd	>thi:	sis Nortz	consu	ump	thon OK.
45c Hallow st	rers no	t studpope	rly			@ 12	05	
Hotwate	rin 1	Lestroom	exceed	do 11'	SE MAX	(a) 12		
			Vani	اممدا	laga-ORIE	A SERVICE	Date: Fecha Empleado pass Wi	emp
Frager Mill	ules Rr	erappoval	- Doric	de Son	bag ORIG		IEN BLUE	
Bread crimb		ction notion				N S	2 1 1	8751
	<u> </u>	6						
Person in Charge (Signature)	V	muteur	m			Date 7	//	5/24
Inspector (Signature)	ayri					Date 7	115	124
Distribut	ion: 1st - White	e - Health Department 2	nd - Yellow - Owr	ner/Operato	r/Person in Charg	je		rs.

sk Category: 3 Food Establishment Inspection Report Page 1 of 2								
Establishment type: ermanent Temporary Mobile Other					Date:	7-3-24		
Establishment Poke Don		teening	Conne	ecticor Healing	Time In	10:30 AMP		· 00 AMPI
Address 179 Deming St. #12		DI		H)	LHD V	lancheste		
Town/City Manchester	1				Purpose	of Inspection:	Routine Pre	e-op
Permit Holder A on Zhuo		of Pul	blic H	0.17431 a	Reinspe		her	
FOODBORNE ILLNESS RISK F. Risk factors are important practices or procedures identified as the most prevalent cont								ss or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				compliance				D=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type			7.1					R=repeat violation
IN OUT N/A N/O Supervision Person/Alternate Person in charge present,	٧	cos	R		UT N/A N/O	Food separated and	om Contamination	V COS R
demonstrates knowledge and performs duties	Pf	0	\circ	100	× 0		es: cleaned & sanitized	P/C () ()
Certified Food Protection Manager for Classes 2, 3, & 4	79	0	0	17 🐼 🤇	5 M		f returned, previously	P 00
Employee Health					/	Time/Temperature		WHEN STATE OF THE
Management, food employee and conditional employee;	P/Pf	0		18		Proper cooking time	and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting	Р.				000	Proper reheating pro	ocedures for hot holding	P 0 0
Writton propodures for recognition to comiting and				20 0		Proper cooling time		P O O
diarrheal events	Pf	0	이	22 🐼		Proper cold holding		P 0 0
Good Hygienic Practices			m k	0309		Proper date marking		PØ00
6 % Proper eating, tasting, drinking, or tobacco products us				24 8		Same and the second sec	alth control: procedures	P/Pf/C O O
7 No discharge from eyes, nose, and mouth Preventing Contamination by Hands	С	0				and records		177 110 0
8 P Hands clean and properly washed	P/Pf	0		25 0		Consumer advisory prov	ided: raw/undercooked food	Pf OO
No bare hand contact with RTF food or a				20 00		Highly Suscepti		Pf O O
pre-approved alternative procedure properly followed	P/Pf/C	0	9	26 0	0		prohibited foods not offered	P/C 00
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0		Fo		and Toxic Substances	
Approved Source 11	1				0		oved and properly used	POO
11 9 5 5 5 od obtained from approved source 12 6 Food received at proper temperature	P/Pf/C		의	2800	X O	Toxic substances pro	operly identified,	PPf/C -
13 Food in good condition, safe, and unadulterated	P/Pf	-	읭			stored & used Conformance with A	anroyed Precedures	0 -
14 Required records available: molluscan shellfish	Г			00 0	/100	Compliance with var		I and I all a
Identification, parasite destruction	P/Pf/C		9	- 2		process/ROP criteria		P/Pf/C
				RACTICES				
Good Retail Practices are preventative measures to Mark OUT if numbered item is not in compliance V=violation type Mark it								
OUT N/A N/O Safe Food and Water	v approp	cos	-	for COS and	d/or R	COS=corrected on-sit		R=repeat violation
30 Pasteurized eggs used where required	P	100000			-use utens	Proper Use of sils: properly stored	Oterisiis	V COS R
31 Water and ice from approved source	P/Pf/C	0	0	44 6 UI	tensils/equi	pment/linens: properly s	stored, dried, & handled	Pf/C O O
32 O Variance obtained for specialized processing methods	Pf	0	0	45 O Si	ngle-use/si	ngle-service articles: pro	operly stored & used	P/C 0 0
Food Temperature Control	<u> Paradi</u>	45		46 O G	loves use			000
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0	\circ	I I E	and and n	Utensils and on-food contact surface	Equipment	
34 O Plant food properly cooked for hot holding	Pf	0				signed, constructed, a		P/Pf/C O
35 O O Approved thawing methods used		0		I V			maintained and used:	
36 C Thermometers provided and accurate	Pf/C	0	0	40 Cl	eaning ag	ents, sanitizers, and te		Pf/C
Food Identification Food properly labeled; original container		-		49 N	on-food co	ontact surfaces clean		(000
Prevention of Food Contamination	PfC	0	9	50 011	-1 11	Physical I	Facilities	
38 Insects, rodents, and animals not present	Pf/C	0		51 O P	ot and con	d water available; ade stalled; proper backflo	quate pressure	Pf O O
39 Contamination prevented during food preparation, storage & display	P/Pf/C			52 O S	ewage and	d waste water properly	disposed	P/Pf/C O O
40 Personal cleanliness		0		53 O To	oilet faciliti	es: properly construct	ed, supplied, & clean	Pf/C 0 0
41 O Wiping cloths: properly used and stored	C	0		54 O G	arbage and	refuse properly dispose	ed; facilities maintained	C 0 0
42 Washing fruits and vegetables	P/Pf/C		-			ilities installed, mainta		P/Pf/C O O
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable.		06) & A	dequate ve atural rubb	entilation and lighting; per latex gloves not us	designated areas used sed per CGS §19a-36f	000
Person in Charge (Signature)	3/2	U		Violation	s docume em Violatio	ented D	ate corrections due	#
Person in Charge (Printed) Albert Zhan	-1-	-	\neg	Priority Fo	oundation	Item Violations	7-13-24	2
Inspector (Signature)		Core Item Violations Risk Factor/Public Health Intervention Violations Repeat Risk Factor/Public Health Intervention Violations 4						
17.00		Good Retail Practices Violations						
Inspector (Printed) OSE KamiceZ				Requires	Reinsped	ction - check box if yo	ou intend to reinspect	
Appeal: The owner or operator of a food establishment aggrieved by the	Directo	er to c	corre	ect any ins	spection v	iolation identified by	the food inspector or to	hold, destroy,

	Foo	d Esta	blishm	nent Inspe	ction R	Report	Page Z	of <u>2</u>		
LHD_M	anchester			eport Continuation She			Date_7-3-	-24		
1 55	nent Poke Do	\cap	1	own Manche	ster			•		
			The second second second	RATURE OBSERV	(T.					
	Location/Process Plable by Fryer	Temp	WIFam	bien-	Temp		cation/Process	Temp 10F		
COICE PIC	Cooked onion	91F		ne coles/aw			Hand Sink	115F		
	milk	41F	1	Shrimp 414	-					
Hot	hold (ice Salmon	200F AIF	4.411-13	brown rice	39F 150F					
WIC	Chicken	4/F	rion Holo	DODDI) (ICE	ISP					
	Shrimp	41E								
- 1	Cas .	41F OB	SERVATIO	NS AND CORREC	TIVE ACTIO	NS				
Item	Violations cited in this			in the time frames below			5.11 & 8-406.11 of the	e food code.		
Number							National Marketon			
2C	NO CEPM (on site	, Allen	(CFPM) CON	me in	half u	vay throu	194.		
37C	unlabeled squ	reeze ba	ttles th	roughout	W/ Sauce	:5				
43 C	Whisks Store	ed in s-	randing	water by to	ea Stati	oΛ				
289										
23 PF										
49 C	WIF Floor	unclea	Λ							
490	exterior			a						
490	Shelving un									
56C	Hood baffles	unclean	. Hood	use due to	he cle	aned \	200 2024			
490	Floor under	PAULOM	of work	20		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	10,000			
	chlorine buc	bot of	Grant	ine at noo	m (co	S) Como	le to 500	- 00		
49C	interior of	Capine	- 1100	heal sink	t 20-	100 100 10		21/(,		
	Parasite des									
Note	^							1 -02 00		
1000	P C1111 M	101 BC	011 3(05 000	000 Op	to Son	100/3. 300	1 1/1014		
	employees	od to	06 05	(42 /1ec	cally call	10 CD	= -2 is l	Short		
	aré cover				nigore	THE FO	F WICH E	the cive		
Nada	until a				• 1					
1000	monitor h	or C	na col	o prep on	IT.	Co. 10				
More.	Keep lids	UN T	11 to 07	u vice cold	but.	LOOD)	when not.	serving.		
	Pest control									
	Test Strips	171	mometer	available		1	1	(,,		
Person in	Charge (Signature)	1/	6				Date 7/3	24		
Inspector	(Signature)	2 1	12				Date /-3	-24		
	0									

Risk Category: 2 Food Estab	2 Food Establishment Inspection Report Page 1 of 2									
Establishment type: Permanent Temporary Mobile Other			48.			ate: /	1 1	10 VIII VIII VIII VIII VIII VIII VIII VI	-	
Establishment POPS HOT DIGGITY DOGS		The state of the s	Connec	sticur Heat		me In	2		30 AM/PM	
Address AE - 47585			DI	LI)		HD	mana	hester	AIVII FIVI	
Town/City Manchester							e of Inspection:	Routine P	re-op)	
Permit Holder Anthony Johnson	Co		ut Dep	epartment Reinspection Other						
FOODBORNE ILLNESS RISK F										
Risk factors are important practices or procedures identified as the most prevalent cont Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if				borne illne compliar			erventions are contro not in compliance		ness or injury. I/O=not observed	
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in							ted on-site during inspection		
IN OUT N/A N/O Supervision	V	cos	R		QUT		o Protecti	on from Contamination	V COS R	
1 6 Person/Alternate Person in charge present,	Pf	0					Food separated		P/C 0 0	
demonstrates knowledge and performs duties Certified Food Protection Manager for Classes 2,	С			16 2	/	0		urfaces: cleaned & sanitized ion of returned, previously	The same of the sa	
3, & 4				11				tioned, and unsafe food	POO	
Employee Health Management, food employee and conditional employee;				18				ture Control for Safety	Dintiol Co.	
knowledge, responsibilities and reporting	P/Pf	0		19				time and temperatures g procedures for hot holdin	P/Pf/C O O	
4 6 Proper use of restriction and exclusion	Р	0	0	20 🔾	0	0	Proper cooling	time and temperatures	P 0 0	
Written procedures for responding to vomiting and diarrheal events	Pf	0		21 🔾	0	00	Proper hot hold	ing temperatures	POO	
Good Hygienic Practices			_	22 🔾			Proper cold hol	ding temperatures rking and disposition	P O O	
6 O Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0				rime as a publi	c health control: procedure	9	
7 O No discharge from eyes, nose, and mouth	С	_		24 🔾	0		and records	o modian domaios, prodedate	P/Pf/C O	
Preventing Contamination by Hands						/		umer Advisory		
8 O Hards clean and properly washed	P/Pf	0		25 🔾	0	0		y provided: raw/undercooked foo	d Pf O O	
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 🔾		0		ceptible Population used; prohibited foods not offere	1 100	
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0		20	10	10000	ood/Color Additi	ves and Toxic Substance	d P/C O O	
Approved Source	HI KAE			27 0	0			approved and properly use		
11 Food obtained from approved source	P/Pf/C			28	1		Toxic substance	es properly identified,		
12 Food received at proper temperature 13 Pood in good condition, safe, and unadulterated		0	-	20			stored & used		P/Pf/C O	
Required records available; molluscan shallfish	P/Pt	0	9		1			th Approved Procedures h variance/specialized		
identification, parasite destruction	P/Pf/C	0	0	29 🔾	0			riteria/HACCP Plan	P/Pf/C 🔾	
	OD RE									
Good Retail Practices are preventative measures t										
	in appro		-	-	_	R		on-site during inspection	R=repeat violation	
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	P	-	R	OUT		o uton	sils: properly stor	e of Utensils	V COS R	
31 Water and ice from approved source	P/Pf/C			44	Utens	sils/equ	inment/linens; pror	perly stored, dried, & handled	C O O	
32 O Variance obtained for specialized processing methods	Pf		0	45 🔾	Single	e-use/s	ingle-service article	es: properly stored & used	P/C 0 0	
Food Temperature Control				46 🔾	Glov	es use	d properly		. C O O	
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0			I-			and Equipment		
34 O Plant food properly cooked for hot holding	Pf	0		47 🔾			ion-tood contact s signed, construct	surfaces cleanable,	P/Pf/C O O	
35 O Approved thawing methods used		0						lled, maintained and used;	1	
36 C Thermometers provided and accurate		0		48				and test strips available	Pf/C O	
Food Identification				49 🔾	Non-	food c	ontact surfaces c	lean	C O O	
37 Food properly labeled; original container Prevention of Food Contamination	Pf/C	0	0	50				ical Facilities		
38 Insects, rodents, and animals not present	Pf/C	0					id water available istalled; proper ba	; adequate pressure	Pf O O	
39 Contamination prevented during food preparation, storage & display	P/Pf/C						d waste water pro		P/Pf/C O O	
40 Personal cleanliness	-	0	-	53 🔾	Toile	t facilit	ies: properly cons	structed, supplied, & clean	Pf/C O O	
41 Wiping cloths: properly used and stored	С	0		54 🔾	Garba	age and	d refuse properly di	sposed; facilities maintained	C O O	
42 Washing fruits and vegetables	P/Pf/C			55 0	Phys	ical fa	cilities installed, n	naintained, and clean	P/Pf/C O O	
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable.		56	Natu	uate v	entilation and ligh	nting; designated areas use not used per CGS §19a-36f	d C 0 0	
A A L	17	20	1	Violati				Date corrections due		
Person in Charge (Signature)	11-	1		Priority					-	
Person in Charge (Printed)		1					Item Violations			
orson in onarge (Frinted)	,			Core It				n Violations		
Inspector (Signature) 7 Date (0/1	4	Repeat Risk Factor/Public Health Intervention Violations								
Inspector (Printed) / MILVEN FRANCIS	1		Good Retail Practices Violations							
Appeal: The owner or operator of a food establishment draginued by the	bio - '		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, 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.										

Food Establishment Inspection Report Inspection Report Continuation Sheet LHD Manchest DOOS TOWN Manchester **TEMPERATURE OBSERVATIONS** Item/Location/Process Temp Item/Location/Process Temp Item/Location/Process Temp **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

Person in Charge (Signature)

Date 6/17/2 Y

Inspector (Signature)

Distribution: 1st - White - Health Department 2nd - Yellow - Owner/Operator/Person in Charge

Risk Category: 7 Food Establ	7 Food Establishment Inspection Report Page 1 of											
Establishment type: Permanent Temporary Mobile Other			ST 10	-17.7		ate: V	117174					
Establishment DY 8 T 7 8 M MKEY		4 Registre	Connec	zicus Healing		me In_	11:15 AM/PM	// Time Out j 2	2:00	AM/PM		
Address 194 BUCKIUNO HILLS Dr. #2182		DI		H)	LI	HD V	nanches	HCK				
Town/City Manchester					P	Purpose of Inspection: Pre-op						
Permit Holder		of Pul	blic He			einspe		0342 11				
FOODBORNE ILLNESS RISK FA Risk factors are important practices or procedures identified as the most prevalent cont									ss or injuny	1 1 1 1 1		
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered in				compliar				AND THE RESERVE OF THE PARTY OF	0=not obs	100 - 100		
P=Priority item Pf=Priority foundation item C=Core item V=violation type		_	opriat	e box fo	or COS	and/or	R COS=corrected on	-site during inspection	R=repeat	violation		
IN OUT N/A N/O Supervision	V	cos	R	IN	OUT	N/A N/O	Protection fro	om Contamination	ν	COS R		
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0	16		0	Food separated and	protected es: cleaned & sanitized		00		
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 ①	1		Proper disposition of served, reconditioned	returned, previously	Р	00		
Employee Health			, III				Eme/Temperature					
Management, food employee and conditional employee;	P/Pf			18 🔾	0	00	Proper cooking time	and temperatures		00		
knowledge, responsibilities and reporting 4 Proper use of restriction and exclusion	Р			19 (00	02	Proper reheating pro Proper cooling time a	cedures for hot holding		00		
5 Written procedures for responding to vomiting and				21	_	00	Proper hot holding te	mperatures		00		
diarrheal events	Pf	0	0	22 @	10	00	Proper cold holding t	emperatures	P			
Good Hygienic Practices 6 O Proper eating, tasting, drinking, or tobacco products us	- D/O			23 🐼	0	00	Proper date marking		P/Pf	00		
7 O No discharge from eyes, nose, and mouth	e P/C	00		24 🗢	0	Ø0	and records	Ith control: procedures	P/Pf/C	00		
Preventing Contamination by Hands				TAIL		,	Consumer	Advisory				
8 O Hands clean and properly washed	P/Pf	0	0	25 🔾	0	6	Consumer advisory provi	ded: raw/undercooked food	Pf	00		
9 No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	0	0	00.0	10	1	Highly Susceptil	ble Population				
10 Adequate handwashing sinks, properly supplied/accessible	PIC			26	0	S		prohibited foods not offered nd Toxic Substances	P/C	00		
Approved Source)		27 🔾	0	0		oved and properly used	Р	00		
11 C Food obtained from approved source	P/Pf/C	0	0	(28)	×		Toxic substances pro	operly identified,	P/Pf/C	-		
12 O Food received at proper temperature Food in good condition, safe, and unadulterated		0		8	18		stored & used		GIPIIC.	% O		
Paguired records available; mallugger shallfigh	P)Pf						conformance with Ap Compliance with vari					
14 Identification, parasite destruction	P/Pf/C	0	\circ	29 🔾		D	process/ROP criteria		P/Pf/C	00		
GO GO	OD RE	TAIL	. PR	ACTIC	ES		NATIONAL PROPERTY OF	ELECTRONIAN STEELING		li kari		
Good Retail Practices are preventative measures t Mark OUT if numbered item is not in compliance V=violation type Mark item.	in approp											
OUT N/A N/O Safe Food and Water	V	cos		OUT	-	- N	COS=corrected on-site Proper Use of I	The state of the s	R=repeat	cos R		
30 Pasteurized eggs used where required	Р	0	-			se utens	ils: properly stored	Diensiis	C	00		
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C		0	44 (Uten	sils/equip	oment/linens: properly s	tored, dried, & handled	Pf/C	00		
32 Variance obtained for specialized processing methods Food Temperature Control	Pf	0	0				ngle-service articles: pro I properly	perly stored & used	P/C	00		
Proper cooling methods used; adequate equipment for	7,00	ПП		40	GIOV	es usec	Utensils and	Equipment	10	00		
temperature control	Pf/C	32708		47 C			on-food contact surfac	es cleanable,	P/Pf/C			
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf	0		4,			igned, constructed, ar		FIFIIC	00		
36 C Thermometers provided and accurate	Pf/C	00	\approx	48 🗆			ig facilities: installed, r ents, sanitizers, and te		Pf/C	00		
Food Identification	1 110			49			ntact surfaces clean	st strips available	(c)	00		
37 Food properly labeled; original container	Pf/C	0	0	0			Physical F		U			
Prevention of Food Contamination	- Insue						water available; adec		Pf	00		
38 Insects, rodents, and animals not present 39 Contamination prevented during food preparation, storage & display	P/Pf/C	0					stalled; proper backflo waste water properly			00		
40 O Personal cleanliness	Pf/C	0	0				es: properly constructe			00		
Wiping cloths: properly used and stored	(c)	0	0	54 🤇	Garb	age and	refuse properly dispose	d; facilities maintained	С	00		
Washing fruits and vegetables	P/PI/C						ilities installed, mainta			00		
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ilable.			Natu	ral rubb	er latex gloves not us	designated areas used ed per CGS §19a-36f	С	00		
Person in Charge (Signature) Declar Date 66 777 Date 779 Violations documented Date corrections due # Priority Item Violations (05-th) 5 (04) 2												
Person in Charge (Printed) DEE PAIL CHANGE	-iA					dation I	tem Violations (0 27 24				
Inspector (Signature) A. D. Date ()	7/7/	1		Risk F	actor/	Public H	lealth Intervention Vio	lations	4			
Date //	114		_				Public Health Interver es Violations	ntion Violations	-			
Inspector (Printed) LOUVEN GYANOV				Requi	res R	einspec	tion - check box if vo	ou intend to reinspect		-		
Requires Reinspection - check box if you intend to reinspect Real: 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.												

-			biisnment inspe	ction	<i>report</i>	Pagec	of
LHD / 1 1		stur	Inspection Report Continuation She			Date 6/17/202	4
Establishme	ent PICTZEL N	Maker	Town_Manch	rester			
			TEMPERATURE OBSERV	ATIONS			
hot dog	ocation/Process	30F (36F)	Item/Location/Process	Temp	HOT WAT	tion/Process AV-H.S. W-3 DAY	Temp 114 1(4 F
Marinai	ra sauce	38F			(PSTroom	hot water	98F
	nfrozen agt mix	40F					
		OB	SERVATIONS AND CORRECT	TIVE ACTION	ONS		
Item Number	Violations cited in this		e corrected within the time frames belo			1 & 8-406.11 of the t	food code.
28PL	inlabeled c	nemic	al bottle en back	shelvi	ngEcod	8	
49C S	helving ab	ove 31	bay not citan a	nd she	luing for	canned	goods
13P	lented can	discar	hine to be remov ded/piaced in area	ea 111dan	n+1154" C	Cos)	···
	4) discussed	aettina	credit/not accept	ingul	nted can		piser
16PF i	nttriovof	ice ma	achine not ciea			V 3	
22.0	1. 1. 1.		in shelving	0.0			
			izer between Un ndsink not citan		·		
			abil - not in dispe				
in a last.	م الدن دنام م	V+1.V0.0	n Marieit				
notex i	no activity a	t Mark	ring of food prod	uct (t	omatos	avels)	
				- 11			
		.				10 %	(17/7)
Person in C	charge (Signature)	1/19 d/1	nyele			Date	11)(20
Inspector (\$	Signature) 💢 🗸 🎾	WILLOUVY	•			Date [/ 17/7	11/4

Risk Category: Food Estab	lishn	neni	t In	spec	ctic	n Rep	oort	Page 1 c	of <u>3</u>
Establishment type: Fermanerit Temporary Mobile Other					- [Date: /	7-10-24		
Establishment Randys Wooster St. Pizza		+zeq.aq	Connec	nicat Health		Γime In <u>∫</u>		Time Out 1:3	O AM/PIN
Address 285 E. Center St.			P	H)	L	LHD /	nanches	ter	
Town/City Manchester					F	Purpose	of Inspection:	Routing Pro	e-op
Permit Holder Ewelina Oldzie	1		blic He	alth	-	Reinspec		Other	
FOODBORNE ILLNESS RISK F.	ACTO	RS A	AND	PUB	LIC	HEAL	TH INTERVEN	TIONS	
Risk factors are important practices or procedures identified as the most prevalent control	tributing fa	ctors of	f food	borne illnes	ss or	injury. Inten	ventions are control me	asures to prevent foodborne illne	ss or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered i		1,7,110		compliance		Children Waller	TATE OF THE PARTY	2822	O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appro	priat	e box for	r CO				R=repeat violation
IN OUT N/A N/O Supervision	V	cos		100.00	1	T N/A N/O		from Contamination	V COS R
Person/Alternate Person in charge present							Food separated an		(P)C (O (O
demonstrates knowledge and performs duties	Pf	0	\circ	60	40			ces: cleaned & sanitized	
Cadifical Franchis Marie Colonia			\exists			PERSONAL PROPERTY.		of returned, previously	
2 Certified Food Protection Manager for Classes 2,	C	0	\circ	17 🔾	0		convod recondition	ned, and unsafe food	POO
Employee Health		1							
Management food employee and conditional employees	-	т- г	-	10				Control for Safety	1
knowledge, responsibilities and reporting	P/Pf	0		18 🔾	$\frac{\circ}{\circ}$		Proper cooking tim	e and temperatures	P/Pf/C O O
4 O Proper use of restriction and exclusion	Р		0	19 🔾			Proper reneating p	rocedures for hot holding	
Written procedures for responding to vemiting and	_ P	0	9	20 0			Proper cooling time	and temperatures	P 0 0
diarrheal events	Pf	0	0	21 0	9	00	Proper hot holding	temperatures	P 0 0
Good Hygienic Practices				50	NA.	99	Proper cold holding	g temperatures	POO
6 O Proper eating, tasting, drinking, or tobacco products us	- D/O			(3)	P		Proper date markin		P(Pf) O O
7 O No discharge from eyes, nose, and mouth				24 🔘	0			ealth control: procedures	P/Pf/C O O
	С		\subseteq		<u> </u>		and records		"• • •
Preventing Contamination by Hands 8	15.54		_		_	Towns and the same of the same		er Advisory	
8 Hands clean and properly washed No bare hand contact with RTE food or a	P/Pf	0	9	25 🔾	0			ovided: raw/undercooked food	Pf OO
	P/Pf/C	0				The second		tible Population	
pre-approved alternative procedure properly followed Adequate handwashing sinks, properly supplied/accessible		0.00000		26 🔾	0			d; prohibited foods not offered	P/C O
O T T T T T T T T T T T T T T T T T T T	(P)C	0	9		,			and Toxic Substances	
Approved Source				27 🔾	0			proved and properly used	POO
11 O Food obtained from approved source	P/Pf/C			28	0		Toxic substances p	properly identified,	P/Pf/C O
12 O Food received at proper temperature		0		20			stored & used		PIPIIC O O
13 O Food in good condition, safe, and unadulterated	P/Pf	0	0			Co	onformance with A	Approved Procedures	
14 O Required records available: molluscan shellfish	P/Pf/C	0		29	0		Compliance with va		P/Pf/C O O
identification, parasite destruction	The contract and		1000	Attorney Common	1.15		process/ROP criter	ia/HACCP Plan	P/PI/C
GO	OD RE	TAIL	PR	ACTICE	ES				
Good Retail Practices are preventative measures t									
	in approp	oriate b	box fo	or COS a	and/d	or R	COS=corrected on-s	ite during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	٧	cos		OUT			Proper Use of	f Utensils	V COS R
30 Pasteurized eggs used where required	Р			43) 90	In-u	se utensil	ls: properly stored		000
31 Water and ice from approved source	P/Pf/C	-						stored, dried, & handled	Pf/COOO
32 O Variance obtained for specialized processing methods	Pf_	0		(5)	Sing	gle-use/sing	gle-service articles: p	properly stored & used	(P)C (O)
Food Temperature Control				46	Glo	ves used	properly		C 00
Proper cooling methods used; adequate equipment for	Pf/C	0						d Equipment	
lemperature control		200-020 10					n-food contact surfa		P/Pf(C) 0
34 O Plant food properly cooked for hot holding	Pf	0) !			gned, constructed,		P/Pf(C)
35 O Approved thawing methods used	Pf/C	0						, maintained and used;	Pf/C O O
36 Thermometers provided and accurate	Pf/C	0						test strips available	
Food Identification				49 90	Non	-food con	ntact surfaces clean	i	(0)00
③ ≪ Food properly labeled; original container	PfO	0	2	1 100 0				Facilities	
Prevention of Food Contamination				50 🔾	Hot	and cold	water available; ad	equate pressure	Pf OO
(8) (x) Insects, rodents, and animals not present				51 🔾	Plur	mbing inst	talled; proper backf	low devices	P/Pf/C O
Contamination prevented during food preparation, storage & display	(P/Pf/C		의	52 🔾	Sev	vage and	waste water proper	ly disposed	P/Pf/C O
40 O Personal cleanliness		0		53	Toile	et facilities	s: properly construc	cted, supplied, & clean	Pf/C O
41 Wiping cloths: properly used and stored	С	0		64)00	Gart	page and r	efuse properly dispos	sed; facilities maintained	000
42 O Washing fruits and vegetables	P/Pf/C	0		(55) X	Phy	sical facili	ities installed, main	tained, and clean	P/P(C)
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable		EB 190	Ade	quate ver	ntilation and lighting	; designated areas used	000
					Natu	ural rubbe	er latex gloves not u	ised per CGS §19a-36f	
Person in Charge (Signature Manall, MAIN - 7/	10 /	211		Violatio	ons (documen	ited	Date corrections due	#
Person in Charge (Signature Cullu Ollh Date +/)	0/0	シブ				Violation		7/13/24	4
Person in Charge (Printed Willing Olofaje)							em Violations	7/20/24	9
. Sicon mi charge france will far of a ye			4	Core Ite	em V	iolations		10/10/24	21
Inspector (Signature)	10-1	24		RISK Fac	ctor	Public He	ealth Intervention V	iolations	8,
Date Date	10-0	~7					Public Health Interve	ention Violations	
Inspector (Printed) 5058 Kamilez							s Violations	and the same of th	28/
Appeal: The owner or operator of a food establishment operator of high	hie and	r to		ot co	25 K	enspecti	IOH - CHECK DOX IT	you intend to reinspect	V
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Directo	or of H	lealt	h, not le	inspe ater	than fort	v-eight hours after	tne rood inspector or to	nold, destroy,

	Fo	od Esta	ıblishr	nent Inspe	ction I	Report	Page _ Z_ o	of <u>3</u>		
I .	anchester		Inspection I	Report Continuation She	eet	*	Date 7-10	-24		
Establish	ment Randy	Wooster St.	Pizza	Town Manch	ester					
			TEMPE	RATURE OBSER	VATIONS					
Item	/Location/Process	Temp	-	ocation/Process	Temp	Item/Loc	cation/Process	Temp		
WIC	Meatball 5	38F	rizza	Station		Hand Sin	K Basement	IIIF		
1	Chicken	39 F	i	Pellers	395		+ BR Sink			
	Sliced tomat	55 38F		ground beef			BR SINK	115F		
	?i22a	AIF		Marshood potato		00 101-101	DIX 31/	ا صاما		
				0-72	115					
Cold	preptable cook	705		Pizza Souce	914			p Rite. €		
	'sliced toma						Date			
(anch 39F										
PRESENTATIONS AND CORPORTING ACTIONS ORSERVATIONS AND CORPORTING ACTIONS AND										
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 o										
Item		57 SEEM	1	Till the time manies belo	ow, or as stated	1 111 300110113 0-400	0.11 & 0-400.11 0	io sale.		
Number	Ewa C	FPM on	Site							
		•								
10 PF	1)0 0000	toble/	at ha	nd Sink in	h-sem	n1				
The second second	1 1 1				DOCTOR	3/1				
49C	Speed (a	1.20	1	The state of the s						
				plars in bo						
37c	37c Unlabeled Squeeze bottles throughout									
38 PF	38 PF Fies present in basement prep area									
16 PF										
39 PF	tray of	bloccoli	Store	I on top o	of tras	sh can				
49 C			3	basement un						
49.06				unclean not		20 000	stable			
44C	Dish cac	L< State	don Fl	oor by dish	Machine	in base	ment			
470				ers on wir			1 +	bion		
44C	Sumbled			wire shed		-1 1	Machina	hiae		
49 C	exterior	/ .		ne unclean	VIII D	y 01311	1-1014111111			
16 PF			● 25.0	unclean						
		4	1 1	ored in ice	20. 00					
15 P		.)	1 1		1.2	3				
550	Cove bas	ľ	111 .) ,	e Machi	I.				
	45P VIZZa boxes Stored on Floor in basement									
10PF NO paper toweld in employee bathroom in basement										
39 P Non commercial bucket used For ice										
37c Unlabeled squeeze bottles at cookline										
47 c Prep table by ovens great gauged, not an NSF or equivalent										
Person in Charge (Signature) Euglie Oldes Date 7/10/24										
Inspector	(Signature)	370	~				Date 7-10	1-24		

Food Est	tablishment Inspecti	on Report F	page <u>3</u> of <u>3</u>
LHD Manchester	Inspection Report Continuation Sheet		7-10-24
Establishment Randys Woosfer	St. Pizza Town Manchester		
	TEMPERATURE OBSERVATION		
Item/Location/Process Temp		Temp Item/Location/Pr	rocess Temp
Loor KIC by oven	Cold drawer under grill	2	
Chicken 4/F	Chicken Wing 30	16	
Sliced cheese AIF	Cold prep fable by grill	- T.	
Sliced tonatoes 41F	Sliced formations 4		
Loor RIC Atosa	Chicken 41	F	
Coasted tomatoes 40F	Hot Hold marinara 13	SE	
Pepperoni 40 F	Veg. 5008 16	DF	
	DBSERVATIONS AND CORRECTIVE	ACTIONS	A Company of the company
Item	t be corrected within the time frames below, or a	s stated in sections 8-405.11 & 8-4	406.11 of the food code.
Number			
49 C PiZZa Cold pa	eptable gaskets i	an clean	
49c interior of piz	Z cold ocen table ur	clean	
		CICAL	
54C No trash can at	hand sink by ovens		1
23 PF Containers of for	od not properly datema	acked throughou-	t
36C Hood baffles over	ec oxill/frier unclean		
49c exterior of all	equipment at cookline	anclean	
1	in hand sink by fry		, 1
47c non commercial b	lack speed lack cast i	10+ cleanable Juni	clear damaged
490 interior of micron	value by tryer unclean	<u> </u>	,
776 aaskets unclean	throughout		
490 Wire Shelving b	1 Faver oclose		
490 Floor unclean +	y tryet onclean		
416 Floor Gnelean +	hroughout		
	1 "		
Note: continue to decl	other unused equipmen	it throughout	FSE
	ocedure to Health Dept.		
Health control	for pizza sold by	100 Slice 1	hoods to be
Ichalad	time prep I discard	1,010 11 0120	10 111
Note: 2-Door RIC at	TIT Alalia	Line. NO Maid	Then Thours.
Male Dier cool or mi	late made MI Der	co(0	- 1
Note Discussed proper	TOUR MARINA, ALL NE	letingerated toods	must be
cate marked and	used or discarded w	ithin I days. For	oods not
	Il be discarded.	***	
Person in Charge (Signature)	a Oldz	Date	7/10/04
Inspector (Signature)	7. 4	Date	7-10-24

Risk Category: Food Estab	lishm	nen	t Ir	nspe	ctic	n Re	port	Pag	e 1 of <u>Z</u>	
Establishment type: Permanent Demporary Mobile Other					_	Date:	7/3/207	4		
Establishment RAVI MAIT		+eeping.	Connec	cticat Health	-	ime In	11:30 6	M)PM Time Out_	12:30	AM/PM)
Address 208 W CENTUST			D	H)		.HD	mancr	1 estex		
TOWN/City Manchester		Purpose of Inspection: Routine Pre						Pre-op		
Permit Holder		of Pu	blic He			Reinsp		Other		
FOODBORNE ILLNESS RISK FA										
Risk factors are important practices or procedures identified as the most prevalent cont Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if		221	-	complia				N/A=not applicable		-
P=Priority item Pf=Priority foundation item C=Core item V=violation type	CAUPILL .		ALL DESCRIPTION OF THE PARTY OF	STATE OF THE STATE OF	STEENSAMP AND		not in compliance		N/O=not obs on R=repeat	The State of the S
IN OUT N/A N/O Supervision	V		_	T		T N/A N/		on from Contamination		COS R
Person/Alternate Person in charge present		5450	220	15 🛇			Food separated		P/C	
demonstrates knowledge and performs duties	Pf	0	9	16 😱	-			urfaces: cleaned & sanit		00
2 Certified Food Protection Manager for Classes 2,	С	0	0	17 Q	6			ion of returned, previous	ly	
3, & 4				11/4	1			tioned, and unsafe food		00
Employee Health					- 51			ture Control for Safety		, , ,
Management, food employee and conditional employee;	P/Pf	0	\circ	18 C		O C	Proper cooking	time and temperatures	P/Pf/C	00
knowledge, responsibilities and reporting Proper use of restriction and exclusion	P	0	0	19 (Proper reheatin	g procedures for hot hot time and temperatures	Iding P	00
Written procedures for responding to verniting and		1 cas 19		21 0			Proper cooling Proper hot hold	ing temperatures		00
diarrheal events	Pf	0	\circ	22 @	1	00	Proper cold hole	ding temperatures		00
Good Hygienic Practices				23 @		00	Proper date ma	rking and disposition		
6 O Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0	24 🤇		/	The same of the sa	c health control: proced	uros	1000
7 O No discharge from eyes, nose, and mouth	С	0	0	24			and records		P/Pf/C	00
Preventing Contamination by Hands								umer Advisory		
8 O Hands clean and properly washed	P/Pf	0	익	25 🤇		0		y provided: raw/undercooked	food Pf	00
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	0	\circ	26 (1		ceptible Population		
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0		20				used; prohibited foods not of ves and Toxic Substar		00
Approved Source	UP		$\stackrel{\smile}{-}$	27 (1000		approved and properly		00
11 C Eood obtained from approved source	P/Pf/C	0	0					es properly identified.		
12 O O Food received at proper temperature		_	0	28 @	2		stored & used	oo propony taonamea,	P/Pf/C	00
13 Pood in good condition, safe, and unadulterated	P/Pf	0	0				Conformance wi	ith Approved Procedur	es	
Required records available: molluscan shellfish	P/Pf/C	0	0	29 🤇		0		h variance/specialized	P/Pf/C	00
identification, parasite destruction	OD RE	TAIL	DD	ACTIO	CEC		process/ROP c	riteria/HACCP Plan		
Good Retail Practices are preventative measures t						ns che	micals and physica	I phiects into foods		
	in approp							on-site during inspection	R=repeat	violation
OUT N/A N/O Safe Food and Water	V	cos	_	OU	_			se of Utensils	V	COS R
30 Pasteurized eggs used where required	Р	0	0	-		se uter	nsils: properly stor		С	00
31 Water and ice from approved source	P/Pf/C	0	0	44 (⊃ Ute	nsils/equ	uipment/linens: prop	perly stored, dried, & hand	led Pf/C	00
32 O Variance obtained for specialized processing methods	Pf	0	0	45 C	⊃ Sin	gle-use/s	single-service article	es: properly stored & used	P/C	
Food Temperature Control		1 1		46	⊃ Glo	ves use	ed properly		С	00
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0	0		IFO	d and r		and Equipment		
34 O Plant food properly cooked for hot holding	Pf	0	0	(47)	100		esigned, construct	surfaces cleanable,	P/Pf/C	00
35 O Approved thawing methods used		0						illed, maintained and use	ed.	
Thermometers provided and accurate		0		48				and test strips available		00
Food Identification				49)			ontact surfaces c		/c	00
37 Food properly labeled; original container	Pf/C	0	0	-	`	17.		ical Facilities		
Prevention of Food Contamination	Tarre	-						; adequate pressure	Pf	00
38. Insects, rodents, and animals not present Contamination prevented during food preparation, storage & display		0					nstalled; proper ba			00
40 Personal cleanliness	P/Pf/C	0					nd waste water pro	operly disposed structed, supplied, & cle	P/Pf/C	00
41 Wiping cloths: properly used and stored	C	0	_	<u>S</u>	Gar	hage an	d refuse properly di	isposed; facilities maintain	ed C	
42 Washing fruits and vegetables	P/Pf/C			55	Phy	sical fa	cilities installed, n	naintained, and clean	P/Pf/C	00
Permit Holder shall notify customers that a copy of the most recent inspection rep				56	Ade	equate v	ventilation and ligh	nting; designated areas	used C	00
The state of the s	OIL IS dVa	mable			⊃ Nat	ural rub	ber latex gloves r	not used per CGS §19a-	36f	
Person in Charge (Signature)	05/2	r/				docum violati		Date corrections	due	#
Person in Charge (Printed) Sand Facos	- 1			Priorit	ty Fou		Item Violations	7/13/24 in/3/24		3
+ Strandill	17 1		\neg	Risk F	Factor	/Public	Health Intervention	on Violations		ĭ
Inspector (Signature) Date 7 3	14			Repea	at Ris	k Facto	r/Public Health Int	tervention Violations		
Inspector (Printed)							ces Violations	o të man hakara e		7
	hio and	n= +-	00.7	Requ	ires F	keinspe	ection - check bo	x if you intend to reinsp	pect	
Appeal: The owner or operator of a food establishment aggrieved by to or dispose of unsafe food, may appeal such order to the	Directo	or of	Hea	lth not	y insp	than for	violation identifie	a by the food inspector	r or to hold, o	estroy,

	FOO	d Esta	biisnment inspe	ection Re	EPORT Page	or_v			
LHD MANChest	ev.		Inspection Report Continuation Sho	eet	Date 7/3/20	24			
Establishment <u> </u>	Mart	-	Town Manch	rester					
			TEMPERATURE OBSER	VATIONS					
Item/Location/Pro	ceşs .	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp			
mink in co	MIInit	395							
LINITH TO	ULVIII	071							
is all a mark A look	Mank	104F							
not water @ ha		1045	u						
3 bay hot wa	TU	110F							
<i>I</i>									
		OB	SERVATIONS AND CORREC	CTIVE ACTION	VS.				
. Violations	cited in this	report must be	corrected within the time frames bel	ow, or as stated in	sections 8-405.11 & 8-406.11 of th	e food code.			
Item Number		•							
47c duct to	be on o	offee.	station counter to	l b					
			s/straws not clea						
11010101	N CAA	in dia cap	er to well at hance	wink ir	hard at hause				
		1 1 1 1		10111111	1 DUCH OF HOUSE				
		requi							
55 c no cove base under handsink / 3 bay sink									
53pF no paper to well in restroom									
49c Fancover in walk in cooler not clean									
^	H-14/8/44	1	stored on Floor C		in coolur				
		-	nometer on site						
	7,00	7 11 01 11							
Health	Dept-	to Follo	w up Tuesday	JULUat	h so with owr	Ur			
				V - /					
			8						
	/				C				
	*								
Percon in Charge (Siz	Person in Charge (Signature) Date 07/05/2024 Date 7/3/2024								
	A M	100011			Date // 0	2021			
Inspector (Signature)	N	MUNUV			Date //3/)	1064			

Risk Category: 3 Food Estable	lishr	nent l	nspec	tion Report	Page 1 d	of Z	
Establishment type: Permanent Temporary Mobile Other			- P. S. S.	Date: 7/17/24		,,	-
Establishment RPO RODIN		ning Conn	ecticut Hear		M/PM Time Out	1 , 2 1	6
Address 360 BUCKLAND Hills Dr.	1	BB	LI	LHD Manche			ANYPIN
010100100001		UP		Purpose of Inspection:		e-op	
	C	connecticut De	epartment			-op	
Permit Holder JETEMY - CFPM FOODBORNE ILLNESS RISK FA	ACTO	of Public I	100000	Reinspection	Other		
Risk factors are important practices or procedures identified as the most prevalent cont	ributing f	actom of foo	dhome illege	CONLACTION CALCULATION	RIIONS		
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	tom	The second second	CONTRACTOR AND ADDRESS OF THE		Median III was a second		
P=Priority item Pf=Priority foundation item C=Core item V=violation type			compliand			O=not ob	
In Our way we				Control of the Contro		R=repeat	
IN OUT N/A N/O Supervision	V	COS R	IN	OUT N/A N/O Protection	on from Contamination	V	COS R
1 Person/Alternate Person in charge present,	Pf	00	15 0	Food separated	and protected	PC	
demonstrates knowledge and performs duties			160	Food-contact su	irfaces: cleaned & sanitized	PIPEC	00
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	00	17		on of returned, previously	Р	00
Employee Health					tioned, and unsafe food		
Management food amployee and conditional amployee		T	18		ture Control for Safety	1=	1 - 1 -
knowledge, responsibilities and reporting	P/Pf	00	19	Proper cooking	time and temperatures	P/Pt/C	00
4 Proper use of restriction and exclusion	Р	00	20 🔾	O O O O O O O O O O O O O O O O O O O	g procedures for hot holding		
Written procedures for responding to vemiting and		100		Proper cooling t	ime and temperatures		00
diarrheal events	Pf	00	2000	Proper hot holdi	ng temperatures	P	
Good Hygienic Practices	_		22	O O Proper cold hold	ling temperatures	P	
6 O Proper eating, tasting, drinking, or tobacco products use	- T D/O	Total	23	O O Proper date mai	rking and disposition	P/Pf	00
7 O No discharge from eyes, nose, and mouth			24 🔘		health control: procedures	P/Pf/C	00
Preventing Contamination by Hands	c	00		and records			
8 Hands clean and properly washed	Tam	Tala			mer Advisory		
No bare hand contact with RTE food or a	P/Pf	00	25		provided: raw/undercooked food	Pf	00
9 No bale hand contact with RTE food of a	P/Pf/C				ceptible Population		72-
pre-approved alternative procedure properly followed Adequate handwashing sinks, properly supplied/accessible	1		26	Pasteurized foods u	used; prohibited foods not offered	P/C	00
The state of the s	Pf/C			Food/Color Additiv	es and Toxic Substances		
Approved Source			27 🔿	Food additives:	approved and properly used	P	00
		00	28	Toxic substance	es properly identified,	DIDGO	00
12 Food received at proper temperature Food in good condition, safe, and unadulterated	-	00	20	stored & used		PIPIIC	00
	P/Pf	00		Conformance with	th Approved Procedures		
Required records available: molluscan shellfish	P/Pf/C	00	29		variance/specialized	D/Df/C	00
identification, parasite destruction			1 1 1	process/ROP cr	iteria/HACCP Plan	F/FI/C	
Cond Patril Parri	א עכ	I AIL PE	RACTICE	S		VILLE	
Good Retail Practices are preventative measures to							
			for COS a			R=repeat	violation
OUT N/A N/O Safe Food and Water	v	COS R	OUT	Proper Use	e of Utensils	V	COS R
30 Pasteurized eggs used where required	Р	00	43	In-use utensils: properly store	ed	С	00
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C		44 0	Utensils/equipment/linens: prop	erly stored, dried, & handled	Pf/C	00
	Pf	00	45 🔾	Single-use/single-service article	s: properly stored & used	P/C	00
Food Temperature Control			46	Gloves used properly		С	00
Proper cooling methods used; adequate equipment for	Pf/C	00		Utensils	and Equipment		
temperature control			47 86	Food and non-food contact si	urfaces cleanable,	P/Fi/C	
34 O Plant food properly cooked for hot holding	Pf	00		properly designed, constructed		FIRM	00
35 O Approved thawing methods used		00	48	Warewashing facilities: instal	led, maintained and used;	Delo	
36 Thermometers provided and accurate	Pf/C	00	0	cleaning agents, sanitizers, a	nd test strips available	Pf/C	00
Food Identification			49	Non-food contact surfaces cle	ean	(c)	00
37 C Food properly labeled; original container	Pf/C	00	0 "	Physi	cal Facilities	U	
Prevention of Food Contamination		1	50 0	Hot and cold water available;	adequate pressure	Pf	00
38 Insects, rodents, and animals not present	Pf/C	00	51 0	Plumbing installed; proper ba	ckflow devices	P/Pf/C	00
39 Contamination prevented during food preparation, storage & display	P/Pf/C	00		Sewage and waste water pro-			
40 Personal cleanliness	Pf/C	00	53	Toilet facilities: properly cons	tructed, supplied, & clean	*	00
Wiping cloths: properly used and stored	(C)	00	54 0	Sarbage and refuse properly dis	posed; facilities maintained	С	00
42 Washing fruits and vegetables	P/Pf/C	00	55 O F	Physical facilities installed, m	aintained, and clean		00
Permit Holder shall notify customers that a copy of the most recent inspection repo	rt is ava	oldelia	56 0	Adequate ventilation and light	ting; designated areas used		00
	it is ava	mable.		Natural rubber latex gloves no	ot used per CGS §19a-36f		
Borrow in Charge (Simplement Man Man 1)	7/1	G	Violatio	ns documented	Date corrections due		#
Person in Charge (Signature)	116	- 1	Priority I	tem Violations	7120124		
Person in Charge (Printed)				Foundation Item Violations	7 27 24	7	7_
reason in Gharge (Filliteu)			Core Iter	m Violations	1011712A		7
Inspector (Signature) 1. Symmal Date 711"	7/7/	1	Risk Fac	tor/Public Health Intervention	n Violations		
Inspector (Signature) / Date	1/4		Repeat I	Risk Factor/Public Health Inte	ervention Violations		
Inspector (Printed) (UNCO GNO)				etail Practices Violations	.,		7
	ia - 1		Require	s Reinspection - check box	if you intend to reinspect		
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Directo	or of Hoo	ect any in	spection violation identified	by the food inspector or to	hold, d	estroy,
the state of the s	11 せしし	בשחוטות	ut. 1101 2	recondendation v-elant nours at	THE ISSUIGNED OF CUICH OFFICE		

Food Establishment Inspection Report Page Z of Z

				10011	
LHD Manches H	s r	Inspection Report Continuation	Sheet	Date 7/17/2	024
Establishment Red ROD	in	Town Man C	nester		
		TEMPERATURE OBSE	ERVATIONS		
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
hampuraer rail	39 F	hand boiled egg	AUF	avat 3 navl	700000
Chickepooning	39F	MILL CHERRY	39 F	dish machine +	a-i al hoin
amen can theer		ALL FINANTA	39 F	also machine	n coopera
SINGE CIDE OFF	An E	101010		in what are Thank	1:45
SWUS CHECK	701	internal chix	188F	MOT WATER 300Y	1105
TOVYLOTUCI CUT	38F	1131.6		MOT WATER	951
pico degallo	39F	WIC-COO	39F		
namburger	39F	cut tomato	39F	Fartar sauce	411-
idoor Freezev	-1F	raw chicken	39F	STRAINDEVILOS OL BAN	AIF
	OE		ECTIVE ACTION		
Item Violations cited	in this report must b	e corrected within the time frames	below, or as stated	I in sections 8-405.11 & 8-406.11 of the	food code.
Number CFDM:	IERRMV				
49c gaskets of	cold brow	unite Alana / AAIAia	on institu	0.00	
		units along cookling			
		ng cloths in count		WOLLING CO.	
15p Food unco	ivered in o	ndercounter fr	COZEX+S	standing treater	
49¢ FLOURS all	ong cook	line unclean ur	oder pavil	pment	
Age maskets of		and the same of th	The state of the s		
		It microupus not		OLI	
49c dry stora	lat region			A 2- A 1 A D 1 A	
7 7 7 7		ing covers crac	11197111	ot cuar	
16 pf Lid of Ce		ne at waitress s	ruru no	rcieun	
49c exterior of	black cal	oinetatbar not	Clan		
			roken		
		J / 2			
a i a al c La v	ana Atani	unmant			
9000 3101	ageorty	upment.		141.2-10-441	
aucusea i	-100rs to 1	re-grouted	by 3 buy	Ildish machine	
good har	ndwaini	ng/giove use if (i of 2) temp			
Mens rest	toom sta	if Clof 2) temp	oranily a	out of order	
no ill em	ployees	(J			
discussed	pest cont	rol - no issues			
	9		Aperly -	to be repaired /F	ived
Therman	neters 11	est strips avai	iable	· · · · · · · · · · · · · · · · · · ·	inui
email in	randulain	anchesteret any	with in	rrective autions	
4	111-7-1	u	WIII) CU		1011
Person in Charge (Signatur	e) Marson of	14			
Inspector (Signature)	XAVIU			Date 7/17/2	4

Risi	k C	ateg	ory:	1	2	F	ood Establ	ishm	nen	t In	spo	ecti	on Re	port	Page 1	of <u></u>		
Est	abl	ishn	nent	type	e: Permanen	t Temporary Mo	bile Other						Date:	6/2/2	4			
Esta	abl	ishn	nent	5	alva-	tion Arm	V		estin	Connec	ticut Hes	is.	Time In	A	M/PM Time Out		AM/P	M
Ado			Inl	ام	MAIN		1			DI	H		LHD A	100ch	ster			
		City	N	علا		ESTER							Purpose	of Inspection:	Routine Pr	e-op		
71132		Hol	der	1.	1100th			Co	onnectic of Pu	tut Dep	partmer ealth	nt	Reinspe	ection	Other			
1 61		110	uci		NAME OF	OODBORNE ILLI	NESS RISK FA	ACTO	RS	ANI	PL	JBL	IC HEAI	TH INTERVE	ENTIONS	TOWN THE	134	
		Risk	factors	are											I measures to prevent foodborne illn	ess or injury.		
	Ma	rk de	signat	-		is (IN, OUT, N/A, N/O) fo		19 to all 100 to 100		-	compl	100		not in compliance		O=not obs	served	
		rity it			Priority foundati	ion item C=Core item	V=violation type		1	-	1	-			ted on-site during inspection	R=repeat		_
	IN	OUT	N/A	-		Supervision		V	cos	R	-	-	UT N/A N/O		on from Contamination	-	cos	
1 (0	0			te Person in charge pr		Pf	0	0	-			Food separated		PIC	/	$\stackrel{\circ}{=}$
						knowledge and perform Protection Manager for							00		urfaces: cleaned & sanitized ion of returned, previously			$\underline{}$
2	\supset	0	0		3, & 4	rotection Manager to	Classes 2,	С	0	0	17	0			tioned, and unsafe food	P	0	\supset
			-			Employee Health									ture Control for Safety	WIEST .	8.9	
3			No.	N	Management, fo	od employee and conditi	ional employee;	P/Pf			18				time and temperatures	P/Pf/C	0	5
		0		*A 100 CO		sponsibilities and repor				0	19				g procedures for hot holding			
4 (\circ	0				estriction and exclusio		Р	0	0	-				time and temperatures	Р		
5		0		10000	Marie and Charles and State and a second	ures for responding to	vomiting and	Pf	0		21				ing temperatures	Р	0	
ie	_		l de la	C	diarrheal event				لـــا		_				ding temperatures	P		_
6		0	THE R			ood Hygienic Practice tasting, drinking, or tob		DIC.			23	9	200		rking and disposition	P/Pf	0	<u>ں</u>
7		$\frac{2}{0}$	- 100mmmer21	-		rom eyes, nose, and m		e P/C	00		24		000	and records	c health control: procedures	P/Pf/C	0	\supset
			RESIDENCE			ng Contamination by									umer Advisory			
8	0	0		OF		nd properly washed		P/Pf	0	0	25	O	00		y provided: raw/undercooked food	i Pf	0	5
9					No bare hand	contact with RTE food	or a	P/Pf/C						Highly Sus	ceptible Population			
	5750	0			ore-approved a	alternative procedure p	roperly followed	P/PI/C	00000	0	26			Pasteurized foods	used; prohibited foods not offered	P/C	0	$\overline{\bigcirc}$
10	\circ	0		P	Adequate handy	vashing sinks, properly s	upplied/accessible	Pf/C	0	0	411				ves and Toxic Substances			
		=	Total Control	man -		Approved Source		1 =			27	0			approved and properly use	d P	0	0
11		0				from approved source		P/Pf/C	-	-	28			And the second state of the second se	es properly identified,	P/Pf/C	0	0
12		0	0			at proper temperature condition, safe, and una		P/Pf P/Pf				-		stored & used	ith Approved Procedures	war-wareau		
			San			rds available: mollusca		Т'							h variance/specialized		T	-
14	ب	0	0			parasite destruction	., ., ., .	P/Pf/C	0	0	29				riteria/HACCP Plan	P/Pf/C	0	\supset
1								OD RE								TEX STEE	RAU	
						etail Practices are preve	entative measures t	to contro	I the a	additi	on of	patho	gens, cher	nicals, and physica	l objects into foods.			
_				mbe	ered item is not		ation type Mark	in appro			for CC	OS an	d/or R	COS=corrected	on-site during inspection	R=repeat	The second second	A Company
-		N/A				afe Food and Water		V	cos			UT			se of Utensils	V	cos	
30						sed where required		P P/Pf/C		_				sils: properly stor		C	0	_
32						approved source or specialized processi	ina methods	P/Pt/C	-	00					perly stored, dried, & handled es: properly stored & used	Pf/C P/C	_	_
02	_		and a	unai		od Temperature Contr								d properly	es. properly stored & used		00	
22	_		P	rope		nods used; adequate e			I						and Equipment	STATE OF THE REAL PROPERTY.		$\stackrel{\smile}{}$
33					erature control			Pf/C	0	0	47	F	ood and r		surfaces cleanable,	2/2//0		_
						cooked for hot holding		Pf			41	р		signed, construct		P/Pf/C	0	\circ
		0			oved thawing n			Pf/C	0	0	48				illed, maintained and used;	Pf/C	0	0
36	\circ		T I	nerm	nometers prov	ided and accurate		Pf/C	0	0	10000	_			and test strips available			
27	_	Eco	d pro	orb	y labeled; origi	Food Identification		Duo	10		49	\bigcirc N	lon-food c	ontact surfaces c		C	0	\supseteq
31	_	100	u pioj	Jeny		tion of Food Contami	nation	PI/C	0		50		lot and an		ical Facilities ; adequate pressure	Df.		_
38	0	Inse	cts r	oder		als not present	Hation	Pf/C	0					nstalled; proper b		P/Pf/C		릇
						ng food preparation, stor	age & display	P/Pf/C						d waste water pro		P/Pf/C		
					nliness				0						structed, supplied, & clean		0	
					: properly use			С	0						isposed; facilities maintained		0	
42	\bigcirc	Was	shing	fruits	s and vegetab	les		P/Pf/C	0	0					naintained, and clean	P/Pf/C	0	$\overline{\circ}$
P	erm	it Hol	der sh	all no	otify customers	that a copy of the most re	ecent inspection rep	ort is ava	ailable).					hting; designated areas use not used per CGS §19a-36f		0	0
Per	sor	ı in (Charc	e (5	Signature)	Show Bo	Date (5-	2-2	4		Viol	ation	ns docum em Violati	ented	Date corrections due		#	
		000					2 1 1		/					Item Violations		- 4	7	
Per	sor	in (Charg	e (P	Printed)	shappy 1	Be 11				Core	e Iten	n Violation	S		9	l	
le -		4	cie	4	100	week week	Date (121	21/					Health Intervention				
ms	Jec	ror (Signa	ilure	- Zen	wayne	Date (e)	0	T						tervention Violations			
Insi	Aspector (Printed) 1 Payru Good Retail Practices Violations Requires Reinspection - check box if you intend to reinspect																	
							nt aggrieved by t	his ord	er to	corr	ect a	ny in	spection	violation identifie	d by the food inspector or	to hold (destro)\(
٦.	.TOO		0	r dis	spose of unsa	afe food, may appeal	such order to the	Direct	or of	Hea	lth n	ot lat	ter than fo	orty-eight hours	after issuance of such orde	or	a Court	y,

Foo	d Estak	olishment	Inspec	tion R	eport	Page	of 1	
LHD Manchester		Inspection Report Cor	ntinuation Sheet			Date 6/2	124	
Establishment Salvation	Army	Town/	nangh	ester		/ /		
	0	TEMPERATUR	J					
Item/Location/Process	Temp	Item/Location/P	rocess	Temp	Hot W	ation/Process	Temp	
TACO Meat	152F(ooking			401 W	ater	150	
CKN fazita	171F	U						
ALS LOVE	1000							
Doly shees	120F							
Nul								
Violations cited in this		SERVATIONS AND corrected within the time				.11 & 8-406.11 of th	ne food code.	
Item Number	,							
* 2 ha. 1 A	GD11 101	avioc not	- 1000 1/00	4	Unda	C 0000	in a aval	
* 3 bay/A	que la	ming, 10)	VIOU NEC	eup.	W ICA	o Consu	appro-	
tor ref	ou S	must be		1 1	Tul	. 7 200	1	
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* Discussed Conta	Verni	n - Na sna	eptraps	stic	X Y PO	1		
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Discussed	Not	using to	well on	table	-for c	ookingi	etersel	
- son	rething	cleanal	ole or	Keep	in pot			
		, <u> </u>		1	!			
- Milk-sh	elf St	able,						
- Evaluate	Blad	e on Cano	perer-	Bent	-?/da	maned		
					/			
- Discussed	- Do 01	e et Pastru	In John	- 10	100 000	م الم	+11	
- Jacoba	-1:	a to	conse		veripe	a prose	_	
Too a p	olicy	or gera	Sneege	- Sua	1.			
Wash App	les =>	or acta portect	Wap	for 10	naliv.	P/u.	-	
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15C K/1 cherry	s - h	impled	-Full	byf	inalco	oktemp		
7 0 0								
- Discusse	d lowe	laundern	W/ blee	Rch/ly	sol dis	sinject.	re	
~ NO	ta we	11 (publict	Dateson	14× ->1	Wash b	sal w/to	cers	
Person in Charge (Signature) **Seperate from family aundrate**								
Inspector (Signature)	aille -	70	V	Bell	- my	Data lala	Jay	
(3.3)	7		my no		*·	Duit U	101	



TOWN OF MANCHESTER HEALTH DEPARTMENT

479 Main Street, P.O. Box 191, Manchester, CT 06045-0191 Phone Number: **(860)** 647-3173, Fax Number: **(860)** 647-3188

2022 FDA Food Code Checklist

The purpose of this checklist is to inform you on the new regulations and the changes that have been made within the Food Code. The Manchester Health Department recognizes that the adoption of the 2022 FDA Food Code will be a transition for you, for inspectors and Food Establishments. We will continue to work with you to educate and implement the new regulations within this code. We understand that this may generate questions, which we are committed to working with you during this transition period and process.

Facility:	Salvation armsu	
No Num	ns Documentation erical Scoring Grade-3 Violation Levels PRIORITY – 72 hours for correction PRIORITY FOUNDATION – 10 days for correction CORE – 90 days for correction or determined by inspector ons and ReInspections Corrected on site violations Reinspection – case by case Repeat violations Hand Contact – Correction Required 9 P/Pf/C	CFPM/PIC on every shift during operating hours 1 Pf Implementing Date Marking (Sec. 3-501.17) 23 P/Pf Signage/Posters required Handwashing sign at all handwash sinks (section 6-301.14) 10c 9 Major Allergens 37c Outdoor Allowance for dogs -preapproval and sign required. 38 Pf Employee Assessment Form Vomiting/Diarrhea Written clean-up Policy Mop Sink Required (Sec. 5-203.13) CORE -90 day Temperature: Final Cook Temperatures
Resources:	ad Code: https://www.fda.co./fa.al/fda	
	od Code: https://www.fda.gov/food/fda-nchester Health Dept: https://www.mangenchester Health Dept: https://www.mangenchester Health Dept: https://www.fda.gov/food/fda-nchester	nesterct.gov/Government/Departments/Health-Department
protection-	ok: https://www.fda.gov/food/retail-foemployee-health-and-personal-hygiene	d-industryregulatory-assistance-training/retail-food- handbook
Environmer Signature of I	tal Health Inspector:	
Print Name: Person In Cl	Denise Pau	Date: 4/2/24
	Person In Charge: <u>Sharon</u> 1 Sharon Bell	1 - Bel0 Title: 6-2-24 Date: 6-2-21
Email	clair 333 @ netz	ero.net

Ris	Risk Category: Food Establishment Inspection Report Page 1 of 2										
Est	abl	ishm	ent ty	pe: Permanent Temporary Mobile Other						Date: 4/4/24 @	
Est	abl	ishm	ent	Shell Food Mart		+servin	Contro	ctions Heating	<u>s</u>	Time InAM/PM Time OutAM/PM	
Ad	dres	ss	61	Tolland Tok			P	H)		LHD Manchester	
To	wn/	City	167.1	Manchester						Purpose of Inspection: Foutine Pre-op	
Pei	rmit	Hole	der	l .	Co	of Pu	ut De blic H	partmen ealth	t	Reinspection Other	
		Risk t	factors	FOODBORNE ILLNESS RISK FA			700		C10	LIC HEALTH INTERVENTIONS s or injury. Interventions are control measures to prevent foodborne illness or injury.	
	Ma			d compliance status (IN, OUT, N/A, N/O) for each numbered it				compl	Monday.		
P		rity it		Pf=Priority foundation item		-		1			
	IN	OUT	N/A N/		٧	cos	R	-		OUT N/A N/O Protection from Contamination V COS R	
1	0	0	0	Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0	15 0		Food separated and protected P/C Food-contact surfaces: cleaned & sanitized P/Pf/C Food-contact	
2	0	0	0	Certified Food Protection Manager for Classes 2	С	0	0			Proper disposition of returned, previously	
_		_		3, & 4						served, reconditioned, and unsafe food	
	200		100	Employee Health Management, food employee and conditional employee;		1		18	510	Time/Temperature Control for Safety Proper cooking time and temperatures P/Pf/C	
3	0	0		knowledge, responsibilities and reporting	P/Pf	0	0	19		O Proper reheating procedures for hot holding POO	
4	0	0		Proper use of restriction and exclusion	Р	0	0			O O Proper cooling time and temperatures POO	
5	0	0		Written procedures for responding to vomiting and diarrheal events	Pf	0	0			Proper hot holding temperatures Proper hot holding temperatures	
		- 5.		Good Hygienic Practices		1				Proper cold holding temperatures POPPIPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPP	
	0	0		Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0			Time as a public health control: procedures	
7	0	0		No discharge from eyes, nose, and mouth	С	0	0	24		and records	
8	0	0		Preventing Contamination by Hands Hands clean and properly washed	P/Pf	10		25		Consumer Advisory	
				No bare hand contact with RTE food or a		1		25	71	Consumer advisory provided: raw/undercooked food Pf O Highly Susceptible Population	
	0	0	00	pre-approved alternative procedure properly followed	P/Pf/C	0	9	26	0		
10	0			Adequate handwashing sinks, properly supplied/accessible	PC	DO	0			Food/Color Additives and Toxic Substances	
11	0	0	THE REAL PROPERTY.	Approved Source Food obtained from approved source	DIDEIC			27	0		
_	ŏ		00	Food received at proper temperature	P/Pf/C P/Pf	-	-	28		Toxic substances properly identified, stored & used	
_	0	0		Food in good condition, safe, and unadulterated	P/Pf	-	ŏ			Conformance with Approved Procedures	
14	0	0	00	Required records available: molluscan shellfish	P/Pf/C	0	0	29	0	Compliance with variance/specialized P/Pf/C P/Pf/C	
				identification, parasite destruction	OD RE	ΤΔΙΙ	PF	PACT	ICES	process/ROP chiena/HACCP Plan	
				Good Retail Practices are preventative measures to							
_								for CC	S an	and/or R COS=corrected on-site during inspection R=repeat violation	
	OUT	N/A N		Safe Food and Water	V	cos		_	UT	Proper Use of Utensils V COS R	
-	0			steurized eggs used where required ater and ice from approved source	P P/Pf/C	-	00			In-use utensils: properly stored Utensils/equipment/linens: properly stored, dried, & handled PtC V	
	0	0		riance obtained for specialized processing methods	Pf	_	0	45	S	Single-use/single-service articles: properly stored & used PCO	
		-		Food Temperature Control				46	\bigcirc	Gloves used properly C O	
33	0			oper cooling methods used; adequate equipment for operature control	Pf/C	0		-	Te	Utensils and Equipment	
34	0	0		ant food properly cooked for hot holding	Pf	0	0	47		Food and non-food contact surfaces cleanable, properly designed, constructed, and used	
				proved thawing methods used		0		48		Warewashing facilities: installed, maintained and used:	
36	0		The	ermometers provided and accurate	Pf/C	0	0			cleaning agents, sanitizers, and test strips available	
37		Food	i prope	Food Identification erly labeled; original container	Pf/C	0		49		Non-food contact surfaces clean	
0.		. 000	piope	Prevention of Food Contamination	(FI)C		\square	50	OH	Physical Facilities Hot and cold water available; adequate pressure Pf O	
				dents, and animals not present	Pf/C	0	0			Plumbing installed; proper backflow devices P/Pf/C O	
				ion prevented during food preparation, storage & display	P/Pf/C		-			Sewage and waste water properly disposed P/Pf/C O	
	_			leanliness ths: properly used and stored	Pf/C	0	_			Toilet facilities: properly constructed, supplied, & clean Pf/C Carbage and refuse properly disposed; facilities maintained C C	
				ruits and vegetables	P/Pf/C					Garbage and refuse properly disposed; facilities maintained C O Physical facilities installed, maintained, and clean P/Pf/C O	
F	Permit Holder shall notify customers that a copy of the most recent inspection report is available. Solution										
Per	rsor	in C	harge	(Signature) & Jack and Date of	104	/201	24	Prior	rity It	Item Violations Date corrections due #	
Pe	rsor	in C	harge	(Printed) MOHAMAN JAAFAR	,			Core	e iten	Foundation Item Violations ASAP by 4 14/24 3 mm Violations 90day 5	
Ins	pec	tor (S	Signat	ure) Denistayne Date 4/4	L/a4	=		Rep	eat R	ctor/Public Health Intervention Violations Risk Factor/Public Health Intervention Violations etail Practices Violations	
			Printed		-			Req	uires	es Reinspection - check box if you intend to reinspect	
Ar	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 establishment aggrieved by this order to correct any inspection violation identified by the food inspector or to hold, destroy, or dispose of unsafe 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 establishment aggrieved by this order to correct any inspection violation identified by the food inspector or to hold, destroy, or dispose of unsafe 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 establishment aggrieved by this order to correct any inspection violation identified by the food inspector or to hold, destroy, or dispose of unsafe 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 establishment aggrieved by this order to correct any inspection violation identified by the food inspector or to hold, destroy, or dispose of unsafe food establishment aggreed by the correct any inspection violation identified by the food inspector of hold, destroy, or dispose of unsafe food establishment aggreed by the correct any inspector of the properties.										

	F00	a Esta	biisnment inspe	ction b	Report Page					
1	anchester	1.0	Inspection Report Continuation She		Date	24				
Establishment Shell Food Mart Town Marchester										
			TEMPERATURE OBSER\	/ATIONS						
	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp				
Milk	Dispenser	41F :	Johnson Beef Hor Dog	1455	Handsink Hot-Wate	110F				
		•	Start Cheese	148F	1 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
			Tagut	110.						
			SERVATIONS AND CORREC							
Item	Violations cited in this	report must be	e corrected within the time frames belo	w, or as stated	in sections 8-405.11 & 8-406.11 of the fo	ood code.				
Number										
	Stall "Von	Nedaa	ble" took the exam	n but	alone out house					
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	Copy of	certi-	ricate - Lovide	copie	s to Health Dpt					
45c :	Filters not	Overtec	potected Co	5)						
47PF			pors cracked -		m - loss na sot					
	-									
21P	122a 510	ce 113	DOAM NOT held	over 17	35F discarded.					
			equest a time ve							
IICC						2				
TOL	Single use	items	not potected to	100	OCONTACTUP (LO	رد				
44 PF	122a cutter	NOT.	for public, ver	roved ((Ca)					
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			The Water In Co.	00.	#	DY DOUB				
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					<u> </u>					
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	Uwner/M)ar	rager 7	o Kespond to 8	125 23	& Request Forinfor	mation				
	by ar	ril 10	th of dpa	yne@n	janchester ct.go	1				
	1	1 1	1	. 1	,	1-11				
Person in	Charge (Signature)	0	Joseph		Date of (of)	12.24				
Inspector	(Signature)	rise to	risne		Date 4/4/2	3				

Risk Category: 2 Food Estable	lishr	nen	t Ir	nspe	ecti	on Re	port	Page 1	1 of <u>2</u>		
Establishment type: Permanent Temporary Mobile Other						Date: (0 28 202	24			
Establishment SILK CITY COFFEC		45ETI	on Conne	cticat Heal	š.	Time In	11	AM/PM Time Out 12	,	_AN	рм
Address 763 Main St		D	P	H)		LHD	manc	nester			
Town/City Manchester	j					Purpos	e of Inspection	on: Routine F	Pre-op		
Permit Holder Sarah (call on sitt)		of Pu	ublic H			Reinspe		Other			_
FOODBORNE ILLNESS RISK FA	ACTO	RS	AN	D PL	JBLI	C HEA	LTH INTER	VENTIONS			
Risk factors are important practices or procedures identified as the most prevalent cont	ributing f	actors o	of food	lborne i	llness o	r injury. Int	erventions are cor	ntrol measures to prevent foodborne il	lness or inju	ıry.	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				compl			not in complianc	e N/A=not applicable	N/O=not o	bserv	ved
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	n appr	ropria	te box	for C	OS and/or	R COS=corr	ected on-site during inspection	R=repe	at vio	olation
IN OUT N/A N/O Supervision	V	cos	R		IN QU	JT N/A N/	o Prote	ction from Contamination	V	CO	SR
Person/Alternate Person in charge present,				15				ted and protected	P/	CC	220
demonstrates knowledge and performs duties	Pf	0	0					surfaces: cleaned & sanitize		/C C	
Cartified Food Protection Manager for Classes 2	1000			-				sition of returned, previously			
2 S C Certified 1 000 Protection Manager for Classes 2,	C	0	0	17				nditioned, and unsafe food	0	PC	
Employee Health		_		-		V THE	Time/Tempe	rature Control for Safety	e de la composition della comp	-	
Management food employee and conditional employee:		T	Γ	18	7	100	Bronor cooki	ng time and temperatures	DIDE	10	
knowledge, responsibilities and reporting	P/P	f O	0	19			Droper cooki	ting procedures for hot holding	P/PT/	/C C	
4 Ø O Proper use of restriction and exclusion	Р	0	0	20 0	\Rightarrow		Proper renea	ung procedures for not notal			0
Written procedures for reapanding to vertiling and	P	10	\subseteq				Proper coolin	g time and temperatures			0
diarrheal events	Pf	0	0	21		700	Proper not no	olding temperatures			0
Good Hygienic Practices	4			22 0		000	Proper cold r	olding temperatures			00
	- 1 5/6	1		23	0	200	Proper date r	marking and disposition	P/P	f C	0
		-	_	24	00	000		blic health control: procedure	P/Pf/	cc	0
	С	0	0				and records		1 71 1/2		
Preventing Contamination by Hands		-			1		Cor	sumer Advisory			
8 Hands clean and properly washed	P/P	f O	0	25	2		Consumer advis	sory provided: raw/undercooked for	od P	f C	0
9 No bare hand contact with RTE food or a	P/Pf/C		0		/			usceptible Population		100	
pre-approved alternative procedure properly followed				26 4	Ø C		Pasteurized foo	ds used; prohibited foods not offere	ed P/0	CC	00
10 🗷 C Adequate handwashing sinks, properly supplied/accessible	Pf/C		0		/	Fo	ood/Color Add	itives and Toxic Substance	s		
Approved Source			5.0	27 3	0		Food additive	s: approved and properly us	ed	PO	00
11 6 C Food obtained from approved source	P/Pf/C	0	0	20	1		Toxic substar	nces properly identified,			
12 O Food received at proper temperature	P/Pf	10		28			stored & used		P/Pf/	/C	0
13 Ø C Food in good condition, safe, and unadulterated		0						with Approved Procedures		_	-
Required records available: molluscan shellfish	DIDEIO			20				with variance/specialized		T	T
identification, parasite destruction	P/Pf/C		0	29		P		criteria/HACCP Plan	P/Pf/		0
GO	OD RE	TAIL	_ PR	ACT	ICES		10 July 10 A		-		+-
Good Retail Practices are preventative measures to	o contro	ol the a	additi	on of p	athog	ens, chen	nicals, and physi	ical objects into foods.		-	
	n appro							ed on-site during inspection	R=repe	at vio	lation
OUT N/A N/O Safe Food and Water	٧	cos	R	OI	UT			Use of Utensils		cos	
30 Pasteurized eggs used where required	Р		0			use uten	sils: properly st		C		0
31 Water and ice from approved source	P/Pf/C	-	0	44 (Ulte	ensils/equ	inment/linens: n	operly stored, dried, & handled		c	
32 O Variance obtained for specialized processing methods	Pf	_	0	45 0	Sir	nle-use/s	ingle-service art	icles: properly stored & used			
Food Temperature Control		10			~ ~ :			cles, properly stored & used			_
Daywar and the second of the s	T	T		40]	0 0	oves use	d properly	ile and Environment	С		0
as proper cooling methods used; adequate equipment for temperature control	Pf/C	0	0		Tea	ad and a		ils and Equipment			
34 O Plant food properly cooked for hot holding	Pf	0		47				t surfaces cleanable,	P/Pf/0		0
35 O Approved thawing methods used		0		-				icted, and used		_	
36 Thermometers provided and accurate				48				stalled, maintained and used;	Pf/C		0
Food Identification	PI/C	0	9	(10)	CIE	aning ag	ents, sanitizers	and test strips available			
37 Food properly labeled; original container	Delo	To		49)	X NO	n-tood co	ontact surfaces		C)	0
Provention of 5 and 9 artistic	Pf/C	0	\circ		~ T		Ph	ysical Facilities		_	
Prevention of Food Contamination				50 <		t and col	d water availab	le; adequate pressure	Pf		0
38 Insects, rodents, and animals not present		0						backflow devices	P/Pf/0		0
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	0	(52)	X Se	wage and	d waste water p	properly disposed	P/Pf	3)O	0
40 O Personal cleanliness		0		53	\supset To	ilet facilit	ies: properly co	instructed, supplied, & clean	Pf/C		
(4) Wiping cloths: properly used and stored	(C)		0	54	⊃Ga	rbage and	refuse properly	disposed; facilities maintained	С		0
42 Washing fruits and vegetables	PIPTIC	0	0	55	⊃ Ph	ysical fac	cilities installed	, maintained, and clean	P/Pf/0		
Permit Holder shall notify customers that a copy of the most recent inspection repo	et io nu	aile bla		56	⊃ Ad	equate v	entilation and li	ghting; designated areas use	ed C	10	0
the most recent inspection repo	JIL IS AV	aliable			⊃ Na	tural rubl	per latex gloves	not used per CGS §19a-36f		10000	
(m)/h) (10	111	0.1	7	Viola	tions	docume	ented	Date corrections du		#	
Person in Charge (Signature)	.41	44				n Violatio				π	
- n				Prior	ity Fo	undation	Item Violations			_	
Person in Charge (Printed) (20 Ve 5005: ers				Core	Item	Violation	S	9/28/2074			
	nin	À		Risk	Facto	r/Public I	Health Interven	tion Violations		3	_
Inspector (Signature) 7. Date 6/2	812	7		Repe	eat Ris	k Factor	/Public Health	Intervention Violations		_	
1 MILLEN LAMANNII				Good	d Reta	il Practic	es Violations			3	
Inspector (Printed) LWVIII 614/10				Requ	uires l	Reinspe	ction - check b	ox if you intend to reinspec	t		
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to	corre	ect an	v inst	ection v	iolation identif	ied by the food inspector or	to hold	dest	rov
or dispose of unsafe food, may appeal such order to the	Directo	or of I	Heal	th, no	t late	r than fo	rty-eight hours	after issuance of such ord	er		, ,

Foo	d Esta	ıblishment Inspec	ction I	Report	Page	of
LHD Manchester		Inspection Report Continuation Shee			Date 6/28/2	<u> </u>
Establishment SIIK CITY	corre	Town Manche	ster			
		TEMPERATURE OBSERVA	ATIONS			
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Lo	cation/Process	Temp
2dony	Tomp	Freezer (basement)	ρF	01107 CUI	nitizer zhal	21/1/1000
	A # T		UF	gua ju	IIIICU Suuy	200 001
outter	ADF	refrigeration		3 bay no		1104
milk	4.0F	(basement)		handsir	n'n hôt lluater	1 89F
V 1 V 1 1 1		sweet notato	37F	1 1001100011	· · · / / / / / / / / / / / / / / / / /	1
		oweci porato	21,			Temp▶Rite. 🖫
bay war ie		,	1000 000 000 000			Date:
sausaar	40F	nothold eag	142F		7	Fecha Emp:
anacamore	40F	101 170 101 29]				PASS WHEN BLUE
- COOL	418	WILL Trant TO LEIN BICK HOIN	40F			ES ACEPTABLE CUANDO LA BARRA
tomatous		milk Front retrigeration	- L	0::0		160°F/71°C
		SERVATIONS AND CORRECT				7-100 1//1:C
Item Violations cited in this	report must be	e corrected within the time frames below	r, or as stated	d in sections 8-40	5.11 & 8-406.11 of the	food code.
Number CFPM: Caleb						
notex test strips of	wailar			11 11 2 2 2	-	
		red intermingted o	n D MIII	nmen+/n	ren table	
10		· ·	nzquij	DYTICHT / P	14 140cc	
111010			+ 11 1	nnn Cink	Kraam	
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		rigeration in basi		•	5 04:	
	1	ill need to purchase				
bothed produ	1+1ef1	igeration stops fur Ekept in refrigera	1 CT (ON)	ing for 1	CS FOODS, OI	coniy
		, ,	ITLON			
		torganized				
Thermomete		- VOID U	2 K 10	11/11/10 10 10 10 10 10 10 10 10 10 10 10 10 1	NIEL build	lina
anscourta da	DUTUN	of walk in cools	cr - nc	otiry ME	am, bulla	.171g
and chorage	AL PAI	ements prior				
9000 5101 age	or tyl	sipment/utensils				
	-11 = 7					
Porcon in Charge (Singleton)	Com)			Date 6/29	2/24
Person in Charge (Signature) Inspector (Signature)	imd II	V			Date (0 28	y U 1
inspector (signature)	UIIUVV	X			Date (A /X	14

Risk Category: 3 Food Establ	ishn	nen	it Ir	nspecti	ion Re	port	Page 1	of _3_	
Establishment type: Permanent Temporary Mobile Other					Date: /	1118/2024			
Establishment SONIC	sering Connecticus Meaning				Time In 10 AM/PM Time Out 11:30 AM/PM				
Address 90 BUCKLANGSTreet	DPH)				LHD MANCHESTEY				
TOWN/City Manchester					Purpose	of Inspection:	Routine Pr	re-op	
Permit Holder Chad -CFPM	Co	onnecti of Pr	icut De ublic H	partment lealth	Reinspe	ction Othe	er		
FOODBORNE ILLNESS RISK FA	ACTO	RS	ANI	D PUBL	IC HEAL	TH INTERVENTION	ONS		
Risk factors are important practices or procedures identified as the most prevalent contr	ributing fa	ctors	of food	dborne illness (or injury. Inte	rventions are control measur	es to prevent foodborne illn	ess or injury.	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	D-D-C (Ca)			compliance			A=not applicable N	/O=not observed	
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appi	ropria	ate box for C	COS and/or	R COS=corrected on-s	site during inspection	R=repeat violation	
IN OUT N/A N/O Supervision	٧	cos	R	IN O	UT N/A N/O		m Contamination	V COS R	
Person/Alternate Person in charge present,	Pf	0	0	25/03	000	Food separated and p		(A)(C)(O)	
demonstrates knowledge and performs duties	6,000			RO 6	XO	Food-contact surfaces		A PROCO	
Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 00		Proper disposition of re		POO	
Employee Health		1			De service	served, reconditioned, Jime/Temperature Co			
Management food employee and conditional employee:	1	1		18 0	000	Proper cooking time a	nd temperatures	P/Pf/C O O	
knowledge, responsibilities and reporting	P/Pf	0	0	1	000	Proper reheating proce	edures for hot holding	g POO	
4 Proper use of restriction and exclusion	Р	0	0		000	Proper cooling time ar	d temperatures	POO	
5 Written procedures for responding to vomiting and	Dr				000	Proper hot holding ten	nperatures	P 0 0	
diarrheal events	Pf	0	0	22 00 6		Proper cold holding te		POO	
Good Hygienic Practices				23		Proper date marking a	nd disposition	P/Pf O O	
6 O Proper eating, tasting, drinking, or tobacco products use	e P/C	0	0	24 0		Time as a public healt		3 2/2/2	
7 O No discharge from eyes, nose, and mouth	С	0	0	24		and records	900, 1990 - 1990 - 1900 - 1990 - 1990 - 1 8 9 (1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990	P/Pf/C O	
Preventing Contamination by Hands				1		Consumer A	dvisory		
8 Hands clean and properly washed	P/Pf	0	0	25		Consumer advisory provide	ed: raw/undercooked food	Pf OO	
No bare hand contact with RTE food or a	P/Pf/C	0	0	/	T BROWN	Highly Susceptible			
pre-approved alternative procedure properly followed		1579		26 🗷 🤇		Pasteurized foods used; pr			
isospecial indication of the property supplied accessible	Pf/C	0	0	/		od/Color Additives an			
Approved Source 11 Source Source	DIDNO			27 0		Food additives: approv		d POO	
11 Sood obtained from approved source 12 Sood of Food received at proper temperature	P/Pf/C			28		Toxic substances prop	erly identified,	P/Pf/C O	
13 C Food received at proper temperature Food in good condition, safe, and unadulterated	P/Pf P/Pf	_	9		399	stored & used		1111000	
			-			onformance with App Compliance with varia			
14	P/Pf/C	0	0	29 0		process/ROP criteria/h		P/Pf/C O	
	DD RE	TAII	L PR	RACTICES	3	procedurer official	ir toor i lair		
Good Retail Practices are preventative measures to	contro	I the	additi	ion of patho	gens, chem	icals, and physical objects	s into foods.		
				for COS and		COS=corrected on-site		R=repeat violation	
OUT N/A N/O Safe Food and Water	v	cos	R	OUT		Proper Use of U	- The Control of the	V COS R	
30 Pasteurized eggs used where required	Р	0	0	43 O In	-use utens	ils: properly stored		c 00	
31 O Water and ice from approved source	P/Pf/C	0	0	44 O Ut	tensils/equip	oment/linens: properly sto	red, dried, & handled	Pf/C O O	
32 O Variance obtained for specialized processing methods	Pf	0	0			ngle-service articles: prop	erly stored & used	P/C 0 0	
Food Temperature Control	<u> </u>			46 O G	loves used			C O O	
Proper cooling methods used; adequate equipment for	Pf/C	0	0			Utensils and E			
temperature control		1377	50000			n-food contact surface		P/Pf/C O O	
34 O Plant food properly cooked for hot holding	Pf		0			igned, constructed, and		1.11.110	
35 Approved thawing methods used 36 Thermometers provided and accurate		0				g facilities: installed, m		Pf/C O O	
	Pt/C	0	2	CI	eaning age	ents, sanitizers, and tes	t strips available		
Food Identification 37 Food properly labeled; original container	DEF	0		49 Q IN	оп-тооа со	ntact surfaces clean	-11141	(0)00	
Prevention of Food Contamination	17.00	9		50 O H	ot and colo	Physical Fa water available; adequ		B 00	
38 Insects, rodents, and animals not present	Pf/C	0	0			stalled; proper backflow		Pf O O	
39 Contamination prevented during food preparation, storage & display	P/Pf/C		_	52 0 8	ewade and	waste water properly of	lienosod	P/Pf/C O O	
40 O Personal cleanliness		0		53 V T	oilet facilitie	es: properly constructed	d supplied & clean	Pf/C O O	
41 O Wiping cloths: properly used and stored	С	_	$\overline{}$	54 O G	arbage and	refuse properly disposed	facilities maintained	P C 00	
42 Washing fruits and vegetables	P/Pf/C			65 X PI	hysical faci	lities installed, maintair	ned, and clean	P/Pfic O	
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable	э.	(56) (A	dequate ve	entilation and lighting; d er latex gloves not use	esignated areas use	d COO	
		-	-	Violation	s docume		te corrections due	#	
Person in Charge (Signature) Date				- Production Control	em Violatio		171124	3"	
(Admin hours 7)	WI	21.					128124	3	
Person in Charge (Printed)	10/	14		Core Item	Violations	io	118174	15	
Inspector (Signature) & STANNIN - 4/10	120	21	į į	Risk Fact	or/Public H	lealth Intervention Viola	itions	5	
Inspector (Signature) Date	120	47				Public Health Interventi	on Violations		
Inspector (Printed)						es Violations		16,	
	المحادة عاد	25 4-	00	requires	Reinspec	tion - check box if you	intend to reinspect		
Appeal: The owner or operator of a food establishment aggrieved by the	Direct	01 15	COTT	ect any ins	spection vi	olation identified by th	e rood inspector or	to hold, destroy,	
or dispose of unsafe food, may appeal such order to the	חופכננ	JI UT	пеа	iui, not late	er man for	ty-eight nours after iss	suance of such orde	er.	

reinspection: 7/22/24

Food Establishment Inspection Report Inspection Report Continuation Sheet Mancheste Establishment TEMPERATURE OBSERVATIONS Item/Location/Process Item/Location/Process Temp Item/Location/Process Temp not water H.S not dua-cald AUF 150F Chill 38F 10 1 F 401 FOF corn doo 395 blockbeld 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 by small 3 bayin front damaged/unclean d/crack floor files in front of house, by ice Machine 49C 16 15 Hoor by cookline drive thru window (not in use

49c Walls Floors by mop sink not clean
55c equipment (not in use) at back exit - to be removed
56c cove base missing in mens restroom / womens restroom
and in hall way of restroom

Person in Charge (Signature)

Date 7/18/202

	Foo	d Estal	olishn	nent Inspe	ection Re	eport	Page 3 o	f <u>3</u>
LHD_M()	nchester		Inspection F	Report Continuation Sh	neet	Date 7 18/2024		
	ment_SMIC			Town Man Ch	rester		-	
				RATURE OBSER				
ltem	/Location/Process	Temp	Item/L	ocation/Process	Temp	Item/Location	n/Process	Temp /
		OBS	SERVATIO	NS AND CORRE	CTIVE ACTION	IS		
Item	Violations cited in this			hin the time frames be			& 8-406.11 of the f	food code.
Number								
530F	Toilet paper	loanert	-owe i	s not in di	spenser	or restro	om	
	l I	TA A D						
	Therimmen	IT LOA	Gerino	Maritable	0			
	Thermometer discussed pe	of contr	011/62	1 212 :00	ICCLIA!			
	discussed pe good equipm nood clean	JI COLUIT	or wi	PIC - 110	is soes			
	good equipm	nerit jut	thsil 8	Tolage	0			
	hood clean	ing du	eins	tpt. 2021				
				I.				
				1				
					-			
								12-
						V		
Person in	Charge (Signature)	. /	A.B	settle.			Date 7/18	124
Inspector	1.0	may	1	U		Г	Date 7/18/7/	74

Piet Catanana O E - 1 E - 1 I			. 1					2	
Risk Category: 2 Food Establishment Inspection Report Page 1 of 2									
Establishment type: Permanent Demporary Mobile Other					Date:	6/27/	24		
Establishment Sorrento's Pizza			Connec	cticar Health	Time In (:00 AMPM) Time Out 2:30 AMPM				
Address 183 Spruce St.			DPH)			Manch	ester		
Town/City Manchester	J				Purpose	of Inspection:	Routine	Pre-op	
Permit Holder Khalilur Rahman			blic He		Reinspec		Other		
FOODBORNE ILLNESS RISK F.									
Risk factors are important practices or procedures identified as the most prevalent conti Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered i		10000		2410	The Advisor High Inc. Co.	- 10 Syll 1			
P=Priority item Pf=Priority foundation item C=Core item V=violation type				compliance		t in compliance	N/A=not applicable ted on-site during inspection	N/O=not observed	
IN OUT N/A N/O Supervision	V	cos		1	JT N/A N/O		on from Contamination	v cos R	
Person/Alternate Person in charge present				15		Food separated		P/C 0 0	
demonstrates knowledge and performs duties	Pf			16 00 /			urfaces: cleaned & sanitiz		
2 Certified Food Protection Manager for Classes 2,	С			17			ion of returned, previously	v This	
3, & 4	C	0	0	17 3		served, recondi	tioned, and unsafe food	P 0 0	
Employee Health						Time/Tempera	ture Control for Safety		
Management, food employee and conditional employee;	P/Pf	0		18 🗸 🤇	09	Proper cooking	time and temperatures	P/Pf/C O O	
knowledge, responsibilities and reporting		-30		19 0 0	ODD	Proper reheatin	g procedures for hot hold		
Written procedures for responding to veniting and	P	0	9	20 0		roper cooling	time and temperatures	POO	
diarrheal events	Pf	0		21 0			ing temperatures	P 0 0	
Good Hygienic Practices	-	4		23	300	Proper data ma	ding temperatures rking and disposition	P O O	
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	101	0				c health control: procedu		
7 No discharge from eyes, nose, and mouth	C	0		24 0 0		and records	c ricalti control, procedu	P/Pf/C O	
Preventing Contamination by Hands					1		umer Advisory		
8 V Mands clean and properly washed	P/Pf	0	0	25 0 0	D 0/1		y provided: raw/undercooked for	ood Pf OO	
9 No bare hand contact with RTE food or a	P/Pf/C					Highly Sus	ceptible Population		
pre-approved alternative procedure properly followed				26 0 0		Pasteurized foods	used; prohibited foods not offe	red P/C O	
Adequate handwashing sinks, properly supplied/accessible	Pfc		0	-11			ves and Toxic Substanc		
Approved Source				27			approved and properly u	sed POO	
. Cod obtained nom approved source	P/Pf/C			28			es properly identified,	P/Pf/C O O	
12 O Food received at proper temperature 13 Food in good condition, safe, and unadulterated	P/Pf					stored & used			
Poguired records quellable melluses a hallfact	P/PT	0	\supseteq	-/			th Approved Procedure	S	
identification, parasite destruction	P/Pf/C	0		29			h variance/specialized riteria/HACCP Plan	P/Pf/C O O	
	OD RE	TAIL	PR	ACTICES	1000	p.100033/11(0) C.	ILENATIACOF FIAIT		
Good Retail Practices are preventative measures t					ens, chemic	cals, and physical	I objects into foods.		
				or COS and			on-site during inspection	R=repeat violation	
OUT N/A N/O Safe Food and Water	v	cos	R	OUT			e of Utensils	V COS R	
30 Pasteurized eggs used where required	Р	0		43 O In-	use utensil	ls: properly store	ed	000	
31 Water and ice from approved source	P/Pf/C	-	_				erly stored, dried, & handle	d Pf/C O O	
32 O Variance obtained for specialized processing methods	Pf	101	0				es: properly stored & used	P/C ()	
Food Temperature Control Proper cooling methods used; adequate equipment for				46 O Glo	oves used			C O O	
temperature control	Pf/C	0					and Equipment		
34 O Plant food properly cooked for hot holding	Pf	0					urfaces cleanable,	P/P /C)	
35 O Approved thawing methods used		0				gned, constructor facilities; insta	ed, and used lled, maintained and used		
36 Thermometers provided and accurate	Pf/C	0	\preceq				ned, maintained and used and test strips available	Pf/C O	
Food Identification	1.00	191				itact surfaces cl		100	
Food properly labeled; original container	Pf	0	0				ical Facilities		
Prevention of Food Contamination				50 O Ho	t and cold	water available	; adequate pressure	Pf 0 0	
Insects, rodents, and animals not present	PfC	0		(51 00 Plu	mbing inst	talled; proper ba	ackflow devices	P/Pf/000	
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	\supset	52 O Se	wage and	waste water pro	perly disposed	P/Pf/C O O	
40 Personal cleanliness	277.151.475	0	$\supset $	53 O To	ilet facilities	s: properly cons	structed, supplied, & clear	n Pf/C O O	
41 Wiping cloths: properly used and stored	С	0		54 O Ga	rbage and r	efuse properly di	sposed; facilities maintained	d C O O	
42 Washing fruits and vegetables	P/Pf/C			55 O Ph	ysical facili	ities installed, m	naintained, and clean	P/Pf/C O O	
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable.	0	55 40 Ad	equate ver	ntilation and ligh	nting; designated areas us	sed OOO	
				Violations			ot used per CGS §19a-36		
Person in Charge (Signature)	27-2	2021	4	Priority Iter			Date corrections de		
			-			em Violations	Cos		
Person in Charge (Printed) Chalily Rahman				Core Item '	Violations		7-27	24 12	
Inspector (Signature) (Signature) Date 6/2	7/	14		Risk Facto	r/Public He	ealth Interventio	n Violations ervention Violations	~ 1	
1000	16			Good Reta	il Practices	s Violations		12	
Inspector (Printed) Jose Ramirez				Requires I	Reinspecti	ion - check box	if you intend to reinspe	oct	
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to c	orre	ect any inst	pection via	lation identified	d by the food inspector of	or to hold destroy	
or dispose of unsafe food, may appeal such order to the	Directo	or of H	lealt	th, not late	r than forty	y-eight hours a	fter issuance of such or	der.	

	F00	d Esta	idiishme	ent Inspe	ction b	Report	Page 🔼	of <u>A</u>		
LHD M	lanchester			ort Continuation She		•	Date 6/27	24		
Establish	ment Sorrentos	Pizz	.G Tov	vn_Manch	ester		1 1			
TEMPERATURE OBSERVATIONS										
Item	/Location/Process	Temp		tion/Process	Temp	Item/L	ocation/Process	Tomp		
Pizza		· omp	1		Tellip	. 1 1	/ / ^	Temp		
11220	. Cold prep table	Zat.	Dox RIC	1 1	200		K by 195	110F		
	Sausage	39F		Feta	39F	Chlorine	bucket	50ppm		
	Bacon	39F		mays	39 F					
	Pepperoni	39F	2 DOOCS	liding cooler		Pi27a	cooked to	190F		
l	Shredded MOZZ	39F		MOZZ	39F		cooked to	180F		
Door	(RIC MOZZ	38F	.51	iced Ham	39F	OINO/AC.	000.00	1801		
1	Cheese Cake	38F	3	iced turkey	39F					
	RULTEC	38F	1	iced tomation	Ant					
	120910	OB	SERVATIONS	AND CORRECT	TIVE ACTIO	ONS				
Item	Violations cited in this	report must be	e corrected within t	he time frames below	v, or as stated	in sections 8-40	5.11 & 8-406.11 of the	food code.		
Number		T								
	Naim, CFPM or	ISITE								
10 PF	1/20,000	120	2 - 1	10.11	0,/	-				
WIT	No paper 4	wels	at han	c SINK b	y 100)				
49C	Walls uncle	ean the	six.hout	V 2 1107	,					
200	Race	1	agnos-1	2						
200	Transcreen	0001	open, mis	Sina Sc(ee	20					
4ac	interior of s	slidina.	Inc RIC	uncloan						
100	101-15	1	Diel	11 1	1.		M 3-			
99C		d d00(KIC by	grill uncle	an, als	oo exter	10(
99C	Floor Walls	acoun	land und	er faller	onclea	n				
36C	11 1/1 ((1	/	1 . 11	11-1-1	1	20 . 0	2/12			
,	Hood baffle	Sunc	lean. 1700	d, last Cle	raned 1	Vacch 2	024. Due 50	P24.		
97c, 49c	Shelizes by	trups	lined in	1 -alom f	oil . 1200	relean à	not cleanab	ام ا		
99c			,	1		C.S.S.	no r Creatificati	,		
Total Section	interior of 1	1	1 ,	f						
37c	unlabeled 5	nakecs	at cook	line						
510	N/4 M-0 (10	V	, 0.0.	71						
10	100 110P SIII	2		1						
990	No mop sin	KICIN	garage i	nclean						
Note	All 'C' Vida	tions m	just be	corrected	bv 7	-27-	24.			
Note	remove all un	لمالمجن	amaged	eaviement:	C:1:5	not con	irable			
حساره (۸	K000 -11		المارية	1 2		11	made.	-1 -		
MALE	keep outdoor	grease	2 Tank C	lean Kemi	pre clu	ttec min	from dumps	tel area.		
Vote	lest stops	E th	ermomete	(allailabl	e.					
Note	MOR SINK W	ill be	located 1	eff side	0 5 3 B	Ball Sint	₹.			
Note	MOP SINK W	rill be	installed	next mon	th who	in Flores	s are seels	red.		
	Must obtain p	ermits	s and sul	emit spec s	Shoot P	cioc to	Parcha Sina.			
Vote	Discussed alle	(aen ans	tec. Avail	able on DP	H woha	te musel	Le nocted	4		
Person in	Charge (Signature)	E TID	~ . / [• 00]	VII VI	1 NCDI	1000	Date 06/27	1211		
	//	2	•							
inspector	(Signature)	ju	ح				Date 6/27	127		

Risk Category: 2 Food Estab	lichm	nen	f In	isnec	tion R	enorf		Page 1 c	of 2_	
Establishment type: Permanent Temporary Mobile Other		.opoo	Date:	7	15/2					
Establishment Starbucks - Deming		42 epin	Connec	ctical Healing		Time In 11:45 (AM)PM Time Out 12:30 AM/PM				
Address 172 Deming St	DPH)				LHD Manchestec					
Town/City Man Chester					Purpo	se of Ins	spection:	Routine Pro	e-op	
Permit Holder								Other		
FOODBORNE ILLNESS RISK F										
Risk factors are important practices or procedures identified as the most prevalent continuous Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered in			446,000	2007	1007	Cheate Street World Street				
P=Priority item Pf=Priority foundation item C=Core item V=violation type		14(4)	10.00	compliand		=not in co			O=not observed	
IN OUT N/A N/O Supervision	v	cos					10 TO THE		R=repeat violation	
Dorgon (Alternate Dorgon in all ours and and	V	003			ON TOO		separated ar	from Contamination	V COS R	
demonstrates knowledge and performs duties	Pf	0	0		00			na protectea aces: cleaned & sanitized	P/C O O	
Contified Food Destration Manager for Classes 2	1 080	19000			9	-		of returned, previously		
2 Ø O Certified Food Protection Manager for Classes 2,	С	0	9	17 🕜	0			ned, and unsafe food	POO	
Employee Health				100 100 1				e Control for Safety		
Management, food employee and conditional employee;	P/Pf			18 🔾	00	Prope	er cooking tim	ne and temperatures	P/Pf/C O	
knowledge, responsibilities and reporting	100-20035	0		19 🔾	00	Prope	er reheating p	procedures for hot holding	POO	
4 2 Proper use of restriction and exclusion	P	0	0	20 🔾	00	Prope	er cooling tim	e and temperatures	POO	
Written procedures for responding to vomiting and	Pf	0		21 0				temperatures	POO	
diarrheal events Good Hygienic Practices				22 3				g temperatures	POO	
6 Proper eating, tasting, drinking, or tobacco products us	a Tric			23 🕏	00	Prope	er date markii	ng and disposition	P/Pf O O	
7 O No discharge from eyes, nose, and mouth	e P/C	0	읭	24 🔾	00		as a public n ecords	ealth control: procedures	P/Pf/C O O	
Preventing Contamination by Hands			\preceq			and re		er Advisorv		
8 9 Hands clean and properly washed	P/Pf	0	0	25 🔘	00	Consu		ovided: raw/undercooked food	Pf 0 0	
9 No bare hand contact with RTE food or a		252.00						ptible Population	1.100	
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 🔾	00	Pasteu	rized foods use	ed; prohibited foods not offered	P/C 00	
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0					s and Toxic Substances		
Approved Source				27 🔾	90	Food	additives: ap	proved and properly used	POO	
11 O Ood obtained from approved source	P/Pf/C	0	0	28	00			properly identified,		
12 C Food received at proper temperature		0	_	20			d & used		P/Pf/C O	
13 Food in good condition, safe, and unadulterated	P/Pf	0	0					Approved Procedures		
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29	00			ariance/specialized	P/Pf/C O O	
	OD DE	TAII	DD	ACTICE	-	proce	SS/ROP Crite	ria/HACCP Plan		
Good Retail Practices are preventative measures to						emicale a	nd physical of	piacte into foods		
				for COS a				site during inspection	R=repeat violation	
OUT N/A N/O Safe Food and Water	v	cos	R	OUT	ind/or it		Proper Use of		V COS R	
30 Pasteurized eggs used where required	Р		0		In-use ute		perly stored		c 00	
31 Water and ice from approved source	P/Pf/C	0	0					y stored, dried, & handled	Pf/C O O	
32 O Variance obtained for specialized processing methods	Pf	0	0					properly stored & used	P/C O O	
Food Temperature Control				46	Gloves us	sed prope	rly		c 0 0	
Proper cooling methods used; adequate equipment for	Pf/C	0						nd Equipment		
temperature control								faces cleanable,	P/Pf/C O O	
34 O Plant food properly cooked for hot holding	Pf	0					constructed.		171 110	
35 Approved thawing methods used 36 Thermometers provided and accurate	Pf/C	00	9	148 0		154		d, maintained and used;	Pf/C	
Food Identification	PT/C	0	9					test strips available	2	
37 Food properly labeled; original container	Df/C	0		9/2	NON-1000	contact s	urfaces clea		000	
Prevention of Food Contamination	1110	191	\subseteq	50	Hot and o	old water	Priysica	I Facilities dequate pressure	Df O	
38 Insects, rodents, and animals not present	Pf/C	0	0	51	Plumbing	installed	nroner hack	flow devices	Pf O O	
39 Contamination prevented during food preparation, storage & display	P/Pf/C						water prope		6 (0)00	
40 Personal cleanliness		0						icted, supplied, & clean	Pf/C O O	
41 Wiping cloths: properly used and stored	С	0	0	54 🔾	Garbage a	ind refuse	properly dispo	osed; facilities maintained	c 00	
42 O Washing fruits and vegetables	P/Pf/C	0	0	55	Physical t	acilities in	nstalled, mai	ntained, and clean	P/Pf/C O O	
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ilable						g; designated areas used used per CGS §19a-36f	c 00	
Person in Charge (Signature)	3/7	Ϋ́		Violatio	ns docui	mented		Date corrections due	#	
Person in Charge (Printed) Stephanie Weiker	7			Priority I	Foundation M Violation	on Item Vi	olations	10/5/24	<u> </u>	
1 1/2 mod 11/	Inm	1		Risk Fac	ctor/Publi	c Health I	ntervention \	Violations		
Inspector (Signature) Date 15	1202	7		Repeat	Risk Fact	or/Public	Health Interv	vention Violations		
Inspector (Brintary) / MINON 6 MINON	,				etail Prac				24	
Inspector (Printed)	E-100 (E-101)			Require	es Reinsp	ection -	check box if	you intend to reinspect		
Appeal: The owner or operator of a food establishment aggrieved by to or dispose of unsafe food, may appeal such order to the	Directo	or of l	Corre	ect any ir	nspection	violation	n identified b	by the food inspector or to	o hold, destroy,	

Food Esta	ablishment Inspec	tion Repor	† Page 2	of <u>2</u>
HD Manchester	Inspection Report Continuation Shee			24
Establishment Starbucks - De	eming town Manch	rester		
Stabilishment Start Stabilishment	TEMPERATURE OBSERVA			
Item/Location/Process Temp	Item/Location/Process		n/Location/Process	Temp
2 door reach in milk 41F	2 door freezer		ndsin K	107
under counter tomato 41 F			at sonitizer	
sandwich 701 20F		gʻva		15000
L> milk 2% 39F			omer bathroom	7160
-> Whole mile 41		(ISAN	rachine	Temp Rite.
				Date: Fecha
				Empleado PASS WHEN BLUE RAR TURNS ORANG
	BSERVATIONS AND CORRECT		0 405 44 9 0 400 44 at the	ES ACETABLE COLOR HARAN AZUL CAMMA A COLOR HARAN
item	be corrected within the time frames below	, or as stated in sections a	3-405.11 & 8-406.11 Of the	100
CPMII. STEPHOVIC				
52c 3-bay sink	along leabor, wi	th buckets	i underneat	n
w/ stagnant				
	door reach in fo	20705 11061	960	
11.1101.00			[47]	
	I stagnent water			
52P grease trap lea	King water -(c	08	2	
49c handles on cab	pinets in front	unclean	(underside))
				,
		and the second control of the second control		
and labelies				
note good labeling	d 8 :	1		
note overall very ch	ean and organize	d		
note the momester a	vailable			
1,101	101 10			
Person in Charge (Signature)	IRCC		Date 7 5	202U
			٠,	
Inspector (Signature) Z . XTM CM			Date 7/5/24	1

Risk Category: 2 Food Establishment Inspection Report Page 1 of 2									
	iisnn	nen	tır	ispec	tion K	eport	Page 1 o	f	
Establishment type: Permanent Temporary Mobile Other					- Date:	6/20/24			
Establishment STATBUCHS -SPENCER ST		4 septim	Conne	cticus Health	Time I	n(AM)	PM Time Out 12;	OO AMPM	
Address 210 Spencer street			P	H)	LHD	manche	stek		
Town/City Manchester					Purpos	se of Inspection:	Routine Pre	-ор	
Permit Holder	Co	onnectic of Pu	tut De	partment ealth	Reinsp	pection C	Other		
FOODBORNE ILLNESS RISK FA	ACTO	RS /	ANI	D PUB	LIC HEA	LTH INTERVEN	TIONS		
Risk factors are important practices or procedures identified as the most prevalent cont Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if		117	Distance of	bome illne complian	1,200	nterventions are control me not in compliance	Control of the Control of the Control	ss or injury. D=not observed	
P=Priority item Pf=Priority foundation item C=Core item V=violation type								R=repeat violation	
IN OUT N/A N/O Supervision	v	cos	_		QUT N/A N	Service Control of the Control of th	from Contamination	V COS R	
Person/Alternate Person in charge present	25			15 🔾		○ Food separated an		P/C 0 0	
demonstrates knowledge and performs duties	Pf	0		16 🕏		Food-contact surfa	ices: cleaned & sanitized	P/Pf/C O O	
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0		17	0		of returned, previously ned, and unsafe food	POO	
Employee Health				1 - F81			e Control for Safety	NAME OF TAXABLE PARTY.	
Management, food employee and conditional employee;	P/Pf	0		18 🔾	000	Proper cooking tim	e and temperatures	P/Pf/C O O	
knowledge, responsibilities and reporting		100	5-54	19 🔾			rocedures for hot holding	POO	
Proper use of restriction and exclusion	P	0	0	20 🔾	00	○ Proper cooling time	e and temperatures	P 0 0	
Written procedures for responding to vomiting and diarrheal events	Pf	0	0	21 🔾	000	Proper hot holding	temperatures	POO	
Good Hygienic Practices				22	000	Proper cold holding Proper date marking	g temperatures	P 0 0	
6 O Proper eating, tasting, drinking, or tobacco products us	e P/C	0			1		ealth control; procedures	P/Pf O O	
7 O No discharge from eyes, nose, and mouth	C	0		24 🔾	000	and records	eatti control, procedures	P/Pf/C O	
Preventing Contamination by Hands							er Advisory		
8 O Hands clean and properly washed	P/Pf	0	0	25 🔾	00		ovided: raw/undercooked food	Pf 00	
No bare hand contact with RTE food or a	P/Pf/C					Highly Suscep	otible Population		
pre-approved alternative procedure properly followed				26	00	Pasteurized foods use	d; prohibited foods not offered	P/C 0 0	
Adequate handwashing sinks, properly supplied/accessible	PIC	0	0		/ F		and Toxic Substances		
Approved Source			200	27 🕞	00	Food additives: ap	proved and properly used	POO	
Food obtained from approved source	P/Pf/C		0	280	×o	Toxic substances	properly identified,	PPF/C X	
12 O Food received at proper temperature	P/Pf	_	0	U	N -	stored & used		U. "SPACE	
Food in good condition, safe, and unadulterated Required records available: molluscan shellfish	P/Pf	0	9				Approved Procedures	MORILE LEGIS	
identification, parasite destruction	P/Pf/C	0	0	29 🔾	00	process/ROP criter	ariance/specialized	P/Pf/C O O	
	OD RE	TAIL	PR	ACTIC	ES	process/NOT criter	HAN IACCE FIAM		
Good Retail Practices are preventative measures to	o contro	I the a	additi	on of pat	hogens, che	emicals, and physical ob	jects into foods.		
					and/or R			R=repeat violation	
OUT N/A N/O Safe Food and Water	V	cos	R	OUT		Proper Use of		V COS R	
30 Pasteurized eggs used where required	Р	0	0			nsils: properly stored		c 0 0	
31 O Water and ice from approved source	P/Pf/C		0	44 🔾	Utensils/eq	uipment/linens: properly	stored, dried, & handled	Pf/C O O	
32 O Variance obtained for specialized processing methods	Pf	0	0			/single-service articles: p	properly stored & used	P/C O O	
Food Temperature Control Proper cooling methods used; adequate equipment for				46	Gloves us	ed properly		C O O	
temperature control	Pf/C	0	0	au	Food and	non-food contact surf	nd Equipment		
34 O Plant food properly cooked for hot holding	Pf	0	0	47	1	esigned, constructed,		P/P(C)	
35 O Approved thawing methods used		0		\mathcal{O}			d, maintained and used;		
36 C Thermometers provided and accurate	Pf/C	0	\tilde{c}	48		igents, sanitizers, and		Pf/C O O	
Food Identification				49		contact surfaces clear		1000	
37 Food properly labeled; original container	Pf/C	0	0				I Facilities	0	
Prevention of Food Contamination			Upa-Kirk	50 🔾	Hot and co	old water available; ac		Pf OO	
38 Insects, rodents, and animals not present	Pf/C	0	0			installed; proper back		P/Pf/C O O	
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	0	52 🔾	Sewage a	nd waste water prope	rly disposed	P/Pf/C O O	
40 Personal cleanliness		0					cted, supplied, & clean	Pf/C O	
41 Wiping cloths: properly used and stored	C	0					sed; facilities maintained	000	
42 Washing fruits and vegetables	P/Pf/C	-				acilities installed, mair		P/Pf/C O O	
Permit Holder shall notify customers that a copy of the most recent inspection report is available. 56 Adequate ventilation and lighting; designated areas used C Natural rubber latex gloves not used per CGS §19a-36f									
Person in Charge (Signature) Forch / Softil Date 6/1	077	is		Violati	ons docum	nented	Date corrections due	#	
Person in Charge (Signature)	ULL	- 1	_		Item Violat		cos —	4	
Person in Charge (Printed) TOOLYN LOUBrill				Core	Foundation em Violatio	n Item Violations	lasias	-	
The latter of	1		\dashv			ns S Health Intervention V	Violations 4	4	
Inspector (Signature) A STINCLY Date 6/20	1/24			Repeat	Risk Facto	or/Public Health Interv		2	
Inspector (Printed) LAWAN GRANNI	•					ices Violations ection - check box if	you intend to reinspect	3	
Appeal: The owner or operator of a food establishmen aggrieved by the	his orde	er to d	corre	ect any	inspection	violation identified b	y the food inspector or to	hold, destroy,	
or dispose of unsafe food, may appeal such order to the	Directo	or of h	Heal	th. not	ater than f	orty-eight hours after	r issuance of such order		

Food Establishment Inspection Report Inspection Report Continuation Sheet Town Manchester Establishment STA POUCKS-SOLD W. TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Process Item/Location/Process Temp Temp 388 ich cold Di whole wolk - undercounter omelet bites 4115 35F restroom **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 Machines at front area not ppm - person incharge to I person in charge

Person in Charge (Signature)

Inspector (Signature)

Risk Category: 2 Food Estable	lishn	nen	t Ir	nspect	ion R	eport		Page	e 1 of <u>3</u>	
Establishment type: Permanent Temporary Mobile Other					Date:	7/15	24			
Establishment Subway - Center St.		4echi	ng Conne	eticur Hearing	Time I	n 12:00	AMIPIN	Time Out	1:45	_AM/RM
Address 288 Center St.			P	H)	LHD)	manch	reste			
Town/City Manchester	J	7			Purpos	se of Inspecti	on: (Routine	Pre-op	
Permit Holder Ryan Gwigz Cowski		of Pt	ublic He	20,440		ection	Othe			
FOODBORNE ILLNESS RISK FA										
Risk factors are important practices or procedures identified as the most prevalent cont								naria recent de la constanta d	100 to 10	Water State of State
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				compliance		not in complian		=not applicable	N/O=not o	
P=Priority item Pf=Priority foundation item C=Core item V=violation type		_						ite during inspection		at violation
IN OUT N/A N/O Supervision	V	cos	R		DUT N/A N			n Contamination		COS R
Person/Alternate Person in charge present,	Pf	0	0	15/0		○ Food separa				00
demonstrates knowledge and performs duties				60	200	444		cleaned & saniti		000
Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 00				eturned, previous and unsafe food	ily	POO
Employee Health	Paris							ntrol for Safety		THE STATE OF
Management, food employee and conditional employee;	P/Pf	0			000	Proper cook	ing time an	nd temperatures		000
knowledge, responsibilities and reporting	FIFI	0		19 🔾	00	Proper rehe	ating proce	dures for hot hol	ding	POO
4 Ø Proper use of restriction and exclusion	Р	0	0	20 0	000	○ Proper cooli	ng time and	d temperatures		POO
5 Written procedures for responding to vomiting and	Pf	0		2000	000	○ Proper hot h	olding tem	peratures		00
diarrheal events	Et			(2)0		○ Proper cold	holding ten	nperatures		00
Good Hygienic Practices			1,500		000	Proper date	marking ar	nd disposition	P/P	00
6 Proper eating, tasting, drinking, or tobacco products us	e P/C			24 0	00			control: procedu	ures	
7 Ø O No discharge from eyes, nose, and mouth	С	0		24		and records			P/Pf/0	
Preventing Contamination by Hands		MILE				Co	nsumer A	dvisory		U U Jage
8 Ø Hands clean and properly washed	P/Pf	0	0	25 0	00			d: raw/undercooked	food Pf	100
9 No bare hand contact with RTE food or a	חוחנום				,	Highly S	Susceptible	e Population		
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0	00	Pasteurized fo	ods used; pro	hibited foods not off	ered P/0	
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	74-44				d Toxic Substan		
Approved Source				27 0				ed and properly i		00
11 Ø C Food obtained from approved source	P/Pf/C	0	0	1				erly identified.		
12 O Food received at proper temperature				28	00	stored & use		only identified,	P/Pf/	
13 Ø C Food in good condition, safe, and unadulterated	P/Pf	-	-		er in			roved Procedure	es	
Required records available: molluscan shellfish	P/Pf/C	0	0	29 0				nce/specialized		
identification, parasite destruction	PIPIIC			29		process/RO	P criteria/H	ACCP Plan	P/Pt/	
				RACTICES			- 1 - 1 - 1			
Good Retail Practices are preventative measures t	o contro	I the a	additi	ion of patho	gens, che					
	n appro	priate	box	for COS an	nd/or R	COS=correct	ted on-site d	luring inspection	R=repe	at violation
OUT N/A N/O Safe Food and Water	V	cos	R	OUT		Proper	Use of Uto	ensils	V	COS R
30 Pasteurized eggs used where required	P	0	0	43 O Ir	n-use ute	nsils: properly	stored		С	00
31 O Water and ice from approved source	P/Pf/C	0	0	44 O U	Jtensils/eq	uipment/linens:	properly stor	red, dried, & handle	ed Pf/0	00
32 O Variance obtained for specialized processing methods	Pf	0	0	45 OS	Single-use	single-service a	ticles: prope	erly stored & used	P/C	00
Food Temperature Control			-11-	46 0 0	Sloves us	ed properly			C	00
Proper cooling methods used; adequate equipment for	Pf/C	0					sils and E			CHETS
temperature control		100000	0	47 O F	ood and	non-food conta	ct surfaces	cleanable,	P/Pf/C	
34 O Plant food properly cooked for hot holding	Pf	0	0	p	roperly d	esigned, consti	ructed, and	used	FIFIN	
35 O Approved thawing methods used		0						aintained and use	ed;	
36 Thermometers provided and accurate	Pf/C	0	0	C	leaning a	igents, sanitize	rs, and test	strips available	Pf/C	
Food Identification				(a) (D) V	lon-food	contact surface	s clean		0	00
Food properly labeled; original container	PfC)0	0			P	hysical Fac	cilities		
Prevention of Food Contamination	-	_		50 O H	lot and co	old water availa	ble; adequ	ate pressure	Pf	00
(38) Insects, rodents, and animals not present		0				installed; prope			P/Pf/C	00
Contamination prevented during food preparation, storage & display Personal cleanliness	P/Pf(C					nd waste water			P/Pf(C	200
40 O Personal cleanliness		0	_	53 O T	oilet facil	lities: properly of	onstructed	, supplied, & clea	an Pf/C	00
41 Wiping cloths: properly used and stored	C	0		54 O G	Sarbage a	nd refuse proper	ly disposed;	facilities maintaine		
42 Washing fruits and vegetables	P/Pf/C	0				acilities installe			P/Pf(C	
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is av	ailable	2.					esignated areas u		00
NA AA I								per CGS §19a-3		
Person in Charge (Signature)	K.	,)	1/	Violation			Dat	e corrections of		#
Person in Charge (Signature) Au Date	12	1	1	Priority It				7,11812		
Person in Charge (Printed) Chard Bell						n Item Violation	S	7/25/2		4,
				Core Item				10/15/20	4	14
Inspector (Signature) Date 7	15	-2	14	Repeat R	Risk Facto	Health Interve	ntion Violat	on Violations	4	0
Inspector (Printed) Jose Ramirez				Good Re	tail Pract	ices Violations				15/
	hin and			requires	reinsp	ection - check	DOX IT YOU	intend to reinsp	ect	V
Appeal: The owner or operator of a food establishment aggrieved by the	Direct	of of	COTTE	ect any in:	spection	violation ident	ified by the	e tood inspector	or to hold,	destroy,
or dispose of unsafe food, may appeal such order to the	Directo	OF OT	neal	in, not lat	ter than f	orty-eight hou	s atter iss	uance of such o	order.	

Foo	d Esta	blish	ment Insped	ction R	eport	Page of	<u>13</u>		
LHD_Manchester			Report Continuation Shee		Da	te_7/15/	24		
Establishment Subwas	1 - Ce	Herst	.Town_Marche	oster					
			ERATURE OBSERV						
Item/Location/Process	Temp		/Location/Process	Temp 3 F	Item/Locatio	per contract to the contract of the contract o	Temp		
Front cold prep egg	27	WIF	11 -6 -6		handsin R				
Salami	44		rold neatballs Chicken salar		(02) puch	bathroom	HOF		
roast beef	1:5	WIC	Cheese	46F					
roasted chicken	50		Chicken	175					
bba savce	50	·	OHIORON	711					
304 34030									
	0.7	OFFI (ATI	ONG AND GODDEG	TIVE ACTIO	AIC.				
Violations cited in thi			ONS AND CORRECT within the time frames below			& 8-406.11 of the fo	ood code.		
Number Chad - C									
(1)0(0 - 0)	11.1	1 31 7							
	- 1 1		1						
16PF Table Mo	unted	3 11C	ec unclear	1					
38PF Snaptr	ap 01	Ider	3 bay sin	1					
38PF Fles pres	sent bu	3 h	au Sink						
49 C INJC FLOOR UNCHERN									
39 cice build up from vent in WIF									
				17)					
1700	2772			(a)	<u> </u>	at v	1		
SSC FRP Sever	ely nan	naged	troughou	ot, co	ve base	danage	d		
		7 1	througho			. 356			
	selow	prep	1 table in	back	not c	lean			
390 WIC di	pping	water	from ce	iling			3		
52C Bucket i	130 (2	ag non	t water o	n bo	ottom sh	elf in	WIC		
SSC Floor Sem	vely o	lanage	d through	out					
375 un labeles	1 sho	r/es	w) granula	VS 00	front 1	ine bo	Hes		
490 over ext	erior		· · · · · · · · · · · · · · · · · · ·	(revo	not cit	ean			
52 c AC leavi	ng dr	ipping	1 over ch	no ba	95 in d	ining a	rea		
490/16PF Interior	exten	or of	au equipi	ment of	neally	not ch	ean		
229 WIC & Cold	free fo	1 1	>41T	U	1		•		
NOTE: Building d	opt ca	me o	of to insp	ect pl	oor, bu	ilding de	ept		
forwarded	'the	iss or	to Fire	dept.	Fire mo	what t	Ď		
come out	toda	1011	tomorrow to	acce	ss and c	ite as	reded		
Person in Charge (Signature)	Charl	Ro	el			Date			
Inspector (Signature)	7,5	-	!		I	Date 7- (2	5-24		

	FOO	od Estal	<u>blishment inspe</u>	ection R	eport Page	of
LHD_M	anchester		Inspection Report Continuation Sh		Date 7 - (5	1-24
Establishm	nent Subwal	/	Town Manch	ester		
			TEMPERATURE OBSER	EVATIONS		
Item/	Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
	Violations cited in thi		SERVATIONS AND CORRE		NS n sections 8-405.11 & 8-406.11 of the	food code
Item Number	Violations died in thi	a report mast be	corrected within the time mariles be	low, or as stated i	11 36010113 0 403.11 Q 0 400.11 01 the	rood code.
Note	WICEC	old are	e table are	not hal	Ling food at	11F
	or below.	1211	cold prep fal	de must	the serviced to	rda (/
	Health Do	ept. Wi		at 3		cay.
	Cold Col	d Over	table are not	/ - !	1 1	41F
	ac helain	PICI	will be instructe	1 6	1 ' /	until
	Units are	1 ,	1 1	/ .	by health les	4
	Onno are	- 24 01	ced and semsp	CCICO	by health depi	
						317.45
Person in	Charge (Signature)	Ohano	2011		Data 7-19	5-74
Inspector					Date 7-19	5-74

Risk Category: 2 Food Establi	ishm	nen	t In	spect	tion	Rep	oort	Page 1 of	f <u>3</u>
Establishment type: Permanent Temporary Mobile Other					Da	te:	1/15/24		
Establishment Subway - Clater St.		*eedin'	Connec	tion Health	Tin	ne In_	12:00 AMIPM T	ime Out_) 🤈 (45 AM/RM
Address 288 Center St.		DI	P	H)	LH	Dγ	nanchester		
Town/City Manchester				Purpose of Inspection: Routine Pre-op					-op
Permit Holder Ry an Gwaz Cowski		of Pu	iblic He	25/Hec.	- 100	inspec			
FOODBORNE ILLNESS RISK FA Risk factors are important practices or procedures identified as the most prevalent contri								revent foodborne illnes	es or injuny
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered ite				complianc		•			D=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type		_						1.1	
IN OUT N/A N/O Supervision	V	cos			All Control of the	I/A N/O			V COS R
Person/Alternate Person in charge present,	-	005					Food separated and protect		RC 000
demonstrates knowledge and performs duties	Pf	0	0	60	76	50	Food-contact surfaces: clea		P(Pf)COO
Cartified Food Protection Manager for Classes 2	+						Proper disposition of returns		- Y
3, & 4	С	0	0	17 00	0		served, reconditioned, and	unsafe food	POO
Employee Health		Second 1				/	Time/Temperature Contro		S and Establish
Management, food employee and conditional employee;	P/Pf	0			0	20	Proper cooking time and ter	mperatures	P/Pf/C O O
knowledge, responsibilities and reporting	-						Proper reheating procedure		P 0 0
Proper use of restriction and exclusion	Р	0	0	20			Proper cooling time and ten		P 0 0
5 Written procedures for responding to vomiting and	Pf	0		4900			Proper hot holding temperat		POO
diarrheal events				\sim			Proper cold holding tempera		<u> </u>
Good Hygienic Practices 6 Proper eating, tasting, drinking, or tobacco products use	7 5/0	T_		23 🔾	0	كوك	Proper date marking and dis		P/Pf O O
				24 🔾	0	1 0	Time as a public health con	itroi: procedures	P/Pf/C
	С	0	9				and records		
Preventing Contamination by Hands 8	I D/D/			05 0		/	Consumer Adviso		T 2 T 2 T 2
	P/Pf	0	Θ	25 🔾	0	W .	Consumer advisory provided: raw		Pf O O
9 No bare hand contact with RTE food or a	P/Pf/C	0		00	_ T	1	Highly Susceptible Po	pulation	15/5/5/5/5
pre-approved alternative procedure properly followed Adequate handwashing sinks properly supplied/accessible	1500			26 🔾	0		Pasteurized foods used; prohibite		P/C 00
teritorial and terito	Pf/C	0	0	TOTAL T			od/Color Additives and Tox		1-1-1-
Approved Source				27 0	0	1	Food additives: approved a		POO
	P/Pf/C			28	0		Toxic substances properly in	dentified,	P/Pf/C O
12 O Food received at proper temperature 13 Food in good condition, safe, and unadulterated	-	0				100	stored & used		
	P/Pf	0	=		-		onformance with Approve		
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29	0		Compliance with variance/s		P/Pf/C O O
	n PE	TAIL	DD	ACTICE	-0	100000	process/ROP criteria/HACC	/F FIGIT	
Good Retail Practices are preventative measures to						chem	icals and physical phiects into	foods	
				for COS a			COS=corrected on-site during		R=repeat violation
OUT N/A N/O Safe Food and Water	V	cos		OUT			Proper Use of Utensil		V COS R
30 Pasteurized eggs used where required	Р	0	100		In-use	utens	ils: properly stored	15	c 00
	P/Pf/C		0				ment/linens: properly stored, d	dried & handled	Pf/C O O
32 O Variance obtained for specialized processing methods	Pf		0				ngle-service articles: properly st		P/C 0 0
Food Temperature Control	7						properly	torou a uscu	c 0 0
Droppy pooling mothods wood, adapting a view out for	7			-			Utensils and Equip	ment	
temperature control	Pf/C	0	0		Food	and no	n-food contact surfaces clea		
34 O Plant food properly cooked for hot holding	Pf	0		14/10			igned, constructed, and used		P/Pf/C O
35 O Approved thawing methods used		0		1			g facilities: installed, maintai		
36 C Thermometers provided and accurate		0					ents, sanitizers, and test strip		Pf/C O O
Food Identification	1 2 2 2						ntact surfaces clean	o a rangolo	000
Food properly labeled; original container	PVC)0	0	C/E		300 00	Physical Facilitie	AS	900
Prevention of Food Contamination				50 0 1	Hot a	nd cold	water available; adequate p		Pf 00
(38) Insects, rodents, and animals not present	(Pf/c	0					stalled; proper backflow devi		P/Pf/C O O
	P/PI/C						waste water properly dispos		P/P(C) 0
40 6 Personal cleanliness		0					es: properly constructed, sup		Pf/C O O
41 O Wiping cloths: properly used and stored	С	0					refuse properly disposed; facili		C_00
	P/Pf/C						lities installed, maintained, a		P/P(C)00
		-					ntilation and lighting; design		600
Permit Holder shall notify customers that a copy of the most recent inspection repo	rt is ava	allable	9.				er latex gloves not used per		
11/1/1/1/1/	1	. NO 6	1	Violatio	ns do	cume	nted Date co	orrections due	#
Person in Charge (Signature) (Aux (Date) -	15	1	4	Priority I				7.118/24	
C/ / 10 2/1				Priority F	Found	lation I	tem Violations	7/25/24	4
Person in Charge (Printed) (how 1001)				Core Ite					14
Inneresta (Girmatura) 111 121 - 7	15	_ ′	21				ealth Intervention Violations		4
Inspector (Signature) Date	1)	0	7	Repeat Risk Factor/Public Health Intervention Violations Good Retail Practices Violations					
Inspector (Printed) Jose Ramirez								34	15/
	ia			require	s Ke	inspec	tion - check box if you inter	na to reinspect	
Appeal: The owner or operator of a food establishment aggrieved by the	Direct	or of	Heal	th not le	ispec	an for	oration identified by the foo	on inspector or to	noid, destroy,

Food Establishment Inspection Report LHD Manchester Inspection Report Continuation Sheet Date - Centerist. Town Marchester Establishment TEMPERATURE OBSERVATIONS Item/Location/Process Item/Location/Process Item/Location/Process Temp Temp 101 F Front cold prep WIF 41 60 F hathroom 4 roast beef roasted chicken tomatoes 50 50 bba savce **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 throughout bottom throughout aranulars bags OWE equipmen inspect day or tomorrow Person in Charge (Signature) Date

Date

Inspector (Signature)

FC	od Esta	<u>blishment Inspe</u>	ection R	eport Page	of
LHD Manchester		Inspection Report Continuation Sh		Date 7 - (5	- 24
Establishment <u>50 hw</u>	x //	Town Manche	ester		
		TEMPERATURE OBSER	VATIONS		
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
					-
		1		=	
	OB	SERVATIONS AND CORRE	CTIVE ACTIO	NS	
Violations cited in				n sections 8-405.11 & 8-406.11 of the	food code.
Item Number	95				
Trainiber .					
Mala hille d	C - 1 -		- 1 1 1	1- (11	AIT
NOTE WIL &	cold pre	ep table are	not hol	ding tood at a	11t
ac helal	21212	cold prep fal	de must	- he serviced to	1011
	2. VV C &	5. 1 N 1 1	·/ ~ .	ringen in the second of the se	say.
Health	Dept. Wi	11 return today	at 3	30pm. IF WIC	
CAL Ca	11 oren	table are not	- maint	raine teel at	11E
and ca	110 PICP	1 1	1 1	1 -1 1 -	1-1
oc belo	W. PIC	will be instructe	d to V	oluntarily Close	until
whits a	ré servi	iced and reinsp	poto1	hu hoolth los	L
On a	LE JELV	iced and reinsp	CCICO	by realth dept	
		-			
Parantin Classical (Classical Classical Classi	00.0	nost.		- 7-10	S-714
Person in Charge (Signature	mar	voc y		Date 7 - (S	07
Inspector (Signature)	07			Date /-/	5-14

Risk Category: 2 Food Establ	lishn	nen	t Ir	ispe	ctio	n Rep	ort	Page 1 o	12	
Establishment type: Permanen Temporary Mobile Other					_ 0	ate:	7/5/24			
Establishment Subway - Deming		teen	ny Conne	ecticus Health	Т	ime ln_	12:30 AM/FM	Fime Out	00	AM/EM
Address 172 Deming St. Unit 13			D	H)	L	HD /	Manchester			
Town/City Manchester					P	urpose		itine Pre	-op	
Permit Holder Michael Jackson	C	onnecti of P	icut De ublic H	partment lealth	R	einspec	ction Other_			
FOODBORNE ILLNESS RISK FA	ACTO	RS	ΔΝΙ	n PIII	RLIC	ΗΕΔΙ	TH INTERVENTIONS			T 10
Risk factors are important practices or procedures identified as the most prevalent cont									es or injury	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered in		100	Are tree-1	complia	177-07-08	Table - The party of the Print				
P=Priority item Pf=Priority foundation item C=Core item V=violation type									=not obs	
			_		T				R=repeat	
IN OUT N/A N/O Supervision	٧	cos	R	-		N/A N/O	Protection from Co		V	COS R
Person/Alternate Person in charge present,	Pf	0	0		10		Food separated and protect		P/C	00
demonstrates knowledge and performs duties			-	16 🥥	10	NAME AND ADDRESS OF THE OWNER,	Food-contact surfaces: cle		P/Pf/C	00
2 Certified Food Protection Manager for Classes 2,	С	0		17 0	10	Salar	Proper disposition of return		Р	00
3, & 4					90 NA-90	A	served, reconditioned, and			
Employee Health		_				-/	Time/Temperature Contro	ol for Safety		
Management, food employee and conditional employee;	P/Pf	0	0	18 (0	30	Proper cooking time and to	emperatures	P/Pf/C	00
knowledge, responsibilities and reporting		1 22	1700	19 (0	0,0	Proper reheating procedure	es for hot holding	P	00
4 🌶 🔊 Proper use of restriction and exclusion	P	0	0	20 (0/0	0	Proper cooling time and ter	mperatures	P	00
5 Written procedures for responding to vomiting and	Pf	0	0	21 @	60	00	Proper hot holding tempera	atures	P	00
diarrheal events	1.4			22 3		00	Proper cold holding temper	ratures	Р	00
Good Hygienic Practices				23 🧿	10		Proper date marking and d		P/Pf	00
6 Ø Proper eating, tasting, drinking, or tobacco products us	se P/C	0	0	24 0			Time as a public health cor	ntrol: procedures	DIDGO	00
7 No discharge from eyes, nose, and mouth	С	0	0	24	1		and records		P/Pf/C	00
Preventing Contamination by Hands				-		/	Consumer Advis	ory	158	
8 Hands clean and properly washed	P/Pf	0	0	25 🤇		8	Consumer advisory provided: ra	w/undercooked food	Pf	00
9 No bare hand contact with RTE food or a	P/Pf/C					/	Highly Susceptible Po	pulation		
pre-approved alternative procedure properly followed	PIPIIC	0	0	26 🤇		0	Pasteurized foods used; prohibit	ed foods not offered	P/C	00
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	III A	3119		od/Color Additives and To			
Approved Source	The Fig.			27 (00		Food additives: approved a		P	00
11 Of Control of Source 500d obtained from approved source	P/Pf/C	0	0		/	ATTEND	Toxic substances properly	identified		
12 O Food received at proper temperature		0		28 🐼	80		stored & used	identified,	P/Pf/C	00
13 C Food in good condition, safe, and unadulterated		0	-				onformance with Approve	ad Procedures		
14 O Required records available: molluscan shellfish							Compliance with variance/s			-T $-$
identification, parasite destruction	P/Pf/C	0	0	29 🤇			process/ROP criteria/HAC		P/Pf/C	00
	OD RE	TAI	PR	RACTIO	CES	-		- B G 1 1 1 1 1 1 1 1 1		10000
Good Retail Practices are preventative measures t	to contro	I the	additi	ion of pa	athoge	ns, chemi	cals, and physical objects into	foods.		
	in appro						COS=corrected on-site durin		R=repeat	violation
OUT N/A N/O Safe Food and Water	V	cos		OU.			Proper Use of Utens			COS R
30 Pasteurized eggs used where required	Р	-	0			se utensi	ls: properly stored		C	00
31 Water and ice from approved source	P/Pf/C	0	0	44 (Ulter	sils/equin	ment/linens: properly stored,	dried & handled		00
32 O Variance obtained for specialized processing methods	Pf		0	45	Sing	le-use/sin	gle-service articles: properly	stored & used	P/C	
Food Temperature Control						es used		Stored & doca		00
Proper cooling methods used; adequate equipment for					0.0	00 0000	Utensils and Equip	mont		
temperature control	Pf/C	0	0		Foo	d and no	n-food contact surfaces cle			
34 O Plant food properly cooked for hot holding	Pf	0		47			gned, constructed, and use		P/Pf/C	00
35 O Approved thawing methods used	Pf/C				10/2		g facilities: installed, mainta		4	
36 Thermometers provided and accurate		0		48 C			nts, sanitizers, and test stri		Pf/C	00
Food Identification	11.110	19		10			ntact surfaces clean	ps available		
37 Food properly labeled; original container	DFIC	0		40) NOI	-1000 001			С	00
Prevention of Food Contamination	11/0			50	N Hot	and aald	Physical Faciliti water available; adequate		T 50	
38 Insects, rodents, and animals not present	Df/C	0							Pf	99
39 Contamination prevented during food preparation, storage & display	P/Pf/C						talled; proper backflow dev		P/Pf/C	
40 Personal cleanliness		0					waste water properly dispo es: properly constructed, su			00
41 Wiping cloths: properly used and stored	C	0		54	Cort	ogo ond	refuse properly disposed; faci	pplied, & clean	Pf/C	99
42 Washing fruits and vegetables	P/Pf/C			55	Dhy	cical facil	lities installed, maintained,	and alson	C	
		7.		56	Ado	guata va	ntilation and lighting; design	and clean	P/Pf/C	
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable							_ C	00
Natural rubber latex gloves not used per CGS §19a-36f Violations documented Date corrections due #										
Person in Charge (Signature) Mahal Joelan Date 7/5	12-	i				Violation		orrections due		17
	1	1					em Violations		-	
Person in Charge (Printed) Michael Jackson						iolations	FIGURIONS			2
1 1100-01101 -1-	-122	7 1					ealth Intervention Violations	3	-	-
Inspector (Signature) L. J. M. O. Date 1/5	120	14		Repea	at Risk	Factor/F	Public Health Intervention V	iolations		
Iniran Lrahall	,	-	\neg				s Violations	VIII		2
Inspector (Printed) LOUI CI CI CUITY				Regu	ires R	einspect	tion - check box if you inte	end to reinspect		
Appeal: The owner or operator of a food establishment aggrieved by the	his orde	er to	corr	ect any	/ inspe	ection via	plation identified by the for	od inspector or to	hold d	estrov
or dispose of unsafe food, may appeal such order to the	Directo	or of	Hea	Ith, not	later	than fort	y-eight hours after issuan	ce of such order.		coa cy,

	Foo	<u>d Esta</u>	<u>iblishment Inspe</u>	ction F	Report Page	of <u> </u>
LHD M	anchester		Inspection Report Continuation She		Date	124
Establishr	ment Subway	- Den	ing Town Manch	restr		
			TEMPERATURE OBSERV	ATIONS		
Item	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
(old)	oreo ham	40 F	hot hold marinara	156 F	handsink	117 F
	una salad	415	w/ Mcatball		quat scrittzer	
		32 F	vy rica roati			
	hicken	201			3-bay sanitiv	
	omatoes	39 F			customer bathroom	1095
UIC	egg	38 "				
WIC	Uchicken	30 F 37 F				
513	ced tomatoes	37 F				
WIF		75				
W.JJ			SERVATIONS AND CORREC	TIVE ACTIO	ONS	
Item Number	Violations cited in this				I in sections 8-405.11 & 8-406.11 of the	food code.
49c	floor in	WIF	not clean			
49c				i _ la	-5	
110	tan cover) 10	womens + mens	bath	NOM	
	(
	Putromai.	01000	n and organize and test strip	d		
	CX1141.414	- CHE CA	1 and organice	U	W W	
	thermome	eter ar	nd test stria	5 and	ai lable	
	great in	Loons	50011			
	7/2001 1/1	SPACE	VVII.			
	9	450				
ii		1 · · · · · ·	0		1 1	
Person in	Charge (Signature)	Michael	Jacken -		Date 7/5/2	224
Lizara -	(a: 1) of D	1 marge	N			201
inspector	(Signature) 🚶 、 💃	PUI UN	//		Date 7 15 1202	14

Ris	k C	ateg	ory:	Food Estab	lishn	nen	ıt İr	nsp	ect	ion Re	port	Pa	age 1 of	2
Est	tabl	ishm	ent ty	pe: Permanent Temporary Mobile Other						Date:	7/1	6/24		
Est	tabl	ishm	ent	Subway Kirpani		eech!	ng Courte	cticat Heal	Ġ.	Time In	A	M/PM Time Out		_AM/PM
Ad	dres	ss	113	I Tolland Tok Q			D	H		LHD	man	chester		
To	wn/	City	M						Purpose of Inspection: Routine Pre-op					
Pe	rmit	Hole	der		Co	onnecti of Pi	icut De ublic H	partmer ealth	nt	Reinspe	ction	Other		
				FOODBORNE ILLNESS RISK F.	ACTO	RS	AN	D PL	JBL	IC HEAL	TH INTERVE	ENTIONS		
		Risk f	factors a	re important practices or procedures identified as the most prevalent con-	tributing fa	ctors	of food	dborne	illness	or injury. Inte	rventions are contro	I measures to prevent foodb	ome illness	or injury.
4,1	Ma	rk des	signated	d compliance status (IN, OUT, N/A, N/O) for each numbered i	tem	- 1	N=in	compl	iance	OUT=n	ot in compliance	N/A=not applicable	N/O=	not observed
P	Pric	rity ite	em P	f=Priority foundation item	Mark in	appi	ropria	te box	for C	COS and/or	R COS=correc	ted on-site during inspe	ction R=	repeat violation
	IN	OUT	N/A N/C	Supervision	V	cos	R		IN C	UT N/A N/C	Protecti	on from Contaminati	ion	V COS R
1	0	0	0	Person/Alternate Person in charge present,	Pf	0		-	_	000	Food separated			P/C 0 0
Ŀ	_			demonstrates knowledge and performs duties				16	0	00		urfaces: cleaned & sa		P/Pf/C O O
2	0	0	0	Certified Food Protection Manager for Classes 2,	С	0	0	17	0		1 (5 A)	ion of returned, previo	2.7	POO
			800	3, & 4 Employee Health		L				The last		tioned, and unsafe for		
			SHIP TO SHIP	Management, food employee and conditional employee;	T -	т		18				ture Control for Safe time and temperature		P/Pf/C O O
3	0	0		knowledge, responsibilities and reporting	P/Pf	0	0	19				g procedures for hot h		POO
4	0	0		Proper use of restriction and exclusion	Р	0	0	100				time and temperatures		P 0 0
				Written procedures for responding to vomiting and				21				ing temperatures		POO
5	0	0		diarrheal events	Pf	0		22				ding temperatures		POO
				Good Hygienic Practices	MELA			23	0			rking and disposition		P/Pf O O
	0	0		Proper eating, tasting, drinking, or tobacco products us			0	24			Time as a publi	c health control: proce	edures	P/Pf/C
7	0	0		No discharge from eyes, nose, and mouth	C	0	0		\perp		and records			11110
	_			Preventing Contamination by Hands			-	-				umer Advisory		
8	0	0		Hands clean and properly washed	P/Pt	0	0	25	O[y provided: raw/undercook	ed food	Pf OO
9	0	0	00	No bare hand contact with RTE food or a	P/Pf/C	0	0	26				ceptible Population	-66	In/ololo
10	0	0		pre-approved alternative procedure properly followed Adequate handwashing sinks, properly supplied/accessible	Pf/C		0	26				used; prohibited foods not ves and Toxic Subst		P/C OO
10	$\stackrel{\smile}{-}$			Approved Source	FI/C	1		27				approved and proper		POO
11	0	0	THE REAL PROPERTY.	Food obtained from approved source	P/Pf/C	10	0			1000		es properly identified,	iy useu	
	ŏ		00	Food received at proper temperature		0		28			stored & used	es properly identified,		P/Pf/C
	0	0	2000000	Food in good condition, safe, and unadulterated	P/Pf	-	0					ith Approved Proced	ures	
1/	0	0	00	Required records available: molluscan shellfish	P/Pf/C	0	0	29				h variance/specialized		DIDEIO O
				identification, parasite destruction				=331			process/ROP c	riteria/HACCP Plan		P/Pf/C O
					OD RE									
				Good Retail Practices are preventative measures							2007/00/2012			
		_			in appro	-	-	_		id/or R		on-site during inspection	n R=	repeat violation
_		N/A N		Safe Food and Water	V	-	R	-	UT			e of Utensils		V COS R
	00			teurized eggs used where required ter and ice from approved source	P	-	0	_			sils: properly stor			C 0 0
	0		1 - 1 - 1	iance obtained for specialized processing methods	P/Pf/C Pf	-	00					perly stored, dried, & har es: properly stored & use		Pf/C O O
U.	_		Vai	Food Temperature Control	1 1	10				Bloves used		es, properly stored a us	eu	P/C O O
			Pro	per cooling methods used; adequate equipment for				10		00000 0000		and Equipment		1010
33	0		Marie Control	perature control	Pf/C	0	0		F	ood and no		surfaces cleanable,		
			⊃ Plai	nt food properly cooked for hot holding	Pf	0	0	47			signed, construct			P/F(IC)
		0	⊃ App	proved thawing methods used	Pf/C	0	0	48				illed, maintained and i	used;	DEIC C
36	0	THE	The	rmometers provided and accurate		0						and test strips availab	le	Pf/C
				Food Identification				49			ontact surfaces c	lean		000
37	0	Food	prope	rly labeled; original container	Pf/C	0	0					ical Facilities		
		1		Prevention of Food Contamination		1						; adequate pressure		Pf O O
				lents, and animals not present		0					stalled; proper b			P/Pf/C O O
	_			on prevented during food preparation, storage & display	P/Pf/C						d waste water pro			P/Pf/C O O
				eanliness hs: properly used and stored		0	-					structed, supplied, & c		Pf/C O O
				uits and vegetables	P/Pf/C		00					isposed; facilities mainta naintained, and clean		C O O
												nting; designated area		
F	erm	t Holo	der shall	notify customers that a copy of the most recent inspection rep	ort is ava	ailabl	e.			latural rubb	er latex gloves r	not used per CGS §19	a-36f	C O O
Pe	rsor	in C	harge	(Signature) Wall you Warnputs 7	1617	24		Prio	rity It	<mark>is docume</mark> em Violatio	ons	Date correction	s due	\$,
Pe	rsor	in C	harge	(Printed) Analysisa Krampitz						oundation n Violations	Item Violations			96
					1			Risk	Fac	tor/Public I	lealth Intervention			8
ins	pec	tor (S	Signatu	ire) DenisiTayne Date 7/	16/2	14						tervention Violations		
le-		6ar /=	Deimes -	Dears Poll							es Violations			2
			Printed		1.1.	- 76		Rec	uires	Reinspe	ction - check bo	x if you intend to rein	spect	
A	pea	u: 11	or or	per or operator of a food establishment aggrieved by to dispose of unsafe food, may appeal such order to the	nis ord	er to or of	Corr	ect a	ny in ot lat	spection v	rolation identifie	d by the food inspec	tor or to	hold, destroy,

Foo	<u>d Esta</u>	blishment Insp	<u>ection</u> F	Report Page 🚣	of				
LHD Manchester	(4)	Inspection Report Continuation	Sheet	Date 7/14	124				
Establishment Subway	Irpani	Town M 🗪	chester						
	STATE OF THE STATE	TEMPERATURE OBSE	ERVATIONS						
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp				
Tomato Slices	365	Guacamole	36F	Hot Wales	113F				
hicken	37F	Tomato	415	V					
Cheese	375			Quat in 3 bay	150PPM				
Bottler	35F			* MID					
Roast beef	39	Meatballs	153F						
Cheese	YOF	I Discarded en	Lol Lay						
Chicken	418								
	OB	SERVATIONS AND CORR	ECTIVE ACTION	ONS					
Violations cited in this				in sections 8-405.11 & 8-406.11 of the	food code.				
Item	report mast b	corrected within the time mariles	below, or as stated	11 3000013 0-400.11 d 0-400.11 of the	1000 0000.				
Number CFPM		,							
49c Under cours	tercool	er LIVIC gas	Kets und	lean					
470 Wet 2000	+1000	1 % SOL+ + AD =	one cont	71005 -> 0:544	made				
The well people	r lowe	in sultiper	per conj	dik / distant	a co				
Plastic	lif+i	nstead of pape	u towel	like on tomatoes					
wat	470 Wet paper towel in Salt + pepper container > discussed Plastic lift instead of paper towel like on tomatoes. water from condensate/ice is waste-water.								
the state of the s									
Managar	200 1/	any at for de	- 01100	on al finere 1	ila con				
i acrager r	ias vi	equest in deep	o was in	19 0 110015, 7	ite, coo				
baseland	wall	s - observat	ions con	ing of toors, toure detail					
X Notifie	Health	Dot when school		d. dpayne@manchester	Ct.90V				
Date Ma	rking	Observed -	Upen b	pag of garlic Sau	ce in				
1,200	in con	der without la	shel						
week.	<u> </u>	of willow to	we.						
Bottles /Sh	rakers	with labels	9						
	en C								
Street Ve	eryc	illo:							
	U	<u> </u>	,	A /					
Kitchen	and	Service line	Much	improved!					
) ()		cervice the	1-11-11						
		· · · · · · · · · · · · · · · · · · ·							
				-					
	ſ. o	. 0/		~ 1	121				
Person in Charge (Signature)	unoyas	ssa Knampity		Date 7/16	14				
Inspector (Signature)	rise T	aune		Date 7 ///	124				

Risk Category: 3 Food Estab	lishn	nent	Inspect	ion Report	Page 1 c	of 2			
Establishment type: Permanent Temporary Mobile Other			Date: 6/3/24						
Establishment Subway		treting to	enectical Health	1 1	AMIPN Time Out 3:	œ ,	AM (P)		
Address 199 Spencer St.		DP	H)	LHD Manches	ter				
Town/City Manchester				Purpose of Inspection	n: Routine Pre	e-op			
Permit Holder Acti Prabhavalkar	Co	onnecticut of Public	Department Health	Reinspection	Other				
FOODBORNE ILLNESS RISK F	ACTO	RS AI	ND PUBL	C HEALTH INTERV	ENTIONS	14/11	- x 12		
Risk factors are important practices or procedures identified as the most prevalent con- Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	tribuling fa item		odborne Illness n compliance			Victoria de la composição de la composiç			
P=Priority item Pf=Priority foundation item C=Core item V=violation type						O=not obs			
IN OUT N/A N/O Supervision	V	COS R			tion from Contamination	R=repeat v	COS R		
1 Person/Alternate Person in charge present,	Df		15 0	○ ○ Food separate	ed and protected		00		
demonstrates knowledge and performs duties	Pf	00	600	Food-contact:	surfaces: cleaned & sanitized	7			
② ← Certified Food Protection Manager for Classes 2, 3, & 4	(3)	0 %	17 0	Proper dispos	ition of returned, previously	Р	00		
Employee Health		/	4	served, recond	ditioned, and unsafe food				
Management food employee and conditional employees	T		18 0	Proper cookin	ature Control for Safety g time and temperatures	In/n/o	aT.		
knowledge, responsibilities and reporting	P/Pf	00	19 00	O O Proper cookin	ng procedures for hot holding	P/Pf/C	00		
4 Ø Proper use of restriction and exclusion	Р	00		Proper cooling	time and temperatures		00		
5 Written procedures for responding to vomiting and	Pf	00	21 3	Proper hot hol	ding temperatures	P	00		
diarrheal events			22 3/	Proper cold ho	olding temperatures		00		
Good Hygienic Practices 6 Proper eating, tasting, drinking, or tobacco products us	TRIO		23 🐼 🤇		arking and disposition	P/Pf	00		
7 No discharge from eyes, nose, and mouth	Se P/C	00			lic health control: procedures	P/Pf/C	00		
Preventing Contamination by Hands	10			and records	sumer Advisory				
8	P/Pf	00	25 0	Consumer advisor	ory provided: raw/undercooked food	Pf	00		
9 6 No bare hand contact with RTE food or a	P/Pf/C			/ Highly Su	sceptible Population				
pre-approved alternative procedure properly followed			26 0	Pasteurized foods	s used; prohibited foods not offered	P/C	OC		
Adequate handwashing sinks, properly supplied/accessible	Pf/C			Food/Color Addit	tives and Toxic Substances				
Approved Source 11 O O Ood obtained from approved source	Diprio		27 0 9		: approved and properly used	P	00		
12 Food received at proper temperature	P/Pt/C	00	28 🗷 🤇		ces properly identified,	P/Pf/C	00		
13 Food in good condition, safe, and unadulterated		00		stored & used	vith Approved Procedures				
Required records available: molluscan shellfish	Lancas and and an and	200000000000000000000000000000000000000		Compliance wi	ith variance/specialized	T			
identification, parasite destruction	P/Pf/C			process/ROP	criteria/HACCP Plan	P/Pf/C	00		
Good Potail Province on Association	OD RE	TAIL P	RACTICES			us One			
Good Retail Practices are preventative measures to Mark OUT if numbered item is not in compliance V=violation type Mark it	o control	the add	tion of pathog						
Mark OUT if numbered item is not in compliance V=violation type Mark i OUT N/A N/O Safe Food and Water	n approp	cos R	for COS and			R=repeat v			
30 Pasteurized eggs used where required	P	00	OUT In	use utensils: properly sto	se of Utensils		COS R		
31 Water and ice from approved source	0.100.000.000	00	(44) SD Ut	ensils/equipment/linens: pro	perly stored, dried, & handled		00		
32 O Variance obtained for specialized processing methods	Pf	00	45 O Si	ngle-use/single-service artic	les: properly stored & used		00		
Food Temperature Control			46 O G	loves used properly		C	00		
Proper cooling methods used; adequate equipment for temperature control	Pf/C	00		Utensil	s and Equipment	1 1 1 1 1 1			
34 O Plant food properly cooked for hot holding	Pf			ood and non-food contact		P/P(C)	00		
35 O Approved thawing methods used	Pf/C	00	V PI	operly designed, construct	alled, maintained and used;				
36 Thermometers provided and accurate	Pf/C		48 O Cle	eaning agents, sanitizers,	and test strips available	Pf/C	00		
Food Identification			(49) 00 No	on-food contact surfaces of	clean	(6-)	00		
37) Food properly labeled; original container	P(C)	00	0,1	Phys	sical Facilities		90		
Prevention of Food Contamination			50 O Ho	ot and cold water available	e; adequate pressure	Pf (00		
38 Insects, rodents, and animals not present 39 Contamination prevented during food preparation, storage & display		00	(51) (50) PI	umbing installed; proper b	ackflow devices	P/Pf(C)			
40 Personal cleanliness		90	52 O Se	wage and waste water pr	operly disposed	P/Pf/C	00		
41 Wiping cloths: properly used and stored		00	54 0 66	ollet facilities: properly con	structed, supplied, & clean	Pf/C			
	P/Pf/C		55 O Ph	nysical facilities installed, r	lisposed; facilities maintained	C	00		
Permit Holder shall notify customers that a copy of the most recent inspection repo				dequate ventilation and lig	hting; designated areas used	P/Pf/C			
y or the most recent inspection repo	ort is avai	lable.	○ Na	atural rubber latex gloves	not used per CGS §19a-36f				
Person in Charge (Signature) AA Problem Date / 1	0 10		Violations	documented	Date corrections due	#	#		
Date (3 1	24	Priority Ite	m Violations	(121-0	_	_		
Person in Charge (Printed)		-50	Core Item	undation Item Violations Violations	6 13 24	:	3		
1/2	10	7	Risk Facto	or/Public Health Intervention	on Violations	4	1		
Inspector (Signature) Date 6/3	120		Repeat Ris	sk Factor/Public Health In	tervention Violations	-			
Inspector (Printed) 50 SC Ramile?	L		Good Reta	Prince of the Indian		10			
Appeal: The owner or operator of a food establishment aggrieved by the	nie ordo	r to co-	requires	reinspection - check bo	x if you intend to reinspect				
or dispose of unsafe food, may appeal such order to the	Director	of He	alth, not late	r than forty-eight hours	ed by the tood inspector or to	nold, de	stroy,		

FOO	a Esta	idiish	ment insp	ection F	Report Page_	of <u>a</u>				
LHD Manchester			n Report Continuation S		Date 6/	3/24				
Establishment Subway	¥		Town Manch	ester		/				
		TEM	PERATURE OBSE	RVATIONS						
Item/Location/Process	Temp		n/Location/Process	Temp	Item/Location/Process	Temp				
WIC Steak	38F	Sandy	ich Prep		Fronthand Sink	86 F				
tuna	38F		tucky	37F	3 bay quat	40000m				
Ham	38F		Cheese	417	Bathroom Sink	90F1				
WIF ambient	-7F	Hot hol	d Meatbalss	160F		Ard				
under counter cooler		Meath	alls reheated to	185F						
Sliced chesse	37F									
Sandwich prop tomatoes	397									
tomatoes		050145	10110 1110 00000							
Violations cited in this	report must be	corrected	IONS AND CORRE	ECTIVE ACTIO	DNS in sections 8-405.11 & 8-406.11	of the ford and				
Item Number		001100104	main are arre rames by	clow, or as stated	III SECTIONS 0-405.11 & 0-400.11	or the rood code.				
16.	- 1	, ,								
990 interior of	FROM	band	Sink uncle	ean						
47c Caulk behin	1 360	y Sin	nt unclean	able						
49c Jumbled v	tensil:	5 70	wire rack	- by 3	bay					
1684 Clean vien:	1694 Clean utensils stored in unclean bin by shay stelf									
51 C Mop Sink fauce + leaking										
49C top of bread cabinet in W/C unclean										
age WIC Fan	Cover		Clean		# 					
	on siti			1						
49c interior of										
37c Unlabeled 3	reason	ng S	hakers thro	ughout						
490 Wall behind -	toaster	UNC	lean							
16PF Prep table	by 5	ball	unclean							
16PF Soda dispens	<u> </u>	bay,	back pref	parea c	<i>inclean</i>					
1017 Soda alspens	ing noz	zleu	nclean							
Note provided al	esaen	Poste								
Note test Strips	2 th	o.CIMMN	eter avoilabl	e						
Person in Charge (Signature)	AK Dowl	oher dir	/· •		Date 6	312A				
Inspector (Signature)	22	2.	8		Date 6	3/24				
< 7						4				

Risk Category:	2	Food Es	tabli	shm	ent li	nsp	ect	ion Re	port	Pag	e 1 of <u>Z</u>		
Establishment t	ype Pe	rmanent Temporary Mobile Other	er					Date:	6/17/24				
Establishment (wee	twater sould Bar			Asebing Conn	ecticus He	No.	Time In	12 A	N/PM) Time Out_		_AM/I	PM
		Kland Hills Dr. #20	78		D	H		LHD	manch	rester			
		chester						Purpos	e of Inspection:	Routine	Pre-op		
Permit Holder				Cor	nnecticut D of Public I	epartmo	ent	Reinspe	ection	Other			
S a fin later with the		FOODBORNE ILLNESS RI	SK FA	СТО	RS AN	D P	UBL	IC HEA	LTH INTERVE	ENTIONS			
Risk factors	are importa	ant practices or procedures identified as the most preva	lent contril	buting fac	tors of foo	dborne	illness			I measures to prevent foodborr			
SAME SAME SAME SAME SAME SAME SAME SAME	ACCURATION AND ADDRESS OF THE PARTY OF THE P	ance status (IN, OUT, N/A, N/O) for each num			-	comp	-		not in compliance	N/A=not applicable	N/O=not	No contract	_
		y foundation item C=Core item V=violation	n type			ate bo				ted on-site during inspecti		eat viola	_
IN OUT N/A N		Supervision	718,17		COS R	0		OUT N/A N/	> Food separated	on from Contamination		cos	1
1)0000		n/Alternate Person in charge present,		(Pf)	00	(16)				urfaces: cleaned & sanit		-	
		nstrates knowledge and performs duties ed Food Protection Manager for Classes 2)			1	1	M C		ion of returned, previous			
	3, & 4	있는데 14 를 가장 없었다. 이 1년 1일 강점에 12 점에 보고 있다. 그 12 를 다 보고 있는 것이 없는데 보고 있는데 그리고 있다. 그리고 있다. 그리고 있는데 그리고 있는데 그리고 있다.		(c)	00	17	Ø			itioned, and unsafe food		PO	0
/	0, 0,	Employee Health								ture Control for Safety			
200	Manag	gement, food employee and conditional employ	yee;	P/Pf	00	18	0			time and temperatures		/C ()	
3 8 0	knowl	edge, responsibilities and reporting			3 3	19	0			g procedures for hot ho	lding	PO	
4 0 9	-19	er use of restriction and exclusion		Р	00	20	0			time and temperatures			
5 0	2003	en procedures for responding to vomiting a	nd	Pf	00	21	9			ling temperatures		PO	-
	diarrh	eal events				22	-			ding temperatures	D/f	P O	
600	- Drane	Good Hygienic Practices er eating, tasting, drinking, or tobacco prod	uote uec	P/C	00	23		/		arking and disposition ic health control: proced	luros	_	\vdash
		scharge from eyes, nose, and mouth	ucis use	C	00	24	0	0	and records	o nearth control, proced	P/Pf	CO	0
7		Preventing Contamination by Hands			LOTO		4	/		umer Advisory			300
800		s clean and properly washed		P/Pf	00	25	0	00		y provided: raw/undercooked	d food F	of O	0
		are hand contact with RTE food or a						/	UNIX.	ceptible Population	NET LES		
9 8 9 0	pre-a	pproved alternative procedure properly follow	owed	P/Pf/C	00	26	0		Pasteurized foods	used; prohibited foods not of	ffered P	CO	0
10 00	Adequ	uate handwashing sinks, properly supplied/acc	essible	Pf/C	00	-				ives and Toxic Substan			
/		Approved Source				-		00		approved and properly	used	PO	0
11 0		obtained from approved source		P/Pf/C		- 1 (28		XD 0	and the second of the first own and the	es properly identified,	(P/P	f/C O	0
		received at proper temperature		P/Pf P/Pf				. 100	stored & used	ith Approved Procedu			-
	7	in good condition, safe, and unadulterated ired records available: molluscan shellfish								th variance/specialized			T
14 0 0		fication, parasite destruction		P/Pf/C		29	0			riteria/HACCP Plan	P/P	f/C O	0
			GOO	DD RE	TAIL P	RAC	TICE	ES				HILL	10.00
		Good Retail Practices are preventative me								The second secon			
Mark OUT if nu	mbered it	tem is not in compliance V=violation type	Mark in		oriate bo	_		and/or R		on-site during inspection	-	eat viola	_
OUT N/A N/O		Safe Food and Water		V	COS R		OUT			se of Utensils			R
THE PERSON NAMED IN		d eggs used where required		P	00				nsils: properly sto		0		00
The second name of the second na		ice from approved source btained for specialized processing method	de.	P/Pf/C Pf	00					perly stored, dried, & hand les: properly stored & used		27	0
32 U U	anance c	Food Temperature Control	15		1919	46	0	Gloves us	ed properly	ies. properly stored a disci	٠, ١,		0
P	roper coo	oling methods used; adequate equipment f	or	1						s and Equipment	57.15.046		
		re control		Pf/C	00		0	Food and		surfaces cleanable,	P/P		0
34 0 0 0 P	lant food	properly cooked for hot holding		Pf	00	47	0.007		esigned, construc				
35 O O O A	pproved	thawing methods used			00					alled, maintained and us		co	
36 O T	hermome	eters provided and accurate		Pf/C	00					and test strips available	9		
07		Food Identification		-6	_ _	49	0	Non-food	contact surfaces			0	10
37 C Food pro	perly labe	eled; original container		PVC	DIC	-		11-4		sical Facilities		25 0	
CON CO Inconto e	adaata d	Prevention of Food Contamination		Gen	100				installed; proper b	e; adequate pressure		of O	0
		and animals not present ented during food preparation, storage & displ	av		00				nd waste water pr		P/P	00	0
40 O Personal	and the same of th		<u></u>		00					structed, supplied, & cl		IC O	
		perly used and stored		С	00					disposed; facilities maintai	ined	C,O	0
42 O Washing				P/Pf/C	00					maintained, and clean	P/R		0
Permit Holder sh	all notify	customers that a copy of the most recent inspec	ction repo	ort is av	ailable.	56				hting; designated areas		c O	
		11 1	Colla Macollin I College			Vi		ons docum		not used per CGS §19a		#	
Person in Charg	ne (Sign	ature Date	6.2	1 -	24			Item Viola		Date corrections	due	7	
. sison in onarg	o (Oigile	Date of the state	1	9					n Item Violations	6/21/24		5	
Person in Charg	ge (Print	ed)/ grando to los	m	V				em Violatio		9117124		6	
	_	1 The months	1.11	1/7	1				Health Intervent			7	
Inspector (Signa	ature) 💢	Date Date	QIL	46						ntervention Violations		-1	
Inspector (Print	ad) 1 /4	uron Grandii	*						tices Violations	ox if you intend to reins	spect	6	-
Anneal: The or	Wher or	operator of a food establishment aggriev	red by t	his ord	er to co							d. dest	trov
		se of unsafe food, may appeal such order										., 0001	Jy,

reinspection 6/20/24

	FOOD ESTA	ibiisnment inspe	ction i	Keport	Page of
LHD Manche	ster	Inspection Report Continuation She	et		te 6/17/24
Establishment SM ? ?	twater	Town Manch	ester		
		TEMPERATURE OBSERV	ATIONS		
Item/Location/Prod		Item/Location/Process	Temp	Item/Location	n/Process Temp
tomatoes	Alt	2 door Fridge	3 6F	Inot water-	-HS 123F
cheese	418	chicken lighted	39F		
rangerd pron	PK AIF	pingannie.	40F	quat sani	HILLY 2011 DO
TOWN CO. P CPP	V13 11	Pricappo		100.130	
cooked chicke	n gif				
Milian a dance	15				
Atusa 2000v	0F				
Violations		SSERVATIONS AND CORRECT to corrected within the time frames below			9 9 106 11 of the food code
item	and the second s			A Li A A	x 6-406.11 of the 1000 code.
Number CFPM:	DOLOGIA NOT P	resent attime of	inspe	CTUN.	
37c oil/clt	ariquidi	nsqueeze bottle	s not	labeled or	shelving
28P uniab	eled Chemic	cal squeeze bottl	e und	er hands i	nk-(cos)
45 C TO 90 CO	ntainer cup	s used as scoop	in oat	containen	
16PF interio	ir of microi	vave not crean		.,	
isc Frozen	Fruitin 20	loor Fieteer not	protec	tcd/cover	ed 1
20 P COOKING	al cooling of	saimon discusse	dwitt	n person	incharge
* 4 Class	Z-Nofabi	proved for cooling	a	1	J
* + sain	nontobe rei	moved/discarded	d		
44 PF dryna	of earipm	entlytensils wit	hhan	d towel	
SZC STAUNO	nt water	n bucket hy ma	p sink	•	
SEC NO COV	ebase indi	y storage / Falli	na off	wall	
38PF Fruit F	lies preser	It in back of hous	_ لع		
F/2c no CF	PM on site	during inspect	ion/pic	Knowledg	able
* Thawir	19 of shrin	npat room temp			ronin
Chara	e in discus	sion - did not vis	iblyse	e discuss	sed thawing
under	running co	old water in sink	<i>î</i>)
23 DF no date	marking of	F Food product in			-315 days
	rips avaitabs			, ,	discussed
* CFPM	required to	be on site during	opera	ting nous	
		J		J	
FOLLOW	w/ Manager	nent pest control	/cove	base	
862-6	84-6143-	regandos.	7	** ***	
Person in Charge (Sign	nature Don	& Sell ont		D	Date 6 . 17, 24
Inspector (Signature)	t. Gandy				Date 6 17 174

Risk Category: 2 Food Establ	liehn	nant	Inc	enac	tio	Pon	ori	Page 1 c	. T		
Establishment type: Permanent Temporary Mobile Other	131111	IIGIIE	1112	spec	-1101	ricep			1	<u>-</u>	
	Γ		conservic		- Da	ite:	118/24	_			
Establishment IGCO B-EU		ASSESTING.	Columetric	M Health	Ti	me In	12:00	MM/em Time Out 12	45	_AM	PM)
Address 194 Buggland Hills dr 2074		DF	2	4)	LH	ID (nanche	estec			
Town/city Manchester					Pι	rpose c	of Inspection	: Routine Pre	e-op		
Permit Holder DW C	G	onnecticu of Publ	t Depar	rtment lth	Re	einspect	tion	Other			
FOODBORNE ILLNESS RISK FA									I was a way		217
Risk factors are important practices or procedures identified as the most prevalent control. Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it			1 - 3 4 4								
P=Priority item Pf=Priority foundation item C=Core item V=violation type				mpliano			in compliance		D=not ob	-	-
IN QUT N/A N/O Supervision	V		R			N/A N/O		on from Contamination	R=repea	cos	-
Person/Alternate Person in charge present	-							and protected	P/C		0
demonstrates knowledge and performs duties	Pf	0	7/7	16 🕏	9			urfaces: cleaned & sanitized	P/Pf/C	_	_
2 Certified Food Protection Manager for Classes 2,	С	0		17 🐼	6	F	Proper disposit	ion of returned, previously	P	150	
3, & 4								tioned, and unsafe food	-		\square
Employee Health Management, food employee and conditional employee;	7			18			rime/Tempera	ture Control for Safety time and temperatures	Dipos		_
knowledge, responsibilities and reporting	P/Pf	0	21 F	19 0	0		Proper cooking	ig procedures for hot holding	P/Pf/C	00	0
4 Proper use of restriction and exclusion	Р	0			O		Proper cooling	time and temperatures		0	
5 Written procedures for responding to vomiting and	Pf	0	3 2	21 0	0	001	Proper hot hold	ing temperatures		0	
diarrheal events			2	22 0	Ø	0 O F	Proper cold hol	ding temperatures	P	0	
Good Hygienic Practices 6 Proper eating, tasting, drinking, or tobacco products use	o Inio	121		23 🐼	0	001	roper date ma	rking and disposition	P/Pf	0	0
7 No discharge from eyes, nose, and mouth	e P/C	00		24 🔘	0		ime as a publi and records	c health control: procedures	P/Pf/C	0	0
Preventing Contamination by Hands						/	ACCOUNT OF THE PARTY OF THE PAR	umer Advisory			_
8 9 Hands clean and properly washed	P/Pf	0	5 2	25 0	0	0		y provided: raw/undercooked food	Pf	101	0
9 No bare hand contact with RTE food or a	P/Pf/C	0				/	Highly Sus	ceptible Population	-0		
pre-approved alternative procedure properly followed		1 1 1 1 1 1 1	_ 4	26 0	0			used; prohibited foods not offered	P/C	0	0
recorded flandwashing sinks, properly supplied/accessible	Pf/C	0		27/0/				ves and Toxic Substances			
Approved Source 11 Food obtained from approved source	DIDFIC	1010	-1 F		9	2	ood additives:	approved and properly used	P	0	0
12 C Food received at proper temperature	P/Pf			28 🐼	0		tored & used	es properly identified,	P/Pf/C	0	0
13 Ø O Food in good condition, safe, and unadulterated	P/Pf				in e			th Approved Procedures	100	-	-
Required records available: molluscan shellfish	P/Pf/C	0	2	29	0		Compliance wit	h variance/specialized	DIDGG		
identification, parasite destruction			- 11			p	rocess/ROP c	riteria/HACCP Plan	P/Pf/C	, 0	0
Good Retail Practices are preventative measures to	OD RE	I AIL	PKA	C IICE	ES		-1	I although the form			
	n approp								B======	t viole	tion.
OUT N/A N/O Safe Food and Water	V	cos		OUT	arid/Or	, ,		e of Utensils	R=repea v	cos	_
30 Pasteurized eggs used where required	Р	0			In-us	e utensils	s: properly stor	ed	C	0	
31 Water and ice from approved source	P/Pf/C	0	$\supset 4$	14 0	Utens	ils/equipm	nent/linens: prop	perly stored, dried, & handled		0	-
32 O Variance obtained for specialized processing methods	Pf	0						es: properly stored & used	P/C		
Food Temperature Control Proper cooling methods used; adequate equipment for		7-7-	4	46 0	Glove	es used p			С	0	0
temperature control	Pf/C	0			Food	and non		and Equipment surfaces cleanable,			èn.
34 O Plant food properly cooked for hot holding	Pf	0	516				ned, construct		PPC	0	0
35 O O Approved thawing methods used								lled, maintained and used:	_		
36 C Thermometers provided and accurate	Pf/C	00	5 6	18 1				and test strips available	Pf/C	0	0
Food Identification			(4	19)	Non-1	ood cont	tact surfaces c		0		0
37 Food properly labeled; original container Prevention of Food Contamination	Pf/C	0		,			Phys	ical Facilities	\sim	U.J.	
38 Insects, rodents, and animals not present	DEIC	00	- 5	000	Hot a	nd cold v	water available	; adequate pressure		0	
39 Contamination prevented during food preparation, storage & display		0		52 0	Sewa	one and w	vaste water pro	ackflow devices operly disposed	P/Pf/C P/Pf/C	9	
40 O Personal cleanliness		0	5 5	53 🔘	Toilet	facilities	: properly cons	structed, supplied, & clean	Pf/C		
41 Wiping cloths: properly used and stored	С	00		40	Garba	ge and re	efuse properly di	sposed; facilities maintained	С	0	
42 Washing fruits and vegetables	P/Pf/C	0	≥ (5	3	Physi	cal facilit	ties installed, n	naintained, and clean	P/PCC)	0
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable.	5	06 0	Adeq	uate vent	tilation and ligh	nting; designated areas used	C	0	0
hillin a 4.	041		V	/iolatio	ons de	ai rubber ocument	ed gloves n	ot used per CGS §19a-36f Date corrections due		#	
Person in Charge (Signature) WOITY) DWC Date 11	219	4				/iolations		Date corrections due	_	#	777-1
24 5 + 11 2 11/7			P	riority l	Found	dation Ite	m Violations	7/18/24		i	\neg
Person in Charge (Printed)	1		0	ore Ite	em Vic	lations		10/8/24		4	
Inspector (Signature) J. H. Date 718	124		R	Repeat	Riek	ublic Hea	alth Intervention	n Violations ervention Violations	-	_	
101110 N 6 MOIONI	16-1						Violations	STACHINOLI AIDIGHOUS	-	5	-
Inspector (Printed) LOWY [] TYOWY []			IR	Require	es Re	inspectio	on - check hor	x if you intend to reinspect			-
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to co	orrec	t any ir	nsne	ction viol	ation identifie	d by the food inspector or to	hold, o	destro	oy,
or dispose of unsafe food, may appeal such order to the	Directo	or of H	ealth	, not la	ater th	nan forty	eight hours a	fter issuance of such order			

Food Estab	olishment Inspection	Report Page 2	_ of _ 2
LHD Manchester	Inspection Report Continuation Sheet	Date	3/24
Establishment Taco Bell - Mall	Town Manchester		
	TEMPERATURE OBSERVATIONS		
Item/Location/Process Temp	Item/Location/Process Temp		Temp
WIC DICO de agllo 40 F	hot hold rice 176	Flandsink	106 €
1 shredded theese 41F	1 chicken 173	augt sonitizer	200 ppm
cooked chicken 41F	ground beef 165	F	
reach in freezer -35	J		
cold prep tomatoes 41			
1 1			
Violations cited in this report must be	SERVATIONS AND CORRECTIVE AC corrected within the time frames below, or as sta		he food code
Item Number	obtroded within the time frames below, or as sta	11 36610113 0-400. 11 d 0-400. 11 01 ti	ne 1000 code.
Sulveybook genowers			
SSC cove base by mo	psink damaged		
55C FRP wall by 1	psink damaged, du	ct tape used as	reagic
495 agricet on WIC	port de la companya d	9) 11/0 (300 300	190011
49°C gaslet on WIC	not clean	POUR POUR POUR POUR POUR POUR POUR POUR	
47PF cold prep unit on	cookline not hold paired for TCS food	ing temp. Not t	0 20
used until re	paired for TIS food	2.	
49c Ceiling not clean	7		
49c Ceiling not clean			
note discussed sanitiz	er frequencu		
note Food thermome	A		
	J · U · I		
note overall clean + org	anized		
note Discussed using	ice in larger contain	ners to Keep TCS	roads
Character of Class	a la	113 10 1000 103	1-45
LIMOTHES, Cheese	e, pico degallo) co	ia in cold bush a	いかナ.
note back sink by 3	b- bay not functioning	ig. Part to be de	elivered
today 6/8/24	,	U	
	t ance wait is man	red 1 am-d. a	
enal health de	Dove unitis repair	red Lgrandy@1 Date \$18	ngo cheste
Person in Charge (Signature)	J.C.		
Inspector (Signature) L. HMM OV		Date 7/8/	124

	5 Food Esta			100	100	-	120	24			
Establishment typ	e: Permanent Temporary Mobile Other				Date:	5	120	100	Time Out		AM/
Eastablishment	O Vi Pov		1	1	Time	In		AM/PM	Time out		
CSTADUSTINIENT	eniyaki Box 3 W Main St Janchester	F	P	H)	LHD	n	an	che	3	Pre-0	P
Address &	3611 100.31			1	Purp	ose of	Inspecti	on:	Routine	7,6-0	
Town/City	Janonesto	Com	of Public 14	partment entris	Rein	spection	on	Othe			
Permit Holder	FOODBORNE ILLNESS RISK			1	LIC HE	ALTH	INTER	EVENTIO	NS	unio Bress	e injury
Tiel fester	the most provident or providing a familiar as the most provident	COUNTRICATED STREET	SHA AN INCOM	-		The second second	The second second	- NI/A	annt applicable	N/O=	not observe
Mark designated	d compliance status (IN, OUT, N/A, N/O) for each number the Procity foundation item. CeCore item. Veviolation by	ed item	INFIN	to hov fo	r COS an	d/or R	cos=cr	rrected on s	ite during inspe	ction R	repeat viole
P-Priority Item P	Provity foundation item G=Core item V=violation ty	pe Mark in a	cos R	IN	OUT NIA	N/O	Prot	ection from	n Contaminat	tion	y cos
IN OUT NIA NI	Supervision	The same of		15		Fe	nod cenar	ated and pr	olected	K	3/2
TALL S	Person/Alternate Person in charge present.	pf	CD (CB)	16	0	Fo	ood-conta	ct surfaces	cleaned & sa	initizeo L	7-1
	demonstrates knowledge and performs duties Certified Food Protection Manager for Classes 2.	C	30	17	0	Pr	roper disp	osition of re	eturned, previo	od	PO
2000	3, 8,4			LL		1 SF	erved, rec	onallionea.	and unsafe for ontrol for Safe	ety	
	Employee Health			Tag To	ra ra	III	me/ remp	cing time a	nd temperatur	es	P/Pf/C
	Management, food employee and conditional employee,	P/Pf	00	18	96	P	roper rebe	ating proce	edures for not	holding	PC
3 C C	knowledge responsibilities and reporting	P		20	56	P	roper coo	ling time ar	d temperature	es	PC
400	Proper use of restriction and exclusion				00	P	roper hot	holding terr	peratures	4.11	PC
100	Written procedures for responding to vomiting and	Pf	00	22	0	TOP	roper cold	holding te	mperatures		(P)
	diarrheal events Good Hygienic Practices		-	23 (P	roper date	marking a	nd disposition		PIP C
Charles Billion	Proper eating tasting drinking or tobacco products	suse P/C	00	24 0	Suffer Co.	TI	me as a p	public healt	h control proc	cedures	PIPEC C
* 5 5 5	No discharge from eyes, nose, and mouth	С	00	24		a	nd record				
	Preventing Contamination by Hands	6						onsumer A			
8 0 0 MO	Hands clean and properly washed	PP	00	25 🤇	00	C			ed: raw/undercor		Pf
. 0000	No bare hand contact with RTE food or a	, P/Pf/C	00		1				le Population		2010
	pre-approved alternative procedure properly follows	20		26 (00	Section 1981			onibited foods n		PIC C
10 0	Adequate handwashing sinks, properly supplied/accessit	ble ((Pf/C	00	-	1 1				d Toxic Subs		- 0 /
	Approved Source			27 C	00	parties of the			ved and prope		PIC
	Four obtained from approved source	P/Pf/C		28 🔾	00	2 2000000			perly identified		PIPIC C
	Food received at proper temperature						tored & us		proved Proce	durae	
	Food in good condition, safe, and unadulterated Required records available, molluscan shellfish	PIPI	-	-					ince/specializ		
	identification, parasite destruction	P/Pf/C	00	29 🤇	00				HACCP Plan		P/Pf/C
Section Section		GOOD RET	AIL PF	ACTIC	ES						
	Good Retail Practices are preventative measure	es to control t	the addit	ion of pa	thogens,	chemica	als, and ph	ysical objec	ts into foods.		
Mark OUT if number							200	cted on-site	March Commission Commission		
	ared item is not in compliance V=violation type Ma	ark in appropr	iate box			C	.US=corre	cico on one	during inspect	ion I	R=repeat v
OUT N/A N/O	Safe Food and Water	The second second second	cos R		and/or R			er Use of L		tion I	R=repeat v
OUT N/A N/O Paste	Safe Food and Water unized eggs used where required	V (for COS	and/or R	utensils	Property property	er Use of U	Itensils		
OUT N/A N/O Paste Water	Safe Food and Water urized eggs used where required and ice from approved source	P	cos R	out 43 C	In-use i	utensils /equipm	Properly ent/linens	er Use of U stored properly st	Itensils ored, dried, &	handled	V C
OUT N/A N/O Paste Water	Safe Food and Water urized eggs used where required and ice from approved source and obtained for specialized processing methods	P/Pf/C	cos R	43 C 44 & 45 C	In-use of Utensils	utensils /equipn ise/sing	Proposition properly nent/linens	er Use of U stored properly st		handled	V C
OUT N/A N/O Paste Water Varian	Safe Food and Water urized eggs used where required and ice from approved source to obtained for specialized processing methods Food Temperature Control	P/Pf/C	COS R	43 C 44 & 45 C	In-use i	utensils /equipn ise/sing	Proposition properly nent/linens	er Use of U stored properly st	Itensils ored, dried, &	handled	V C
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	od Establishment Ins		Pageof
LHD Manchester			Date O 10-1-1
Establishment Terriyo			
Item/Location/Process	TEMPERATURE OBS		m/Location/Process Temp
Shrimp	37F Creamcheese		
Pork	40F	Chi	orine 50-100pp
Chicken	37F		
Chicken	38F Beef Stew	168F	
Rice Noodle	38F Misosoup	1685	
Nood les	40 F Mushromstap	156F	
avocado	Fie		
	OBSERVATIONS AND COF		2 ACE AA 2 B ANS 11 of the food code
nem	his report must be corrected within the time frame	s below, or as stated in sections	8-405.11 & 8-406.11 of the food code.
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	unt spice in oil at		iscarded.
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			camin out it is
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on in Charge (Signature)	100		
son in Charge (Signature) ector (Signature)	Paune		Date 5 2025

	Food	I Estab	olishment Insp	ection R	eport			\neg
Manche	A STATE OF THE PARTY OF THE PAR				Date	5/2	013-4	
ablishment	inval	; Do	X Town Mand	nestor				
			TEMPERATURE OBSE	RVATIONS			Temp	
Item/Location/Pr	rocess	Temp	Item/Location/Process	Temp	Item/Location	Process	Temp	
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								-
		000	SERVATIONS AND CORP.	ECTIVE ACTIO	NS			1000
Violatio	ons cited in this i	report must be	corrected within the time frames b	elow, or as stated i	n sections 8-405.11 &	8-406,11 of the	food code	
Number								
mor Hom	Motos	not u	Daving at Wo	utress:	station.			
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on in Charge (Sig	gnature)	ZW.			+ how	2	Pol	2

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Risk Category: 3 Food Establi	ishn	nen	t Ir	spec	tion F	Report	Page 1 o	of			
Establishment type: Permanent Temporary Mobile Other					Date:	7/17/24					
Establishment Teriyaki Madness	_	45ecin	Conne	cticut Health	Time	In 10:30 (N/PM Time Out	AM/PM			
Address 172 Deming St unit D			P	H)	LHD	111111	hester				
Town/City Manches Per			-		Purp	ose of Inspection		e-op			
Permit Holder Ken S.		of Pu	blic H	To the state of th		spection	Other 30 olay				
FOODBORNE ILLNESS RISK FA	CTO	RS.	ANI	D PUB	LIC HE	ALTH INTERVI	ENTIONS				
Risk factors are important practices or procedures identified as the most prevalent contri- Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it		- T- A					SWAN SWAN SWAN SWAN SWAN SWAN SWAN SWAN				
P=Priority item Pf=Priority foundation item C=Core item V=violation type				compliand		T=not in compliance		0=not observed			
IN OUT N/A N/O Supervision	V	cos						R=repeat violation			
	-	003	-	15 O	OUT N/A	Food separated	ion from Contamination	V COS R			
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0	16	0,0		urfaces: cleaned & sanitized	P/C X O			
Cartified Food Protection Manager for Classes 2	-						ion of returned, previously				
2 Sertified 1 odd Protection Wariager for Classes 2, 3, & 4	С	0	0	17	0		itioned, and unsafe food	POO			
Employee Health					/		ture Control for Safety				
Management, food employee and conditional employee;	P/Pf	0	0	18	00	Proper cooking	time and temperatures	P/Pf/C O O			
knowledge, responsibilities and reporting Proper use of restriction and exclusion		-	-	19 0	00	Proper reheating	ng procedures for hot holding				
Written procedures for responding to comiting and	Р	0	0	20 0	00	Proper cooling	time and temperatures	P 0 0			
diarrheal events	Pf	0	0	21	20	O Proper hot hold	ling temperatures	POO			
Good Hygienic Practices				22 🗭		O Proper cold hol		POO			
6 Proper eating, tasting, drinking, or tobacco products use	P/C	0		23	00		arking and disposition	P/Pf O O			
7 No discharge from eyes, nose, and mouth	C	-	허	24 🔾	0	and records	ic health control: procedures	P/Pf/C O O			
Preventing Contamination by Hands	10		$\stackrel{\smile}{-}$				umer Advisory				
8 O Hands clean and properly washed	P/Pf	0	0	25	010		y provided: raw/undercooked food	Pf OO			
No hare hand contact with RTE food or a	NAME OF TAXABLE PARTY.						ceptible Population	11100			
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26	00		used; prohibited foods not offered	P/C 00			
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0		/		ves and Toxic Substances	1.10 0 0			
Approved Source				27	00		approved and properly used	POO			
	P/Pf/C	0	0	28	00		es properly identified,				
12 O Food received at proper temperature	P/Pf	0	0	28	00	stored & used		P/Pf/C O			
13 C Food in good condition, safe, and unadulterated	P/Pf	0	0				ith Approved Procedures				
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29 🔾	00	Compliance wit	h variance/specialized	P/Pf/C O O			
	אם סכ	TAIL	DD	ACTICE		process/ROP c	riteria/HACCP Plan	1111000			
Good Retail Practices are preventative measures to	contro	I the s	. PR	on of noth	eogone o	homicals, and physics	I objects into feeds				
Mark OUT if numbered item is not in compliance V=violation type Mark in	approi	oriate	box	for COS a	and/or P			Description of the last of			
OUT N/A N/O Safe Food and Water	V	cos		OUT	ilid/of R			R=repeat violation			
30 Pasteurized eggs used where required	P	0			In-use ut	tensils: properly stor	se of Utensils	V COS R			
	P/Pf/C	_	5	44	I Itensils/e	equinment/linens: pror	perly stored, dried, & handled	C O O			
32 O Variance obtained for specialized processing methods	Pf	-	0	45	Single-us	e/single-service article	es: properly stored & used	P/C O O			
Food Temperature Control				46 🔘	Gloves u	sed properly	eer proporty exerced as about	c 00			
Proper cooling methods used; adequate equipment for	DEIC					Utensile	and Equipment				
temperature control	Pf/C	0	9	47 %	Food and	d non-food contact s	surfaces cleanable,				
34 O Plant food properly cooked for hot holding	Pf		0		properly	designed, construct	ed, and used	P/PCOO			
35 O Approved thawing methods used	Pf/C	0	0				illed, maintained and used;	DEIC O			
36 C Thermometers provided and accurate	Pf/C	0	0	0	cleaning	agents, sanitizers,	and test strips available	Pf/C O O			
Food Identification				49 00	Non-food	d contact surfaces c		(c)00			
37 Food properly labeled; original container	Pf/C	0	0			Phys	ical Facilities				
Prevention of Food Contamination 38 Insects, rodents, and animals not present	700			50 🔾	Hot and	cold water available	; adequate pressure	Pf O O			
	Pf/C					g installed; proper b		P/Pf/C O			
40 Personal cleanliness	P/Pf/C			52	Sewage	and waste water pro	operly disposed	P/Pf/C O O			
41 Wiping cloths: properly used and stored	Pf/C	00		54	Garbage	and refuse preparts of	structed, supplied, & clean isposed; facilities maintained	Pf/C 0 0			
	P/Pf/C			55 0	Physical	facilities installed a	naintained, and clean	C 0 0			
				56	Adequate	e ventilation and link	nting; designated areas used	P/P(C) O			
Permit Holder shall notify customers that a copy of the most recent inspection report	rt is ava	iiiable.	•		Natural r	ubber latex gloves r	not used per CGS §19a-36f	, , , , ,			
Person in Charge (Signature	7/7	M		Violatio	ns docu	mented	Date corrections due	#			
A	10	_	-		Item Viol	ations on Item Violations	cos	1			
Person in Charge (Printed)					m Violati		10/17/24	+=			
I descond in	1 - 1	9	-	Risk Fa	ctor/Publ	ic Health Intervention	on Violations	5			
Inspector (Signature) . Date 7/17	124			Repeat	Risk Fac	tor/Public Health Int	tervention Violations	1			
Innested Birth Milron Arnondil	-			Good R	etail Prac	ctices Violations		ñ			
Inspector (Printed) LW 1 (1) O MC 1 (W)				Require	s Reins	pection - check box	x if you intend to reinspect				
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the I	is orde	er to o	deal	ect any in	nspectio	n violation identifie	d by the food inspector or to	hold, destroy,			

Food Establishment Inspection Report LHD Manchester Inspection Report Continuation Sheet Establishment TERIVAKI MAANESS Town Manchester TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Process Item/Location/Process Temp raw chicker 59F ttut noid -chicker grat bucket conked chicker 405 38F 38F chicken thian Idoor Freezer -8F not um ter 10F **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 CFPM: Devin exterior of rold hold units not clean wrap used to cover cart + fable that holds sauces /spice sauces not covered/protected next to grill on cooking ong cookline not clear Floors in wic not clear no ill employees good grove use / nandwashing overall great equipment /utensil storage great datemarning

Person in Charge (Signature)

Inspector (Signature)

Date 7/17/2 M

Date 7

Risk Category: 2 Food Estab	t In	spe	ctio	n Rep	ort		Page 1	of <u>3</u>		
Establishment type: Permanent Temporary (lobile Other_						ate:	(0)7	1/24	+	
Establishment Thomas' Smokey PH Stop		45ech	ng Connec	ticus Healify	. 1	ime In_		AI	M/PM Time Out	AM/PM
Address AE-45790		D	P	H)	<u> </u>	M DH.	an	che	ester	
Town/City Manchester					Purpose of Inspection: Routine Pre-op					
Permit Holder Darry! Thomas	C	of P	ublic He			Reinspec			Other	
FOODBORNE ILLNESS RISK F Risk factors are important practices or procedures identified as the most prevalent cor	A 141 - 145 - 145									ass or injury
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered	Part of the Part of the Control	2000		complia	AND THE STATE OF		t in compl	-A. SAZZANI, N. AV.	September 1997 September 1998 September 1998	O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appr	opriat	te box f	for CO					R=repeat violation
IN OUT N/A N/O Supervision	V	cos	R	IN	דטס א	N/A N/O	Pr	otectio	on from Contamination	V COS R
1 O Person/Alternate Person in charge present,	Pf	0	0						and protected	P/C O O
demonstrates knowledge and performs duties Certified Food Protection Manager for Classes 2,	_		H		0				rfaces: cleaned & sanitized on of returned, previously	
2 O O Gertified Food Flotection Manager for Classes 2,	С	0	0	17 🤇					ioned, and unsafe food	POO
Employee Health									ture Control for Safety	
Management, food employee and conditional employee;	P/Pf	0			0	00	Proper co	oking t	time and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting 4 O Proper use of restriction and exclusion	P		0	19 (g procedures for hot holding	
Written procedures for responding to vomiting and		0		20 (Proper by	ot holdi	ime and temperatures ng temperatures	P O O
diarrheal events	Pf	0	0	22 (ling temperatures	P 0 0
Good Hygienic Practices	55 m 81	usie.							rking and disposition	P/Pf O O
6 O Proper eating, tasting, drinking, or tobacco products u	se P/C			24 🤇	/				health control: procedures	DIDENO CO
7 O No discharge from eyes, nose, and mouth	C	0	0	24			and reco			P/Pf/C O O
Preventing Contamination by Hands 8				_/					mer Advisory	
8 O Hands clean and properly washed No bare hand contact with RTE food or a	P/Pf	0	\Box	25/	00	0			provided: raw/undercooked food	Pf OO
pre-approved alternative procedure properly followed	P/Pf/C	0	0/	26 (Paeteurize	d foods	ceptible Population used; prohibited foods not offered	P/C 00
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	8	20 0					es and Toxic Substances	
Approved Source	11.00		1	27 C	510				approved and properly use	
11 O Food obtained from approved source	P/Pf/C	10	0						es properly identified,	
12 O O Food received at proper temperature	P/Pf			28 🤇			stored &			P/Pf/C O
13 O Food in good condition, safe, and unadulterated	P/Pf	0	0						th Approved Procedures	
Required records available: molluscan shellfish identification, parasite destruction	PIPIIC	0	0	29 🤇					variance/specialized	P/Pf/C O O
	OD RE	TAII	PR	ACTIO	CES	(immin)	process/r	KOP CI	iteria/HACCP Plan	
Good Retail Practices are preventative measures	to contro	I the	additio	on of pa	athoge	ns, chemic	als, and p	physical	objects into foods.	
	in appro								on-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	V	cos	1000	OU.					e of Utensils	V COS R
30 Pasteurized eggs used where required	P	0	_	43 ⊂	⊃ ln-u	se utensil	s: proper	rly store	ed .	c 0 0
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C	_	_	44 (⊃ Uter	nsils/equipr	ment/liner	s: prop	erly stored, dried, & handled	Pf/C O O
	Pf	0	0					e article	s: properly stored & used	P/C 0 0
Food Temperature Control Proper cooling methods used; adequate equipment for		_		40	J G10	ves used		oneile	and Equipment	c 00
temperature control	Pf/C	0	0		Foo	d and nor	n-food co	ntact si	urfaces cleanable,	
34 O Plant food properly cooked for hot holding	Pf	0	0	47 C					ed, and used	P/Pf/C O
35 O Approved thawing methods used	Pf/C	0	0	48 C					led, maintained and used;	Dilo O O
36 Thermometers provided and accurate	Pf/C	0	0						ind test strips available	Pf/C O O
Food Identification				49 (⊃ Non	-food con	tact surfa			C 0 0
37 Food properly labeled; original container Prevention of Food contamination	Pf/C	0	0	50	NI 1-4				cal Facilities	
38 Insects, rodents, and animals not present	Df/C	0							adequate pressure	Pf O O
39 Contamination prevented during food preparation, storage & display	P/Pf/C								perly disposed	P/Pf/C O O
40 Personal cleanliness	-	0	-						tructed, supplied, & clean	Pf/C O O
41 Wiping cloths: properly used and stored	С	0	0						sposed; facilities maintained	C 00
42 Washing fruits and vegetables	P/Pf/C	0	0						aintained, and clean	P/Pf/C O
Permit Holder shall notify customers that a copy of the most recent inspection rep	port is ava	ailable	e.						ting; designated areas used	d C O O
	-					ural rubbe documen		oves no	ot used per CGS §19a-36f	2
Person in Charge (Signature) Date 6/2	7/20	-1				Violation	The second second	-	Date corrections due	#
Dacast Thomas	t	1				ndation Ite		tions		
Person in Charge (Printed)	,			Core I	Item V	iolations				
Inspector (Signature) Date	1/21								n Violations	
Inspector (Signature) Date	1/24		-	Good	Retail	Practices	UDIIC He	aitn inte	ervention Violations	
Inspector (Printed) Dense Paule	1			Requi	ires R	einspecti	ion - che	ck hox	if you intend to reinspect	-
Appeal: The owner or operator of a food establishment aggrieved by	this orde	er to	corre	ect any	v insp	ection vio	lation id	entified	by the food inspector or	to hold destroy
or dispose of unsafe food, may appeal such order to the	e Directo	or of	Healt	th, not	later	than forty	y-eight h	ours at	fter issuance of such orde	r.

See Page 2+3

I UUU LSta	blishment inspec	Juon K	eport Page	0
LHD Manchester	Inspection Report Continuation Shee	t	Date (0/7	lay
Establishment Thomas' Smokey Pit	Think Mary	1		
Establishment 17 tory 25 SWIDEGITT	Thinean Town Manch	RESTER		
Item/Location/Process Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
nomp comp	101111 2000 10111 100000	remp	item/200ation// 100033	Temp
reoperational to	The season			
Violations cited in this report must be	SERVATIONS AND CORRECT corrected within the time frames below	IVE ACTION	NS	- ford d-
Item Number	corrected within the time frames below	, or as stated in	Sections 6-405.11 & 6-406.11 of the	e 1000 code.
Hot water				
C-11- 0 =		1 1	1	
Cold prep -@ 3	38F Notroc	ion bo	æd.	
, ,				
Thermometer	/ wines			1
The state of the s	wipes			
Soap/Paperto	wel trash			
V 2				
	/ 1 1 ()			
Sani-tablets,	test strips v			
	17			
OK to operat	i No is	sues		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
			,	
			su page)
				`_ /_
Person in Charge (Signature)			Date 6/	7/24
Inspector (Signature)	4		Date 6	7/24



INSPECTION REPORT FOOD SERVICE ESTABLISHMENTS CONTINUATION SHEET

STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

NAME OF E	STABLISHMENT DATE OF INSPECTION
Thomas	s'SmokeyPit-Itinerant Manchester 6/7/24
INSPECTION FORM #	REMARKS
	Handwash sign V+D Kit/written proceedure + Discussed binder of info on trailer/truck CFPM - 3 and the
	V+D Kit/written proceedure + Discussed binder of info on
	trailer/truck
	CFPM - 3 employee
	CFPM - 3 employee Date Marking / 7 daymax
	Allerace Matie
	Allergen Notice Scrupat base of operation Allergen Menu items copy to be present on Trails
	Truck
	Illfood workers forms 1A/1B & Forms for truck/ Trailer needed - gtore in object Extra forms to be sent to owner
	Trailer needed - store in office
	Extra torms to be sent to done
INITIAL (IN:	PECTOR) INITIAL (PERSON IN CHARGE)

Risk Category: 4 Food Establ	lishm	nen	t Ir	nspecti	ion Rep	ort		Page 1 c	of <u>2</u>	<u>.</u>	
Establishment type: Permanen Temporary Mobile Other					Date: 6	125/2	24				
Establishment Touch Points at Marchester	-	4 service	o Conne	ection Health	Time In_	10:00	AWPM -	Time Out	00	AN	/PM
Address 333 Bidwell St.		DĨ	D	H)	LHD M	anches					
Town/City Manchester	J				Purpose o	of Inspectio	n: Rou	itine Pro	e-op		
Permit Holder JAMES M. HERSTELL		of Pu	ıblic H		Reinspec		Other _				
FOODBORNE ILLNESS RISK F	ACTO	RS.	ANI	D PUBLI	IC HEALT	TH INTERV	/ENTIONS		din .		
Risk factors are important practices or procedures identified as the most prevalent cont	tributing fa	ctors c	of food	dborne illness	or injury. Interv	rentions are con	trol measures to p	orevent foodborne illne	ss or inju	у.	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	1-7-30-7			compliance		t in compliance	N/A=no	t applicable N/	O=not o	bserve	ed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appr	opria	ate box for C	OS and/or R	COS=corre	ected on-site d	luring inspection	R=repe	at viola	ation
IN OUT N/A N/O Supervision	V	cos	R	IN Ø	UT N/A N/O	Protec	ction from Co	ontamination	V	cos	R
Person/Alternate Person in charge present							ed and protect		P/0	0	
demonstrates knowledge and performs duties	Pf	0		(6)0				aned & sanitized	PPPf/		_
2 Certified Food Protection Manager for Classes 2,	_			-				ned, previously			
3, & 4	С	0		17			ditioned, and		1	0	0
Employee Health					1	fime/Tempe	rature Contro	ol for Safety			i u
3 Management, food employee and conditional employee;	P/Pf				000	roper cookir	ng time and te	emperatures	P/Pf/	CO	0
knowledge, responsibilities and reporting	PIPI	0	\circ	19 0		roper reheat	ting procedure	es for hot holding	1	0	
4 V Proper use of restriction and exclusion	P	0	0		000	Proper cooling	g time and te	mperatures		0	
Written procedures for responding to vomiting and	Pf	0		21 0		Proper hot ho	lding tempera	atures		0	0
diarrheal events	11			22		Proper cold h	olding tempe	ratures	1	0	0
Good Hygienic Practices		UOU	i iu	23 🕡 🤇	000	Proper date n	narking and d	lisposition	P/Pf	0	0
6 Proper eating, tasting, drinking, or tobacco products us				24 0 0		Time as a pul	blic health co	ntrol: procedures	P/Pf/C	0	0
7 No discharge from eyes, nose, and mouth	C	0	0	2.	1	and records			FIFTIC	, _	
Preventing Contamination by Hands			- 10			Con	sumer Advis	sory			
8 V P Hands clean and properly washed	P/Pf	0	0	25 0 9	200			w/undercooked food	Pf	0	0
No bare hand contact with RTE food or a	P/Pf/C	0		_/		Highly St	usceptible Po	opulation		March.	
pre-approved alternative procedure properly followed				26				ed foods not offered			0
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	-/				xic Substances			
Approved Source	_			27 0				and properly used	í f	0	0
11 C Food obtained from approved source	P/Pf/C			28			nces properly	identified,	P/Pf/		
12 C Food in good condition, safe, and unadulterated		_	0			stored & used			1 /1 3/		
Poquired records qualible, malliages the lifeth	P/Pf	0	0	-/				ed Procedures			
identification, parasite destruction	P/Pf/C	0	0	29			vith variance/		P/Pf/		0
	OD DE	TAII	DE	RACTICES		process/ROP	criteria/HAC	CP Plan			
Good Retail Practices are preventative measures t						ale and physi	no/ objects into	fanda			
				for COS and					-	20-10-10-10-10-10-10-10-10-10-10-10-10-10	Section 1
OUT N/A N/O Safe Food and Water	v	cos		OUT	d/of K		d on-site durin		R=repea	_	-
30 Pasteurized eggs used where required	P		0		uso utoneil	s: properly st	Jse of Utens	IIS		cos	
31 Water and ice from approved source	P/Pf/C	-	0					dried, & handled	C	-	0
32 O Variance obtained for specialized processing methods	Pf	-	0	45 0 8	ingle-use/sing	rie romiens, pr	cles: properly s	ctored & used	P/0		0
Food Temperature Control		1			loves used		oles, properly	stored & used			-
Droppe coeling mothering and advantage of	1			.0 - 0	.0100 0000		ils and Equip	nment	C		\sim
133 Proper cooling methods used; adequate equipment for temperature control	Pf/C	0	0	O. F	ood and nor		t surfaces cle		-	-	
34 O Plant food properly cooked for hot holding	Pf	0	0				cted, and use		P/Pf		0
35 O Approved thawing methods used		0	-	I W				ained and used:	1		
36 C Thermometers provided and accurate		0					, and test stri		Pf/C	0	0
Food Identification				49) N	on-food con	tact surfaces	clean	, , , , , , , , , , , , , , , , , , , ,	/c	0	0
37 C Food properly labeled; original container	Pf/C	0	0				ysical Facilit	ies	-0		
Prevention of Food Contamination				50 O H	ot and cold	water availab	le; adequate	pressure	Pf	10	0
38 Insects, rodents, and animals not present	Pf/C	0	0	(51) X PI	lumbing inst	alled; proper	backflow dev	rices	P/Pf/C	_	0
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	0	52) 00 S	ewage and v	waste water p	roperly dispo	pplied, & clean	PPf/C		Ö
40 Personal cleanliness		0		33 O TO	oilet facilities	s: properly co	nstructed, su	pplied, & clean	Pf/C	100000	0
41 Wiping cloths: properly used and stored	С	0		54 O G	arbage and re	efuse properly	disposed; faci	lities maintained	С	_	0
42 Washing fruits and vegetables	P/Pf/C	0	0	(55) X P	hysical facili	ties installed,	maintained,	and clean	P/Pf		0
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable		56 O A	dequate ven	itilation and li	ghting; design	nated areas used r CGS §19a-36f	C		0
Person in Charge (Signature) Ramy M. Hayll Date 6/3	1	21.		Violation	s documen em Violation	ted	Date co	orrections due		#	
V- 02 11		-	\neg	Priority Fo	oundation Ite	s em Violations		28-24		20,	
1. 0.			\dashv	Risk Facto	Violations or/Public He	alth Intervent	tion Violations	25-24	\dashv	6	,
Inspector (Signature) Date			_	Repeat R	isk Factor/P	ublic Health I	ntervention V	iolations/		_	
Inspector (Printed) Jose Ramicez					tail Practices		ov if you into	end to reinspect		1/	_
Appeal: The owner or operator of a food establishment aggrieved by the	his orde	er to	COTT	ect any inc	enection via	lation identif	ind by the fa	and to remspect	o bold	dost	
or dispose of unsafe food, may appeal such order to the	Directo	or of	Hea	Ith not let	er than forth	Leight hours	offer iccurs	ou inspector or to	o noid,	destr	оу,

	Foo	d Esta	blishmer	nt Inspe	ction F	Report	Page _2	of_ 2		
	nchester		Inspection Report	Continuation She	et		Date 6/25/	24		
Establishn	Establishment Touch Points at Manchester Town Manchester									
			TEMPERAT	URE OBSERV	ATIONS					
ltem/	/Location/Process	Temp	Item/Location	on/Process	Temp	Item/Loca	ation/Process	Temp		
Hot hol	d String beans	187F	WIC amea	thall.	AIF	Hand Sink	by entrance	130F		
1	Pasta	160F	Chic	1	41 F		ef 7500	PPM		
+	kiel basa	187F	0(0:00	beef	41F	Jour Jour	0, 00-	1 0		
ΔΙζ	traulsen	1011	WIF amb	inal	-5 F	 		400ppm		
	han Calal	40F	wit and	16111	-51					
+	Pasta Salad							Temp▶Rite, #		
Milk	purced veg.	37F						Date:		
1.1118	coolec	40 F	SERVATIONS A	NID CODDEC	TIVE ACTIO	ONG		Empi: Empleado PASS WHEN DO		
	Violations cited in this						11 & 8-406.11 c	BAR TURNS ORANGE ES ACEPTABLE CLUMDO UN BARRA		
Item Number	James Cl				8			160°F/7196		
	JAMEZ CI	11100	SHE							
	11 / /					1				
# C47	Hand Sink b	by entr	ance not	sealed ;	6 wall	1 not clear	nable			
51C	Hand sink by Dump sink a	t'waken	eash leak	ing unde	rneath,	Faucet w	onf shut of	FF		
	WIC gasket									
49C			,							
51C	Ceiling pipe	S by	ice Machini	e drippina	on to	floor.				
55C	Cove base i	n dry.	Storage n	of sealed	1 to wa	11		See Suize va		
52P	Grease trap.	< 01.	2 hay 2 1	20.0012.6	n not I	- ac. Lizaia	a back adal	SUBMITTED		
110	Grease Trap.	3 44	> Day Z	Natewasi	1107	011291011112	2. NOT 6 01000	today		
168	Quat bucke	tat:	7500 ppm .	(COS) (e	made t	3 400 p	2M			
			• • •							
					71					
Note	Discussed ca	dina proc	educe kee	e coolina	Foods u	ncovered.				
Note	tlooks around i	Na(ewas	ih delimed	once a h	ræk cle	eaned dail l				
Note	No cooking	66 Co	sling at -	time of	inspect	ίοη				
Note	Provided aller		ster							
Person in	Charge (Signature)		Same	on He	alle		Date 6/2	5/24		
Inspector	(Signature)	- Z	5 .	-			Date 6/25	/24		

Risk Category: 3 Food Establishment Inspection Report Page 1 of 2								
Establishment type: Temporary Mobile Other					Date:			
Establishment Trattoria ToScana		4sering	Connection	cur needly	Time In_	1:00 A	MeM Time Out 2	:00 AMPIN
Address 706 Hartford Rd.		DI		4)	LHD M	ancheste	ec .	
Town/City Manchester					Purpose	of Inspection:	Routine P	re-op
Permit Holder Michael Beers			blic Hea	ilth	Reinspec		Other	
FOODBORNE ILLNESS RISK F. Risk factors are important practices or procedures identified as the most prevalent cont	*							ages or injury
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered i				ompliance		t in compliance		I/O=not observed
P=Priority_item Pf=Priority foundation item C=Core item V=violation type	Mark in	appro	priate	e box for C	OS and/or F	R COS=correct	ted on-site during inspection	R=repeat violation
IN OUT N/A N/O Supervision	V	cos	R	IN 6	UT N/A N/O		on from Contamination	V COS R
Person/Alternate Person in charge present,	Pf	0				Food separated		P/C O O
demonstrates knowledge and performs duties Certified Food Protection Manager for Classes 2,					The second second		urfaces: cleaned & sanitized on of returned, previously	
3, & 4	С			17		served, recondi	tioned, and unsafe food	P 0 0
Employee Health	T-			TT			ture Control for Safety	
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	0	\circ	18 0 0			time and temperatures g procedures for hot holdin	P/Pf/C O
4 Proper use of restriction and exclusion	P	0				Proper cooling t	g procedures for not holdin	g P O O
Written procedures for responding to vemiting and				21 0/	200	Proper hot hold	ing temperatures	P 0 0
diarrheal events	Pf	0	() I 	22			ding temperatures	POO
Good Hygienic Practices		THE STATE OF		23	OP	Proper date ma	rking and disposition	P/Pf O O
6 Proper eating, tasting, drinking, or tobacco products us			_	24 0			c health control: procedure	P/Pf/C O O
7 No discharge from eyes, nose, and mouth	C	0	엨	24 9	/	and records		FIFIIC
Preventing Contamination by Hands		гат.					ımer Advisory	
8 Hands clean and properly washed No bare hand contact with RTE food or a	P/Pt	0	의	25			provided: raw/undercooked foo	d Pf O O
9 Pre-approved alternative procedure properly followed	P/Pf/C	0		26 0	50		ceptible Population used; prohibited foods not offered	1 100
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0		20 0			ves and Toxic Substance	
Approved Source	Trive			27			approved and properly use	
11 C Food obtained from approved source	P/Pf/C	0		1			es properly identified,	
12 O Food received at proper temperature	P/Pf			28		stored & used	ss property identified,	P/Pf/C O
Food in good condition, safe, and unadulterated	P/Pf	0		/	C	onformance wi	th Approved Procedures	
14 O Required records available: molluscan shellfish	P/Pf/C	0		29 0			n variance/specialized	P/Pf/C O O
identification, parasite destruction				ACTICES	12-30	process/ROP ci	riteria/HACCP Plan	177 200
Good Retail Practices are preventative measures t						cals and physica	I objects into foods	MENTAL DISTRICT
		- A - C - C - C - C - C - C - C - C - C		or COS and			on-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	V	cos	-	OUT			e of Utensils	V COS R
30 Pasteurized eggs used where required	Р	0	0	43 O In	-use utensi	ils: properly store		c 00
31 Water and ice from approved source	P/Pf/C	0					erly stored, dried, & handled	Pf/C O O
32 O Variance obtained for specialized processing methods	Pf	0	_			Name and Advantage of the Control of	es: properly stored & used	P/C 0 0
Food Temperature Control				46 O G	loves used			C O O
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0	oll	THE			and Equipment	
34 O Plant food properly cooked for hot holding	Pf	0				n-1000 contact s igned, construct	urfaces cleanable,	P/Pf/C O O
35 O Approved thawing methods used		0		1//			lled, maintained and used:	1
36 Thermometers provided and accurate		0		48 (그리 있었는 불탁하면 지금만 하다 하나요?	and test strips available	Pf/C O O
Food Identification			1			ntact surfaces cl		1000
Food properly labeled; original container	PfC						ical Facilities	
Prevention of Food Contamination							; adequate pressure	Pf O O
38 Insects, rodents, and animals not present		0				talled; proper ba		P/Pf/C O O
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness	P/Pf/C		-			waste water pro		P/Pf/C O O
41 Wiping cloths: properly used and stored		0					structed, supplied, & clean	Pf/C O O
42 Washing fruits and vegetables	P/Pf/C	00					sposed; facilities maintained naintained, and clean	C O O
			7				nting; designated areas use	d 0 00
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ilable.		ON	atural rubbe	er latex gloves n	ot used per CGS §19a-36f	
1000 1-	12-) U		Violation	s documer	nted	Date corrections due	#
Person in Charge (Signature)	11-0	* 1			m Violation			0
Person in Charge (Printed) Michael Bears						tem Violations	~ ~ ~ · · · · · · ·	0
l'allandia de l'		4	-	Risk Fact	Violations	ealth Intervention	9-17-24	
Inspector (Signature) Date 0/1	7/2	4					ervention Violations	
0, 5	1	-		Good Ret	ail Practice	s Violations		3
Inspector (Printed) Sose Ramicez				Requires	Reinspect	tion - check box	c if you intend to reinspec	
Appeal: The owner or operator of a food establishment aggrieved by to or dispose of unsafe food, may appeal such order to the	his orde	er to c	correc	ct any ins	spection vio	olation identifie	d by the food inspector or	to hold, destroy,

Food Establishment Inspect	tion Report	Pageo	f 🚣
HD Manchester Inspection Report Continuation Sheet	1	Date 6/17/2	4
stablishment Trafforia ToScana Town Manches	ter		
TEMPERATURE OBSERVA	TIONS		
		cation/Process	Temp
WC Shrededchese 38 F Pasta Station	Kitche Ho	and sink	85F
meatballs, 38F cooked pasta 4	11F Customer	Bathroom Sink	85F
	205 200	City Con Only	
door RIF ambjert -3t Vocka Sauce 3	387 3 Bay	Sink	120F
Cold preptable heavy cream.	38F		
10 11 1 200	-3.		
cut tomatoes 38F WIC Main Kitchen			
boiled eggs 37F Sausage	39F		
	38F		
	201		
Calamar 37F meatball3	28F		
	VE ACTIONS		
Violations cited in this report must be corrected within the time frames below,	or as stated in sections 8-40	5.11 & 8-406.11 of the f	ood code.
item			
Number			
	1 1.	1 / 1 / 1	ndina
AGC Interior of under conter conter at	contline in	clean W/310	And my
49C interior of under counter cooler at 56C hood unclean, due to be cleaned this	1100011	C/CMI 17 WO	XTE(
36C and coclean due to be cleaned this	< month		
The state of the s	5 1701111		
370 unlabeled squeeze bottles at cookline	0		
= 10 OTHERSON SHOWER OF HES OF COSTITUTE			
, ·			
Note overall clean & organized			
Note PIC knowledgeable on food Safety.			
Note Not open during inspection. No cooking	ac andian al	SPRIPL	
100 100 of all alling hispacion 100 casping	a cosilia or) SCI (100)	
Note test strips a thermometer available			
JUJO 191 STIPS 4 TIMIMUM AVAILABLE			
Note Discussed proper date marking.	All cooly to	2 - 606	- 4-1
	All leady 10	eat lettige	ajec"
Foods must be date marked, Held Fo	- 7 1040	ک د	
10000 MUST be date marked, the to	c 1 days m	ax	
Mario Di Carollo De Contina la mar	,		
Note Discussed proper cooking temps.	1983 1000 1000 1000 1000 1000 1000 1000 10		
Note Discussed allergen Paster Must be	- a.e.L. (in	Litchon	
.0	= posted III	MI CHEH.	
Made Shall Gich to Carrille	•		
Note Shell fish tags available			
At A			
		Date 6-17	-2v
Person in Charge (Signature)		Date 6-//	× 1
1 2 3 7	-	Date 6/17	121
Inspector (Signature)		Date 0/17	129

Risk Category: 3 Food Establishment Inspection Report Page 1 of 2										
Establishment type: Permanent Temporary Mobile Other						- Date: 7/12/24				
Establishment Wendys				ticat Healt		ime In	AM/PM Time Out	AM/PM		
Address 21e2 Spencer St)	DI	H	L	HD /	Manchester			
Town/City Manchester					P	urpos	e of Inspection: Routine Pre-	ор		
Permit Holder		1700000	blic He	alth		NOS OUNS OF STREET	ection Other			
FOODBORNE ILLNESS RISK F								N MEMBER		
Risk factors are important practices or procedures identified as the most prevalent continuous Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				complian			W. 2107	or injury. not observed		
P=Priority item Pf=Priority foundation item C=Core item V=violation type								=repeat violation		
IN OUT N/A N/O Supervision	V	cos	_	T .	100	N/A N/		V COS R		
Person/Alternate Person in charge present							Food separated and protected	P/C 0 0		
demonstrates knowledge and performs duties	Pf	0	\circ	16 0			Food-contact surfaces: cleaned & sanitized	P/Pf/C O O		
Certified Food Protection Manager for Classes 2							Proper disposition of returned, previously	100 SE SES		
2 0 0 3, & 4	С	0	0	17 0	0		served, reconditioned, and unsafe food	P 00		
Employee Health							Time/Temperature Control for Safety			
Management, food employee and conditional employee;	P/Pf	0					Proper cooking time and temperatures	P/Pf/C O O		
knowledge, responsibilities and reporting		-		19 0	0	00	Proper reheating procedures for hot holding	POO		
Proper use of restriction and exclusion	P	0	0				Proper cooling time and temperatures	P 0 0		
Written procedures for responding to vomiting and diarrheal events	Pf	0	0				Proper hot holding temperatures	800		
Good Hygienic Practices	_						Proper cold holding temperatures Proper date marking and disposition	P/Pf 0 0		
6 O Proper eating, tasting, drinking, or tobacco products us	se P/C	0		Polymer	Name of the last	1	Time as a public health control: procedures			
7 O No discharge from eyes, nose, and mouth	C	0	-	24 🔘	0	0	and records	P/Pf/C		
Preventing Contamination by Hands		101			4		Consumer Advisory			
8 O O Hands clean and properly washed	P/Pf	0	0	25 🔾	10		Consumer advisory provided: raw/undercooked food	Pf 00		
9 O O No bare hand contact with RTE food or a	DIDGO						Highly Susceptible Population			
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 🔾	0	0	Pasteurized foods used; prohibited foods not offered	P/C 00		
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0			F	ood/Color Additives and Toxic Substances			
Approved Source				27 🔾	0	0	Food additives: approved and properly used	POO		
11 O Food obtained from approved source	P/Pf/C			28	0	0	Toxic substances properly identified,	P/Pf/C O O		
12 O O Food received at proper temperature		0		20			stored & used	111110		
13 O Food in good condition, safe, and unadulterated	P/Pf	0	0		1		Conformance with Approved Procedures			
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29 🔾	0	0	Compliance with variance/specialized process/ROP criteria/HACCP Plan	P/Pf/C		
	OD RE	TAII	PR	ACTIC	FS		process/ROP chiena/HACCP Plan			
Good Retail Practices are preventative measures to	to contro	I the a	additio	on of pat	thoaei	ns. chei	micals and physical objects into foods			
	in appro							=repeat violation		
OUT N/A N/O Safe Food and Water	V	cos	-	OUT		2-18	Proper Use of Utensils	V COS R		
30 Pasteurized eggs used where required	P	0	0	_		se uter	nsils: properly stored	c 00		
31 Water and ice from approved source	P/Pf/C	0	0	44 0	Uten	sils/equ	uipment/linens: properly stored, dried, & handled	Pf/C O O		
32 O Variance obtained for specialized processing methods	Pf	0	0	45 🔾	Sing	le-use/s	single-service articles: properly stored & used	P/C 0 0		
Food Temperature Control				46 🔾	Glov	es use	ed properly	C 00		
Proper cooling methods used; adequate equipment for	Pf/D	0					Utensils and Equipment			
temperature control				47 0	21		non-food contact surfaces cleanable,	P/Pf/C		
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf	_					esigned, constructed, and used			
36 Thermometers provided and accurate		0		48			ing facilities: installed, maintained and used;	Pf/C O O		
Food Identification	PI/C	101	\subseteq	10			gents, sanitizers, and test strips available contact surfaces clean			
37 Food properly labeled; original container	Pf/C	0	0	43	INOII	-1000 0	Physical Facilities	(0)00		
Prevention of Food Contamination	1.40			50 0	Hot	and co	Id water available; adequate pressure	Pf OO		
38 O Insects, rodents, and animals not present	Pf/C	0	0				nstalled; proper backflow devices	PPIC O O		
39 Contamination prevented during food preparation, storage & display	P/Pf/C						nd waste water properly disposed	P/R/COO		
40 Personal cleanliness	Pf/C	0	0	53 🔾	Toile	et facili	ties: properly constructed, supplied, & clean	Pf/C O O		
41 Wiping cloths: properly used and stored	С	0		54 🔾	Gart	age an	d refuse properly disposed; facilities maintained	000		
42 Washing fruits and vegetables	P/Pf/C	0	0				cilities installed, maintained, and clean	P/P(/C)		
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ailable	•		Natu	ıral rub	ventilation and lighting; designated areas used ober latex gloves not used per CGS §19a-36f	000		
Person in Charge (Signature) Aul Mate 7	1121	24	1	Violati Priority				#		
21.	16	/	-				Item Violations July 22,24	2		
Person in Charge (Printed) 700 5030				Core It				14		
	1			Risk Fa	actor/	Public	Health Intervention Violations	17		
Inspector (Signature) Venus tours Date 7/12	YZY			Repeat	t Risk	Facto	r/Public Health Intervention Violations	6		
2 / 12	1			Good F	Retail	Practi	ces Violations	6		
Inspector (Printed) Denise raughi RS				Requir	res R	einspe	ection - check box if you intend to reinspect	V		
Appeal: The owner or operator of a food establishment aggrieved by to or dispose of unsafe food, may appeal such order to the	his ord	er to	corre	ect any	inspe	ection	violation identified by the food inspector or to	hold, destroy,		
or dispose of disale lood, may appear such order to the	DIFECT	JI OT I	neal	ui, not	iater	unan to	orly-eight hours after issuance of such order			

F00	a establishment inspe	ction R	eport Pa	age of	
LHD Manchester	Inspection Report Continuation Sho	eet	Date	7/12/	24
Establishment Wendys	Town Manc	hester			
and the second s	TEMPERATURE OBSER	VATIONS			Ritan desa
Item/Location/Process	Temp Item/Location/Process	Temp	Item/Location/Pro	ocess	Temp
Hamburge Sta.	39F Chicken breast	158P	1	F.	
	41F Hamburger	138F	Harriator.	- 413	106F
by milk	V T J T T T	7-10 9:3-	J Jos auco	7.0	1001
	38 F	148F	C.1.00		0.
Sour Cream	39 F Potatoes	185F	front to @ 8	or * De	ople
	Chicken Nugget	167F	using ?? A	Mar sta	to
	00		W-tempor	but to	Vesa
			While N	oryin	use reg
	OBSERVATIONS AND CORRECT	CTIVE ACTION	ıs		
Item Number Violations cited in this	report must be corrected within the time frames belo			06.11 of the fo	ood code.
22P American	heese @ 60F Disca	rded.			
	statest Time us Temp		apposed	with	es
61	we or time marking		V 1	le via en	mil to
	container + included			T 11	proval
51PF MOD SINK+	Handsink unit - di	00.004	leaving -	•	
		1 4 . ()	\	1	55-11
550 Floors, gene	rally uncleans greas	se build	up at 36	say u	sall
behind	ice of achieve Lime bu	ildup	Tuncle		
behind	I dove the soda m	achere	. / 32 3		
Walk	in freeze - tood deb	is/tra	oh antioor	under	racks
	holders atsenice a				
-	as with build-up.				
39c Reach in f	reager - Vento interio	- Ice b	wildupt of	hip.	
	ir or replace unit.				
33PF Walkin Co	poler@ 45F onext th	erm. 2+	If on interi	or.	
Mana	ger statest defrosts 1	030am	- 1130pm /	30 mic	Acro
- Rese	thine to depost attent	مسع		And the late of the late of	93
- 1/0-1	+ Unit is maint + able	*1 FF&1	of mode	ect be	low
417	Manager Contacted	Penional	Superviso	too	ret
Smean	re out Today (back				
Note: Discussed	Relocating drying ut	cosils of	Sand a'm	of Coni-	- 0011
52c Stanting	Wateron Cookline Hoo	<u></u>	The country of	Jawii.	July
	vel Dispenses at hards.		la remis		
Person in Charge (Signature)	Mark July	1100	_		
			Date	7/	
	Union Yayne		Date	1/12	-107
11 repair: logay	0 MA 2000 TO			17.0	

mail repair: Today
Distribution: 1st - White - Health Department 2nd - Yellow - Owner/Operator/Person in Charge

— dpayre@manchestcrct.gov)

Risk Category: 3 Food Establ	ishn	nent	Iner	necti	on Ro	norf	Page 1 c	v 2
Establishment type: Permanent Temporary Mobile Other	IIIS				1 age 1 c	"		
			onnecticut .		Date: 7	12/2024		
Establishment Wendys-Buckland		ASSUM			Time In_	9:30 (F	M/PM Time Out 10	:30 (AMVPM
Address 155 BUCKland ST		DP	H			manch	rester	
Town/City Manchester	II.				Purpose	of Inspection	: Routine Pre	e-op
Permit Holder Frank V.	1	onnecticut of Publi			Reinspe		Other	
FOODBORNE ILLNESS RISK FA Risk factors are important practices or procedures identified as the most prevalent control	ACTO	RS A	ND P	UBLI	C HEAL	TH INTERVI	ENTIONS	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it		and the state of t	AAGAMAMAMAMA	pliance	and the same of th	ot in compliance	1000 V 990 VV 100 000	os or injury. O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in						ted on-site during inspection	
IN OUT N/A N/O Supervision	V	cos F	2	IN O	UT N/A N/C		on from Contamination	V COS R
1 Person/Alternate Person in charge present,	Pf	0		05		Food separated		P/C 0 0
demonstrates knowledge and performs duties			16	0	00		urfaces: cleaned & sanitized	P/Pf/C O O
Certified Food Protection Manager for Classes 2, 3, & 4	С	0) 17	0			ion of returned, previously itioned, and unsafe food	POO
Employee Health				/		Time/Tempera	ture Control for Safety	
Management, food employee and conditional employee;	P/Pf	00	18		000	Proper cooking	time and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting			19	0		Proper reheating	g procedures for hot holding	
Written procedures for responding to warniting and	P	00	_			Proper cooling	time and temperatures	P 0 0
diarrheal events	Pf	00	21 22		200	Proper not hold	ing temperatures ding temperatures	P 0 0
Good Hygienic Practices			23				orking and disposition	P O O
6 O Proper eating, tasting, drinking, or tobacco products use	e P/C	00	\neg		/		c health control: procedures	
7 O No discharge from eyes, nose, and mouth	С	00	24	0	ت العار	and records	a manufacture procedures	P/Pf/C
Preventing Contamination by Hands 8		T					umer Advisory	
8 Hands clean and properly washed No bare hand contact with RTE food or a	P/Pf	00	25	00			y provided: raw/undercooked food	Pf OO
pre-approved alternative procedure properly followed	P/Pf/C	00	26	0			ceptible Population	12/21/21/2
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	00				Pasteurized foods	used; prohibited foods not offered ves and Toxic Substances	P/C 00
Approved Source	1		_	1010		Food additives:	approved and properly used	POO
11 Pood obtained from approved source	P/Pf/C	00	7			Toxic substance	es properly identified,	
12 O Food received at proper temperature	P/Pf	00	20	0		stored & used	or property recrimines,	P/Pf/C O
Food in good condition, safe, and unadulterated	P/Pf	00					th Approved Procedures	
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	00	29	0	0		h variance/specialized riteria/HACCP Plan	P/Pf/C O
	DD RE	TAIL F	PRAC	TICES		process/ROP C	mena/hACCP Plan	also - mou
Good Retail Practices are preventative measures to	contro	I the add	dition o	f pathog	ens, chem	icals, and physica	I objects into foods.	
		priate bo	ox for C	OS and	l/or R	COS=corrected	on-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	٧	COS F	221	OUT			e of Utensils	V COS R
31 Water and ice from approved source	P P/Pf/C	00	2 43	O In-	use utens	ils: properly stor	ed	c 0 0
32 O Variance obtained for specialized processing methods	Pf	0	45	O Sir	nale-use/sit	onle-service article	perly stored, dried, & handled es: properly stored & used	Pf/C O O
Food Temperature Control			46	O GI	oves used	properly	sa. property stored & used	0 0 0
Proper cooling methods used; adequate equipment for	Pf/C					Utensils	and Equipment	000
temperature control			47	₩ Fo	od and no	on-food contact s	surfaces cleanable,	P/Pf/COO
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf	00				igned, construct		P/Pf/C O
36 Thermometers provided and accurate	Pf/C	00	48		arewashin	ig facilities: insta	lled, maintained and used;	Pf/C O O
Food Identification	PI/C	1010		CIE	eaning age	ntact surfaces c	and test strips available	
37 Food properly labeled; original container	Pf/C	00	5 0	AINC	//-100d co		ical Facilities	000
Prevention of Food Contamination			50	OHo	t and cold		; adequate pressure	Pf OO
38 Insects, rodents, and animals not present	Pf/C	00	51	O Plu	umbing ins	stalled; proper ba	ackflow devices	P/Pf/C O O
39 Contamination prevented during food preparation, storage & display		00	52	○ Se	wage and	waste water pro	perly disposed	P/Pf/C O O
40 Personal cleanliness 41 Wiping cloths: properly used and stored		00	53	O To	ilet facilitie	es: properly cons	structed, supplied, & clean	Pf/C O
	C P/Pf/C	00	55	O Dh	rbage and	refuse properly di	sposed; facilities maintained naintained, and clean	C O O
					leguate ve	entilation and ligh	nting; designated areas used	P/Pf/C
Permit Holder shall notify customers that a copy of the most recent inspection repo	rt is ava	niable.		O Na	itural rubb	er latex gloves n	ot used per CGS §19a-36f	
Person in Charge (Signature) Full Date 7-2	-74	ri .		lations	docume	nted	Date corrections due	#
Date 1-2	-1				m Violatio	ns tem Violations		
Person in Charge (Printed) Frankliscout					Violations		10/2/2024	3
e stranded in	1000	1	Ris	k Facto	r/Public H	lealth Intervention	n Violations	+2
Inspector (Signature) 7. 2000 Date 7/2	LU 2	-4	Rep	peat Ris	sk Factor/	Public Health Int	ervention Violations	_
Inspector (Printed)			Red	quires	Reinspec	es Violations	x if you intend to reinspect	3
Appeal: The owner or operator of a food establishment aggrieved by the	is orde	er to co	rrect	env ine	nection vi	olation identifie	d by the food inepector or to	hold doctron
or dispose of unsafe food, may appeal such order to the	Directo	or of He	ealth, r	not late	r than for	ty-eight hours a	fter issuance of such order	riola, destroy,

Food Establishment Inspection Report Page 2 of 2

LHD Mancheste		Inspection Report Continuation She		Date 7/2/10	774
		ld Town Manche	CHEV	54.0 1 2 1 0	/
Establishment voc 100	4) Dodinar	TEMPERATURE OBSERV			
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
hot Chili	IAF	cheese cold	4)F	hand wash	RTF
not calleage	1645	Chelse.	AIF		
not chicken into	Sanitizer bucket	200 non			
hot egg	154F	WIC .			P
3)		grilled Chicken (cooked)	40F		
idoor Freezer	1F	raw burger	40F		
10.00.		bacon	401-		
WIF	OF				
		SERVATIONS AND CORREC			
nem		e corrected within the time frames belo	w, or as stated	d in sections 8-405.11 & 8-406.11 of the	he food code.
Number CFPM: Fra	nk viscont	Ì			
10		ve and hold station	nitria	an I hun marmar	
				,	
		sink by drive thru			
ATC plastic u	or apped a	round faucet of mo	psink		
note * Test strips					
noted Form lat	B avaiable				
notex pest con	rol report	available -no	issue.	S	
	E.		1 2 0 0 -		
notext very cle					
		op off food aller			
notex food the	rmomercy	· Jaiconol wipes a	vailab	U	
notes no ill for	od worke	r	54		
FALINIA) -11	nyanardi	ng cinnabon crea	mche	osp Frosting - Ar	mail
		chesterct.govi	VIII	procedure proces	77
For appr	ova.	• • • • • • • • • • • • • • • • • • •			
				\	
		,			
20 20 2000 0	· UL		_		7.024
Person in Charge (Signatu	ire) ov	/		Date 7/2)	
Inspector (Signature) 🕺 .	XIVIOUX	·		Date 7/2/2	2024

Restaurant And Commercial Kitchen Services LLC

PO BOX 3367

Waterbury, CT 06705

(860) 883-3116

CUSTOMER SIGNATURE

racksllc818@gmail.com

Invoice# CR

TAXES:

RACKSLLC

	DATE OFFI	INVOICE DETAILS			
SOLD TO	DATE ORDERED	ORDER TAKEN BY			
wendys	PHONE NUMBER	CUSTOMER ORDER			
Spencer St.	JOB LOCATION				
Manhoster, A	JOB PHONE	START DATE			
	TERMS	NET 30			

DESCRIPTION OF WORK	QTY	MATERIA	AL	UNIT	AMT
WALK IN COOKER - TOOK OUT	2	RYDAY	,	45	90.00
afternoon deficit times	1	CON Drain	NATA	181	/
Holed Sight Christe to System	21	cos Gu	Oto		25 M
WAShed Conflex SOF COVI,		. ,			
MISO WASHED CURCUST CUST					
on walk in treater.					
Malinella a dialla la dia	nd.				
MIGHT WEST - INSTRIKE GODGESS	VILD				
CITUIN PERS PRATTE CYCLINSUS	VEG				
SUCHTON THE TO PREY LINE WITH	7				
OY) + COY , TAISS CICTY OSTER UYK	Y				
Charles aring horton	h	TOTAL	PARTS:		
+ com still sportwide still		MISC CHAR		STREET, STREET	ANT
	Shi	THE RESIDENCE OF THE PROPERTY	GES		AMT 25.00
	Oni	Willey			(A)
		TOTAL	PARTS	a5.	OV
	MATERIAL PROPERTY.	LABOR	-	RATE	AMT
	2:00		55	VATE	27 5
	0100	1.50	0,0		ua Jes
		TOTAL	LABOR:		
			_		
		SUB	TOTAL:		

Risk Category: 4 Food Establishment Inspection Report Page 1 of 2								
Establishment type: Permanent Temporary Mobile Other			Date:	6/4/	24			
Establishment West Side Care Contr		4-sepher	Connec	cticus Nesilly	Time In_	10:30	_kÎV/PM Time O	ut (2:00 AMPN
Address 349 Bidwell St				H)	LHD /	nanch		
Town/City Manchester						of Inspection		Pre-op
Permit Holder Lameisha Bent	C	onnectic	ut Dep	partment paith	Reinspec	tion	Other	1272
FOODBORNE ILLNESS RISK FA	ACTO	RS A	AND	PUBLIC	CHEAL	TH INTER	VENTIONS	CARLEST OF THE
Risk factors are important practices or procedures identified as the most prevalent contri	ributing fa	ctors of	f food	borne illness or	r injury. Inten	ventions are co	ntrol measures to prevent for	odborne illness or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				compliance		t in compliand	ce N/A=not applical	ble N/O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appro	priat	te box for Co	S and/or F	COS=cor	rected on-site during ins	spection R=repeat violation
IN OUT N/A N/O Supervision	V	cos	R	IN OU	T N/A N/O		ection from Contamin	nation V cos R
1 Person/Alternate Person in charge present,	Pf	0		15 OD/C			ted and protected	P/C O C
demonstrates knowledge and performs duties				16 0 9			t surfaces: cleaned &	
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	\circ	17 🕏 🔾		Proper dispo	sition of returned, pre nditioned, and unsafe	viously POC
Employee Health		-				Time/Temp	erature Control for Sa	afety
Management, food employee and conditional employee;	Dime			1800	000	Proper cook	ing time and temperat	ures P/Pf/C C
knowledge, responsibilities and reporting	P/Pf	0	\circ	19 0 0	000	Proper rehea	ating procedures for ho	ot holding POC
4 Ø Ø Proper use of restriction and exclusion	P	0	0	20 0/0	000	Proper cooling	ng time and temperatu	ires POC
5 Written procedures for responding to vomiting and	Pf	0		21 00	100	Proper hot h	olding temperatures	POC
diarrheal events				22 00 9	800	Proper cold	holding temperatures	POC
Good Hygienic Practices 6 Proper eating, tasting, drinking, or tobacco products us	- 100			23			marking and disposition	
6 Proper eating, tasting, drinking, or tobacco products use 7 No discharge from eyes, nose, and mouth	e P/C	00		24 0 0			ublic health control: pro	ocedures P/Pf/C C
Preventing Contamination by Hands		101	=			and records		J. 100,00000 1000 1000
8 9 Hands clean and properly washed	P/Pf	0	0	25 0 0	0		nsumer Advisory sory provided: raw/underce	noked food Df C
No hare hand contact with RTE food or a		loss	- T	20			usceptible Population	
9 pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0	201		ods used; prohibited foods	
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	/			ditives and Toxic Sub	
Approved Source		E		27 0 9			es: approved and prop	
11 Ø	P/Pf/C			28	10000		nces properly identifie	ed
11 Food obtained from approved source 12 Food received at proper temperature 13 Food in good condition, safe, and unadulterated		0		20 0		stored & use		
Described as a description 1 11 1 1 11 11 11 11 11 11 11 11 11 11	P/Pf	0	9				with Approved Proc	
14 O Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	\circ	29 0 0			with variance/specialize criteria/HACCP Plan	
	DD RE	TAIL	PR	ACTICES	Name of the last o	processivoi	Citerian IACCI Fian	
Good Retail Practices are preventative measures to	contro	I the a	dditic	on of pathoge	ens, chemic	cals, and phys	sical objects into foods.	
				or COS and			ed on-site during inspec	tion R=repeat violation
OUT N/A N/O Safe Food and Water	V	cos	R	OUT		Proper	Use of Utensils	V COS R
30 O Pasteurized eggs used where required	Р	_	0	43 O In-I	use utensi	ls: properly s	tored	c 0 0
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C	-		44 O Ute	ensils/equip	ment/linens: p	roperly stored, dried, &	handled Pf/C C
32 Variance obtained for specialized processing methods Food Temperature Control	Pf	0					ticles: properly stored &	
Drawer and the mostly and the desired and the state of th		Т	-	40 0 610	oves used		ile and Equipment	C O C
temperature control	Pf/C	0	\circ	an For	od and nor		sils and Equipment ot surfaces cleanable,	
34 O Plant food properly cooked for hot holding	Pf	0	0	P P pro	perly design	aned, constr	ucted, and used	P/P(ic)
35 O Approved thawing methods used	Pf/C	0	\overline{a}	Ca da Wa	arewashing	facilities: in	stalled, maintained an	
36 Thermometers provided and accurate	Pf/C	0					s, and test strips avail	
Food Identification						tact surface:		(0)00
37) Food properly labeled; original container	P#C			O ,			ysical Facilities	
Prevention of Food Contamination 38 Insects, rodents, and animals not present	1000						ble; adequate pressure	
39 Contamination prevented during food preparation, storage & display							r backflow devices	P/P(C)
40 Personal cleanliness	P/Pf/C	0					properly disposed onstructed, supplied, 8	(P)Pf/C O C
41 Wiping cloths: properly used and stored	C		5	54 Ga	rhade and r	s. properly c	y disposed; facilities mai	& clean Pf/C O
	P/Pf/C	0		55 00 Ph	vsical facil	ities installer	d, maintained, and clea	intained C C C
Permit Holder shall notify customers that a copy of the most recent inspection repo				56 O Add	equate ver	ntilation and	lighting; designated ar	reas used COO
A A A A A A A A A A A A A A A A A A A	7	mable.		O Na	tural rubbe	er latex glove	s not used per CGS §	19a-36f
Person in Charge (Signature) AGM D) Na Bet Date (0)	1/21	4		Violations			Date correction	
- cross in charge (cignature) toy v to the Date to the	110	/		Priority Iter			6-7-	24
Person in Charge (Printed) Cames a Bout (0/4/	24			Core Item		em Violation	Cos	20
	1	A	\neg	Risk Facto	r/Public He	ealth Interver	ntion Violations	24 6
Inspector (Signature) Date 6/4	12	4		Repeat Ris	k Factor/P	ublic Health	Intervention Violations	S
Inspector (Printed) 450 Ramifed	1			Good Reta	il Practices	s Violations		8/
Appeal: The owner or operator of a food establishment against a but to				Requires	Reinspect	ion - check	box if you intend to re	einspect
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Directo	or of H	ealt	th, not late	than fort	v-eight hour	ned by the food inspense of su	ector or to hold, destroy,

	<u> </u>	<u> </u>	nent inspe	CHOIL R	epon	Page _Z	or
LHD_ <i>M</i> (anchester	Inspection F	Report Continuation Shee	et		Date 6/4/	124
Establishr	ment West side Ca	re Center	Town Manche	ester		, .	
		TEMPE	RATURE OBSERV	ATIONS			
Item	/Location/Process , 1	emp Item/L	ocation/Process	Temp	Item/Loca	ation/Process	Temp
Hot h	ald Steam table	2 000	- RIC		Hand SIM	k by oven	NOF
(2F 1	Salami	40F	Quat bus	Lot	150000
			naved Steak	39 F	3 bay a	120 +	40000M
			YAV II			RD SIAL	9000
1 1/1	0 100011		egas Thour		<u>Employee</u>	BR SINK	905
WIT.	ambient c		turky salad	38F			
WIC	Cheese cake 41		cooler MILK	91F		in the second	Pito 5
		8F				Tem	p▶Rite. §
1	Sliced Cheese 40	ODSEDVATIO	NO AND CODDEC	TIVE ACTIO	110	Fecha Emp	and a
	Violations cited in this repo		NS AND CORRECT			11 & 8_406 11	S WHEN BLUE TURNS ORANGE
Item Number	1	1		,, or as stated li	. 50000113 0-405.	d 0-400.1	CAMBA A COLOR NARANIA
Number	Cameisha CFI	M ON DITE	·				160°F/71°C
37c	unlabeled conf	ainer at	hite				
12 1000			THE GRANDARS	>			
49C	Grease trap	unclean					
5/c	leak under	3 ball 5	nk				
12PK	Grease frap		1(05)				
47C		1		1 1	1/-		
	Wire Shelving	by 3 bal	1 1 1		nable_		
35c	MISSING grow-	around F	loor tiles by	y water	2aSh		
55c	MISSING COVE	base thro	wahout '	**************************************			
52 P	arease tran	1	sh not wor	Kina			
	greate map	a walla	211 110 WOL	ring			
~ t	, ,		\				
Note	Discussed W/S	om / Manager	laettina are	rase tro	ro bu n	ish markin	
8.00	Lived - C	×0	566		1 - 4 0	(VIII)	
A1 1 -	Fixed as so			50 - 1 4 0			
Note	Discussed prop	Kr cooling	procedures.	Keep u	ncovered	135-70°F	a 2hrs
Note	1 11	1 1 1/	wer today	,	/		70-41
,-	at warewash			133.10	"J J."	raf	4
17.1-			1	11			
juote	Lameisha very	Knowledgeab		afety			
Note	Monthly Pest	Control. No	1550PC	•			
صلم		1 1 1	1 1	1			
10070	7est strips &	Thermon	eter available	ie			
note	Provided allero	ien Poster.					,
Dorcon in		0-	2-0			- 1/11/	210
		Mersia te				Date (9) (4)	77
Inspector	(Signature)					Date 6/4/	29
	\sim					77	

Risk Category: 4 Food Establ	lishn	nent l	nspecti	on Rer	ort		Page 1 c	of 7_
Establishment type: Permanent Temporary Mobile Other					1 1	24		
Establishment White Oaks		olary Cor	meeticar Head	Date: (9:00	(Ам)рм	Time Out_/0:	00 00
				Time In_	. 1	7	Time Out_ / O .	OO AM/PM
Address 230 Deming 5t.		JF		LHD V	of Inspect		outine) Pro	
Town/City Manchester	C	onnecticut I	Department			_	outine) Pro	e-op
Permit Holder Judy Hunting FOODBORNE ILLNESS RISK FA		of Public	Health	Reinspec		Other_	0	
Risk factors are important practices or procedures identified as the most prevalent cont								ss or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	tem	IN=i	n compliance	OUT=no	t in compliar	nce N/A=n	ot applicable N/	O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type IN OUT N/A N/O Supervision	Mark in	cos R		OS and/or F			during inspection Contamination	R=repeat violation v cos R
Person/Alternate Person in charge present	20000	Control overs	15 00 0			ated and prote		P/C O O
demonstrates knowledge and performs duties	Pf	00	009	80	Food-conta	ct surfaces: cl	leaned & sanitized	PPDC O O
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	00	17 00 0				rned, previously id unsafe food	POO
Employee Health	E 1989				Time/Temp	perature Cont	trol for Safety	
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	00			Proper cool	king time and	temperatures ares for hot holding	P/Pf/C O O
4 Proper use of restriction and exclusion	Р	00		500	Proper cool	ling time and t	emperatures	P O O
Written procedures for responding to vomiting and	Pf	00	21 00 8	200	Proper hot	holding tempe	ratures	POO
diarrheal events Good Hygienic Practices			22 8 9	200	Proper cold	holding temp marking and	eratures	P 0 0
6 Ø Proper eating, tasting, drinking, or tobacco products us	e P/C	00					ontrol: procedures	1 000000 PD 1 000 000
7 S No discharge from eyes, nose, and mouth	С	00	24 0 0		and records	3	lif	P/Pf/C O
Preventing Contamination by Hands 8	P/Pf	00	25 0 0			onsumer Adv	isory raw/undercooked food	Pf O O
No bare hand contact with RTE food or a	P/Pf/C		20 0			Susceptible F		Pf O O
pre-approved alternative procedure properly followed			26 0		Pasteurized for	oods used; prohib	oited foods not offered	P/C 0 0
10 Adequate handwashing sinks, properly supplied/accessible Approved Source	Pf/C	1010	27 0 0				oxic Substances	
11 Sood obtained from approved source	P/Pf/C	00				ves: approved ances properl	and properly used	
12 O Food received at proper temperature	P/Pf	00	28 0		stored & us	ed		P/Pf/C O
13 Food in good condition, safe, and unadulterated Required records available: molluscan shellfish	P/Pf					e with Approversity with variance	ved Procedures	PER STREET
14 O Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	00	29 0			P criteria/HA		P/Pf/C O
Good Patail Practices are proventative measures t	OD RE	TAIL P	RACTICES					
Good Retail Practices are preventative measures to Mark OUT if numbered item is not in compliance V=violation type Mark i			x for COS and			cted on-site duri		R=repeat violation
OUT N/A N/O Safe Food and Water	V	COS R	7 7			r Use of Uten		V COS R
30 Pasteurized eggs used where required 31 Water and ice from approved source	P	00			ls: properly			000
32 Variance obtained for specialized processing methods	P/Pf/C Pf	00	44 O Ute	ensils/equip	ment/linens:	properly stored	, dried, & handled / stored & used	Pf/C O O
Food Temperature Control				oves used		irtioles. property	stored & used	C 0 0
Proper cooling methods used; adequate equipment for temperature control	Pf/C	00				sils and Equ		
34 O Plant food properly cooked for hot holding	Pf	00				act surfaces cl ructed, and us		P/Pf/C O O
35 O O Approved thawing methods used	Pf/C	00	10 W				tained and used;	1500
36 Thermometers provided and accurate	Pf/C	00	cle	eaning age	nts, sanitize	ers, and test st		Pf/C O O
Food Identification [37] Food properly labeled; original container	PIC	00	49 X NO	on-food cor	ntact surface	es clean hysical Facili	itios	
Prevention of Food Contamination) _ [_	50 O Ho	ot and cold	water availa	able; adequate	e pressure	Pf 00
38 Insects, rodents, and animals not present 39 Contamination prevented during food preparation, storage & display		00	51 O Plu	umbing ins	talled; prope	er backflow de	evices	P/Pf/C O O
40 Personal cleanliness		00		wage and	waste water	r properly disp	osed upplied, & clean	P/Pf/C O O
41 Wiping cloths: properly used and stored	С	00	54 O Ga	arbage and r	refuse proper	rly disposed; fa	cilities maintained	Pf/C 0 0
42 Washing fruits and vegetables		00	55 O Ph	nysical facil	ities installe	d, maintained	, and clean	P/Pf/C O O
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable.	56 O Ad	iequate ver atural rubbe	ntilation and	l lighting; designed not used no	gnated areas used er CGS §19a-36f	c 0 0
Borgan in Charge (Simply)	25/	74	Violations	documen	ited		corrections due	#
Person in Charge (Signature)		Z 1	Priority Ite	m Violation	ns em Violation		10101	0
Person in Charge (Printed) UUCH HWHNG	~		Core Item	Violations		-	115/24	-2
Inspector (Signature)	75	174	Risk Facto	r/Public He	ealth Interve	ention Violation	ns	2
	~	100	Good Reta	sk ractor/F	oblic Health Subjections	h Intervention	violations	7
Inspector (Printed) Jose Ramirez			Requires	Reinspect	ion - check	hox if you int	tend to reinspect	
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	Directo	or of He	rect any insp	pection vic	plation iden	tified by the for	ood inspector or to	o hold, destroy,

	Foo	d Estal	olishment Insp	ection I	Report Page 2	of <u>2</u>
	anchester		Inspection Report Continuation S	Sheet	Date 6/25/	24
Establish	ment White Oc	2K5	Town Manch	nester_		
			TEMPERATURE OBSE	RVATIONS	No. 62 aprelia de la composição de la comp	
Item	/Location/Process	Temp	Item/Location/Process	Temp	ltem/Location/Process	Temp
Hot ho	cas	135 F			Hand sink by coffee	102F
4 000	true 1311.	1001				AND THE REST
7 0001	110	77 E			lactic acid bucket	Tooppin
1 21 0	MIK	37F		-	emplayee BR SINK	118F
WIC	meat balls	38 F			•	
	Chicken	39F				
	Mixed fruit	38F				
	Sausage	39F			Dish machine 7/60F	► Dito in
WIF	ambient	15 F			L C	mp▶Rite. 🖁
		OBS	ERVATIONS AND CORRI	ECTIVE ACTI	ONS	cha mp:
Item Number	Violations cited in this	report must be	corrected within the time frames b	elow, or as stated	d in sections 8-405.11 & 8-406.11 d	ASS WHEN BLUE AR TURNS ORANGE SACETABLE CUMBO LA BARRA ZU CAMBIA A COLOR MARANIA 4605 4605 2106 21
	Justin CF	PM on s	site			100 1771 -
49C			ne unclean R			
49C			line unclean			
770	al I to I	1 100	THIC CHICARI	1.1	11. 6 1 1111 594	recze D
310	unlabeled	powl of	granulars al co	ookline	throughout unlabel squ	Hesl
16PF	table Mount	ted can	opener unclea	n '		111111111111111111111111111111111111111
1105			•			
1011	deli slicer	unclean	<u> </u>			
49C	WIC Fan	CAUPLS	unclean			
Bac			1			
790	WIL SHEW	ling und		7		
49C	Ceiling in	deu.	storage unclea	n K		
49C						
990	Cabinets by	30H 50	ve coffee unclean			
Note	Provided aller	gen Dost	TeCi			
Mote	No Cooking	c coolin	ant line cinc			
Vote	Tost stick	2 Hazi	g at time of instrumental	pection.		
Note	D: (0.) (0)	1001-1	Momente available	<u>. </u>	-1 1	
Mala	Ca. 1 1 1	dertted	can policy. Venter	cans.	stored in manager's	office.
1/0/2	Good hand wa	7	1			
note	Tropec Manin	gobser	ved 1 1		.10	
Person in	Charge (Signature)	Sho	MITT		Date 6/2	7/24
Inspector	(Signature)	6/	Eki V		Date 6/25 /	124
	0		\mathcal{O}		7 -1	

Manchester Health Department

CONT ST

479 Main Street Manchester, CT 06040

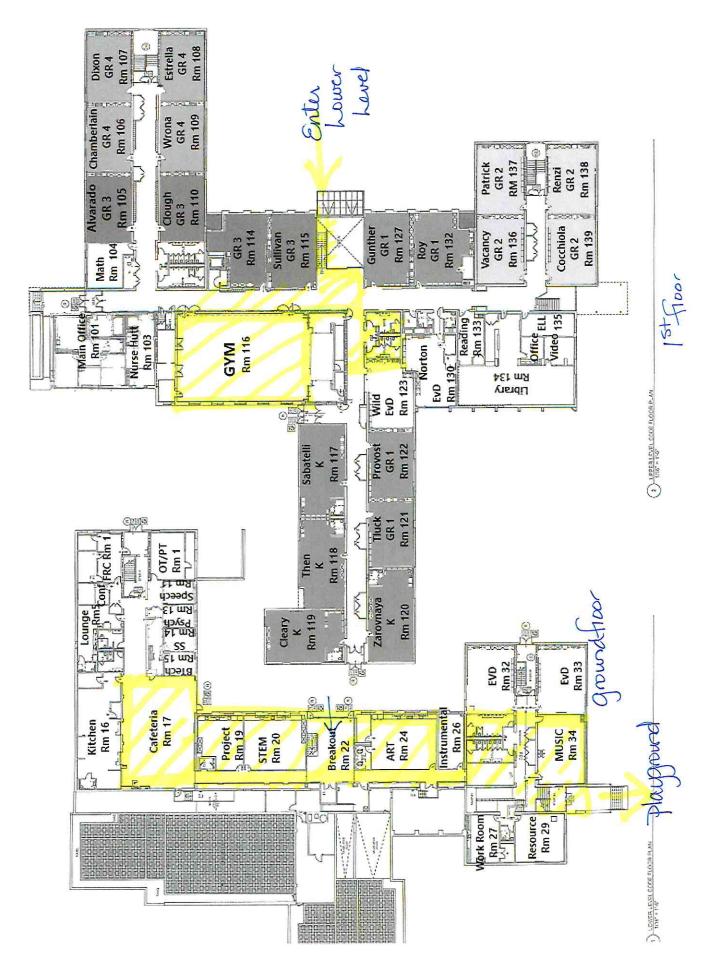
* XWalk-Thru

Establishment: Date of Inspection:							
Lakay Cuisine (old vics location) 6/27/2024							
temail copy of menu to Larandy @manchesterct.gov							
+Floors, Walls, ceilings to be repaired - Must be							
approved source							
tignts dangling from willing							
+no equipment on site							
-door in kitchen to be replaced							
-cove base required throughout							
-FRP needs trim - solid pvc throughout							
-pian review required - To scale 1/4"=1' minimum							
-application, 19 yout, menu, spec sheets for							
equipment required							
-no changes to be done until plan is approved							
by all depts							
- reach out to Fire, building, water/sewer for							
their requirements							
+ Narrative of what plan is at restaurant							
what will be done, from prepto serve to							
customer							
+36" required between equipment							
twalk in cooler required for proposed menu							
Initial (Inspector) L. b. Initial (Person in Charge)							

LOCAL HEALTH CHILD CARE FACILITY ENVIRONMENTAL INSPECTION REPORT INSPECTION DISPECTION COMPLAINT

Post Construction Remode Connecticut Office of Early Childhood - Division of Licensing 450 Columbus Boulevard, Suite 302, Hartford, CT 06103

	A 1400	<u></u>
Program Name:	License Number:	Date of 1-12-24
Bowers Elementary	70009	Inspection.
Address: 141 Princeton St	Expiration Date: July 2026	Capacity: TBD
Town: Wanchester	Telephone: 860 - 748 - 5377	Under Three Endorsement:
Operator:	# of Staff Present:	# of Children Present:
MELC John Layer		<u> </u>
Licensed For: Under Three (6wks-36m) Preschool (3	3y-5y) School Age (5y&up) 🗌 Ni	ight Care (6wks&up)
<u>Instructions:</u> Check = Compliance Circle = Non-Complia	nce 3 = Not Observed 4 = Not App	olicable
Physical Plant/Indoor Space 19a-79-7a	Health and Saf	fety 19a-79-6a
1 License premises clean/good repair 2 Equipment clean, in good repair, safe/non-toxic 3 Free from observable hazards	☐ 11 Refrigeration no more than ☐ 12 Food prep area clean/good r ☐ 13 Food safely stored ☐ 14 Food prep hand washing ☐ 15 Adequate dishwashing	
Water Supply in compliance with all PHC requirements 4a Customer of a Water Company Water Company Name: Town of Marchester Lead Water Test Date:	☐ 16. Kitchen separated ☐ 17 Mark as appropriate: ☐ Snacks served ☐ C	Cold breakfast Meals transported
☐ Within Limits ☐ Exceeds Limits -or- ☐ 4b On-Site Well Classification of Well – Check One: ☐ Public Well - Well supplies 25 or more adults and Children, daily at least 60 days per year. (If not, then private well) ☐ Private Well – Serves less than 25 adults & children	Building: Pre 1978 Construction No Lead-Based Paint Iden Lead Hazards Identified a (Plan of correction on file) Intact Lead-Based Paint Iden (Management Plan on file)	ntified nd Corrected with Local Health Dept.(LHD)) dentified
Review of Water Quality Test Results i. Lead Water Test Date:	Building: 1978 or newer Const	truction
□ Within Limits □ Exceeds Limits ii. Bacteriological Analysis Test Date: □ Within Limits □ Exceeds Limits iii. Chemical Analysis Test Date: □ Within Limits □ Exceeds Limits	2022-2023 Kem *New Lead Report Please check one of the	
Inspection of Well Well meets construction and separation distance requirements of CT Public Health Code Sections 19-13-B51a-m. ☐ Yes ☐ No	Approval recommended. No control Approval recommended with a Approval not recommended diviolations.	conditions (see below).
4c Other (Please specify)	Comments:	
Required toilets/sinks/supplies Adequate ventilation in toilet room Sewage disposal adequate	ALEAD - Leadinspector once complete.	tion to be approved only notal day
Outdoor Space 19a-79-7a 8 Swimming pool complies with PHC 19-13-B33b Playground free from observable hazards Drinking water available, adequate, safe		supplies in process
	Grant Check here if additional comm	nents attached ch in impact 20nes
Signed (Inspector) Signed (F	Person in Charge)	Date Corrections Due 2 weeks prior tous
3	3/9 - * Lower playon	ound Red Slide



11

Risk Category: Food Establ	iehn	nen	t In	en	eci	tio	n R	eno	rt		Page 1 of	2	
Establishment type: Permanent Temporary Mobile Other				.op			ate:		1 1	24			
		erite.	o Contract	dicut He			me I	n	/ /	AM/PM Time	Out		AM/PM
Establishment Oak Street Pub			BI		N. C. C.			<u>"</u>	1000	hantes	- -		WIAIL IAI
Address 30 Oak Town/City Manchester		إلا	PI	П			HD	se of	nspection	: Rautine	Pre-	-on	
Town/City 1 anches	0	onnecti	cut Dep	partme	nt				F) (2000)	Other		Op	
Permit Holder FOODBORNE ILLNESS RISK FA	ACTO	of Pu	ANI	nalth	IIRI	_		pectio					
Risk factors are important practices or procedures identified as the most prevalent conti						-					foodborne illnes	s or injury	
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it			_						compliance	N/A=not applic		=not ob:	
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in		_	te bo	x for	COS	and/	or R	COS=corre	cted on-site during i	nspection F	R=repeat	violation
IN OUT N/A N/O Supervision	٧	cos	R	98	-		N/A			ion from Contam	ination	-	COS R
1 O Person/Alternate Person in charge present,	Pf	0	0	-	_					d and protected		RC	00
demonstrates knowledge and performs duties		_		16	0	0	0	-		urfaces: cleaned		F(Pf)C	00
2 Certified Food Protection Manager for Classes 2,	С	0	0	17	0	0				tion of returned, p		P	00
3, & 4 Employee Health	-		1	-			DESCRIPTION OF THE PERSON OF T			litioned, and unsate			
Management food ampleyed and conditional ampleyed		T		18	0	0	0			time and temper		P/Pf/C	00
knowledge, responsibilities and reporting	P/Pt		0	_						ng procedures for			00
4 O O Proper use of restriction and exclusion	P	0	0	-						time and tempera			00
5 O Written procedures for responding to vomiting and	Pf		0		0	0	0	O Pro	per hot hole	ding temperatures		Р	00
diarrheal events	PI									Iding temperature		P	00
Good Hygienic Practices				23	0	0	0			arking and disposi		P/Pf	00
Proper eating, tasting, drinking, or tobacco products us		0		24	0	0	0			lic health control: p	procedures	P/Pf/C	00
No discharge from eyes, nose, and mouth	С	0		-				and	records				
Preventing Contamination by Hands 8	D/D	10		25		0		Cor		ry provided: raw/unde	rangkad food	Df	
No hare hand contact with DTE food or o			\subseteq	20		$\overline{}$		COI		sceptible Populat		Pf	00
pre-approved alternative procedure properly followed	P/Pf/C		0	26		0		Pas		used; prohibited food		P/C	00
10 O Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0							ives and Toxic S		1110	00
Approved Source			100	27	0	0		The second second		: approved and pr		P	00
11 O O Food obtained from approved source	P/Pf/C	0	0	20	0	0		To	xic substant	ces properly identi	fied,		
12 C Food received at proper temperature		f O	-	20		$\overline{}$			red & used			P/PI/C	00
Food in good condition, safe, and unadulterated	P/P	f 0	0							rith Approved Pro			
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29	0	0	0			th variance/specia		P/Pf/C	00
	OD RE	TAI	DD	ACT	TICE	-0		pic	cess/ROP	criteria/HACCP Pla	an		
Good Retail Practices are preventative measures to							s ch	emicals	and physic	al objects into foods			
	n appro							-	The state of the s	on-site during insp	1.01	R=repeat	violation
OUT N/A N/O Safe Food and Water	٧	cos	-	_	TUC					se of Utensils		V	COS R
30 Pasteurized eggs used where required	Р	0	0	43	0	In-us	se ute	ensils:	properly sto			С	00
31 Water and ice from approved source	P/Pf/C	0	0							perly stored, dried,		Pf/C	00
32 O Variance obtained for specialized processing methods	Pf	0	0							les: properly stored	& used		00
Food Temperature Control		-		46	0	Glov	es us	sed pro				С	00
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0	0	-		Foor	d ond	non f		s and Equipment surfaces cleanable			
34 O Plant food properly cooked for hot holding	Pf		_	47						ted, and used	e,	P/P(Ĉ	00
35 O Approved thawing methods used		0		-						alled, maintained	and used:	_~~	2000 000
36 O Thermometers provided and accurate		0		48						and test strips ava		Pf/C	00
Food Identification				49					ct surfaces			С	00
37 C Food properly labeled; original container	Pf/C	0	0						Phy	sical Facilities			
Prevention of Food Contamination				50	0	Hot:	and c	old wa	ter available	e; adequate press	ure	Pf	00
38 Insects, rodents, and animals not present		0	_							ackflow devices		P/Pf/C	00
39 Contamination prevented during food preparation, storage & display	P/Pf/C		_	52	0	Sew	age a	and wa	ste water pr	operly disposed			00
40 Personal cleanliness 41 Wiping cloths: properly used and stored	_	0	_	53	0	Toile	t faci	ilities:	properly cor	structed, supplied	l, & clean	Pf/C	00
42 Wiping cloths, properly used and stored	P/Pf/C	0		54		Garb	age a	ina retu	se properly o	disposed; facilities n maintained, and c	naintained	(0)	00
										hting; designated		C C	00
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is av	ailable	Э.	55	0	Nati	ral ru	bber l	atex aloves	not used per CGS	\$19a-36f		
1	11	21	T					nente		Date correc		T	#
Person in Charge (Signature)	110	7	t					tions			- 1	C	5
Person in Charge (Printed) Ten Donnell									Violations	July	21,24	,	1/
Person in Charge (Printed) IEN DONNELLY	-1						olatio		th Intervent	on Violations	• •	-	
Inspector (Signature) Leuse Tayne Date 7/1	11/2	14								on violations itervention Violation	ons	-	
00 0			\neg	God	od R	etail	Prac	tices V	iolations				8
Inspector (Printed) Denise Paynard				Red	quire	es R	einsp	ection	- check bo	x if you intend to	reinspect		
Appeal: The owner or operator of a food establishment aggrieved by the	his ord	er to	COTT	ect a	iny i	nspe	ection	viola	tion identifie	ed by the food ins	spector or to	hold, o	destroy,

1st - White: Health Department

Foo	d Esta	blishment Inspec	tion F	Report Page	of 3
LHD Manchester		Inspection Report Continuation Sheet		Date	1/24
Establishment OOK Stree	of Pub	Town Marche	ster		
		TEMPERATURE OBSERVA	TIONS		
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Marganne	40F			Hot water	IIIF
210	.1 -	No Hor Holding			
Cheeseslices	HIF	0			
Bacon	41F				
	OB	SERVATIONS AND CORRECT	IVE ACTIO	ONS	
Item Violations cited in this		corrected within the time frames below,			e food code.
Number					
540 Dumpster	Covers	sopen			
16PF ICE Mac 47c Toaster	hine	inter unclean			
HTC Tooster	00+	Same soio			
110 100570	101	oma e das			
				· · · · · · · · · · · · · · · · · · ·	
Treener -	meats,	Good stored prop	ser lu		
		1000 0000	J		
			20		
17: 1	10/-	`	0.0		
Keviewed:	14/12	forms with CF	PNI	Copies provided	
,	Allerg	ens - noton menu	e, lè	started.	
	dis	cussed ways to	inses	t into menu.	w
	Ca	npliance.			
	. 1	TAX 1	+ 00	7 0	
D' 1	47.13	process documen			
Discussed	- datu	narking -	KTEF	od / cays	
		<u> </u>		, ,	
		ALLOS A	011	ind	
Kitch	nen	Clean +Or	Just 1		
/			U	1 @	for T COV
				dpayne@manches	30.93
XX Mop Sink	-10sta	Modion - Conta	of I	Payne	
Person in Charge (Signature)		Donnelley		Date	
Inspector (Signature)	Trail	he -		Date 7///	124
opootor (orginature)	/ \wx			Date ///	101

Risk Category: 3 Food Establishment Inspection Report Page 1 of 2											
Establishment type: Permanent Temporary Mobile Other	1131111	ICIII		spec		9	, la la 1	rage i	01		
	1			Marian Control	- D	ate:	6/10/24		<u> </u>		
Establishment Teriyaki Madness		4seping	Connect	Healing.	Т	Time In 10 AM/PM Time Out /1 AM/PM					
Address 172 Demina St. Unit D				-	L	HD	manch	ester_			
Town/City Manchester	5				P	Purpose of Inspection: Routine Pre-op					
Permit Holder Ken Schanke	C	onnecticu of Pub	ut Dep	artment alth	R	einsp	ection	Other			
FOODBORNE ILLNESS RISK F									U SEGNACIONALIA		
Risk factors are important practices or procedures identified as the most prevalent con- Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it			200			-					
P=Priority item Pf=Priority foundation item C=Core item V=violation type				omplian			not in compliance	N/A=not applicable N sted on-site during inspection	O=not observed R=repeat violation		
IN OUT N/A N/O Supervision	V		R			N/A N/		ion from Contamination	v cos R		
1 Person/Alternate Person in charge present,	D4			15 🕡			> Food separated		P/C 0 0		
demonstrates knowledge and performs duties	Pf	0	의	16 🕏			Food-contact s	urfaces: cleaned & sanitized			
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	$\circ \parallel$	17	0			ion of returned, previously itioned, and unsafe food	POO		
Employee Health				YAUT				iture Control for Safety			
Management, food employee and conditional employee;	P/Pf			18	0	00		time and temperatures	P/Pf/C O O		
knowledge, responsibilities and reporting	000000000	423		19 🔾	0	0	Proper reheating	ng procedures for hot holding			
Proper use of restriction and exclusion	P	0	의	20 🔾	/	0	Proper cooling	time and temperatures	P 0 0		
Written procedures for responding to vomiting and diarrheal events	Pf	0	\circ	21 🗸	0		Proper hot hold		P 0 0		
/ Good Hygienic Practices	Sec. Marie			23	0			ding temperatures arking and disposition	P O O		
6 O Proper eating, tasting, drinking, or tobacco products us	e P/C	Total				1		ic health control; procedures			
7 O No discharge from eyes, nose, and mouth	С	0		24 🔾	0	(S)	and records	o negati control. procedures	P/Pf/C O		
Preventing Contamination by Hands					/		Cons	umer Advisory			
8	P/Pf	0	의	25 🗷	0	0		y provided: raw/undercooked food	Pf O O		
No bare hand contact with RTE food or a	P/Pf/C	0	oll	00	/			ceptible Population			
pre-approved alternative procedure properly followed Adequate handwashing sinks, properly supplied/accessible	Pf/C			26	0			used; prohibited foods not offered ves and Toxic Substances			
Approved Source	FIIC	LOI	-	27	0	0		approved and properly use			
11 500d obtained from approved source	P/Pf/C	Tot			/			es properly identified,			
12 O Food received at proper temperature			ăl	28	0		stored & used	co property identified,	P/Pf/C O		
13 Food in good condition, safe, and unadulterated	P/Pf	0		IO III			Conformance wi	ith Approved Procedures	THE PARTY OF THE PARTY.		
Required records available: molluscan shellfish	P/Pf/C	0	$\circ \parallel$	29 🔾	0	8		h variance/specialized	P/Pf/C O O		
identification, parasite destruction	OD RE	TAIL	DD	ACTIC	EC		process/ROP c	riteria/HACCP Plan			
Good Retail Practices are preventative measures to						ns. chei	micals, and physica	al objects into foods			
	in appro							on-site during inspection	R=repeat violation		
OUT N/A N/O Safe Food and Water	٧	cos	R	OUT				se of Utensils	V COS R		
30 Pasteurized eggs used where required	Р			43 🔾	In-us	se uter	nsils: properly stor	red	c 0 0		
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C		의	44 0	Uten	sils/equ	uipment/linens: prop	perly stored, dried, & handled	Pf/C O O		
32 Variance obtained for specialized processing methods Food Temperature Control	Pf	0	의	10	01		- DE DE ROCKED - SERVE	es: properly stored & used	P/C O O		
Droppy applies matheds west advantage in the		Т		46	GIOV	es use	ed properly	s and Equipment	C O O		
temperature control	Pf/C	0			Food	d and r	non-food contact s	surfaces cleanable.			
34 O Plant food properly cooked for hot holding	Pf	0	0	47 🔾	Section 2		esigned, construct	Annal Prince and the Annal Anna	P/Pf/C O		
35 O Approved thawing methods used		0		48 🔾				alled, maintained and used;	D5/0		
36 C Thermometers provided and accurate	Pf/C	0						and test strips available	Pf/C		
Food Identification 37 Food properly labeled; original container	Drio			49 0	Non-	-food c	contact surfaces c		_ C O O		
Prevention of Food Contamination	Pt/C	0		50	Llot.	and as	Phys	ical Facilities	1515		
38 Insects, rodents, and animals not present	Pf/C	0					nstalled; proper ba	; adequate pressure	Pf O O		
39 Contamination prevented during food preparation, storage & display	P/Pf/C						nd waste water pro		P/Pf/C O O		
40 Personal cleanliness		0						structed, supplied, & clean	Pf/C O O		
Wiping cloths: properly used and stored Washing fruits and vegetables	(c)	0		54)	Garb	age an	d refuse properly di	isposed; facilities maintained	000		
42 Washing fruits and vegetables	P/Pf/C	0		55 0	Phys	sical fa	cilities installed, n	naintained, and clean	P/Pt/C O O		
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ailable.		56 🔾	Ade	quate v	ventilation and ligh	nting; designated areas used not used per CGS §19a-36f	c 00		
Person in Charge (Signature) Must Some Date 61	101	2		Violation Priority	ons c	locum	ented	Date corrections due	#		
Person in Charge (Printed) Davin Sumuels				Priority Core Ite	Four	ndation	Item Violations	9/10/24	2		
Inspector (Signature) L. GMMUY Date 6/11	1/24			Risk Fa Repeat	ctor/ Risk	Public Facto	Health Intervention		=		
Inspector (Printed) Lallen of and/	Tel			Good F Requir	Retail es R	Praction Pra	ces Violations ection - check box	x if you intend to reinspect	2		
Appeal: The owner or operator of a food establishment aggrieved by the or dispose of unsafe food, may appeal such order to the	his orde	er to c	corre	ct any	inspe	ection	violation identifie	d by the food inspector or	to hold, destroy,		

Foo	d Esta	blishmer	t Inspe	ction F	Report	Page 2	of <u>2</u>
LHD Manches ter		Inspection Report	Continuation Shee	et		Date 6/10/2	024
Establishment Teriyaki A	1adhei	Town	Manche	ster			
Item/Location/Process		TEMPERATU	JRE OBSERV	ATIONS		antian (Danasaa	
Chicken - Cooked	Temp 4 F	white riu		Temp 160F		ecation/Process Chandwash	103 F
NIC	36F	intemal cr brown ric	l in hot.	196F	quat sai	nitizer	700 DON
wic Chicken raw Squash (zvonini cut)	38 F	0.1000	hold				55.77
Squasi (200111111CVT)	39F	2 door Free	erer	-2F			
Item Violations cited in this	OE report must b	SERVATIONS A	ND CORRECT	V. or as stated	ONS in sections 8-40	05.11 & 8-406.11 of the	e food code
Number CFPM: KEN					111 000110110 0 470	70.11 Q 0 400.11 OI UIC	, 100d code.
notex Thermometer	11.40						
good labelir			a avail	able n	n Food	product	
good coveri	madt	and produ	ct throw	ahaut	1.7.000	7.0000	
Test Strips av	atabl	0	V1 11 V	9 110 0			
		~					
54 c cleaning equ	ipmen	t lbrooms) stored	on Floo	r/hein	a stored o	'n
piping by m	nop Sin	K				J	
11c wiping cloth	ns Idan	1p) notsto	red in so	nitire	r betw	een uses	
		96)					
okay per H	ealth	Dept to	Open th	1s da	y; F00	dservice	
okay per H licunse prov	rided t	his day.	Réach out	-tu Fir	e/build	ding for a	porovals
							1
very dean t staff knowi	- organ	nired					
staff knowi	edgab	ve intood	Satt	1			

Person in Charge (Signature) hr Thum

Risk Category: 3 Food Estab		1				. 2			
	iisnn	nent i	nspect	on Report	Page 1 c	#			
Establishment type: Permanent Temporary Mobile Other	1			Date: 6/27/24					
Establishment EISOLDEII		Heeping Con	ection Healify	Time In 1 A	M/PM Time Out 12.	30 AM/PM			
Address 631 Mainstreet		DP	H)	LHD Manche	ster				
TOWN/City Manchester			Purpose of Inspection: Routine Pre-op						
Permit Holder Javier - Noton sitt	Co	onnecticut D of Public	feelth Reinspection Other It NOU 10 1						
FOODBORNE ILLNESS RISK FA	ACTO	RS AN	D PUBL	IC HEALTH INTERVE	NTIONS				
Risk factors are important practices or procedures identified as the most prevalent cont Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it		Allega and the state of the state of			AND THE RESERVE OF THE PERSON	Company of the Compan			
P=Priority item Pf=Priority foundation item C=Core item V=violation type			compliance			O=not observed			
IN OUT N/A N/O Supervision	V	COS R			on from Contamination	R=repeat violation v cos R			
7 7 77				Food separated		PICOO			
demonstrates knowledge and performs duties	(Pf)				rfaces: cleaned & sanitized	Pripric O O			
Certified Food Protection Manager for Classes 2,		00	17 00	The state of the s	on of returned, previously				
0, 0, 7	(0)		17 00	J 1000 000000	ioned, and unsafe food	POO			
Employee Health			/		ure Control for Safety				
Management, food employee and conditional employee;	P/Pf	00		O Proper cooking t	ime and temperatures	P/Pf/C O O			
knowledge, responsibilities and reporting 4 Ø O Proper use of restriction and exclusion	-			O Proper reheating	procedures for hot holding				
Written procedures for responding to year thing and	Р	00		Color Proper cooling ti	me and temperatures	P 0 0			
5 Ø O diarrheal events	Pf	00		Proper cold hold		POO			
Good Hygienic Practices	3		23 0 0	Proper date man	king and disposition	P/PT O O			
(6) Proper eating, tasting, drinking, or tobacco products us	e PIC	00	1	Time se e public	health control: procedures				
Y O No discharge from eyes, nose, and mouth	C	00	24 0	and records	noona on procedures	P/Pf/C			
Preventing Contamination by Hands			1	Consu	mer Advisory	USAYARIFA FELL			
8 Hands clean and properly washed	P/Pf	00	25 🕏 🤇	Consumer advisory	provided: raw/undercooked food	Pf OO			
9 No bare hand contact with RTE food or a	P/Pf/C	00		/ Highly Susc	eptible Population				
pre-approved alternative procedure properly followed	_	,	26 0	Pasteurized foods u	sed; prohibited foods not offered	P/C O O			
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	X 0		Food/Color Additiv	es and Toxic Substances				
Approved Source		_	2708	Food additives: a	approved and properly used	POO			
Food obtained from approved source		00	28 00 0		s properly identified,	P/Pf/C O O			
13 Food received at proper temperature Food in good condition, safe, and unadulterated		00		stored & used		1111000			
Required records available; molluscan shallfish	(P)Pf	00			h Approved Procedures				
identification, parasite destruction	P/Pf/C	00	29 0		variance/specialized teria/HACCP Plan	P/Pf/C O O			
	OD RE	TAIL P	RACTICES		teria/ IACCF Fiail				
Good Retail Practices are preventative measures to	o contro	I the addi	tion of patho	gens, chemicals, and physical	obiects into foods.				
			for COS and			R=repeat violation			
OUT N/A N/O Safe Food and Water	V	COS R	OUT		of Utensils	V COS R			
30 Pasteurized eggs used where required	Р	00		-use utensils: properly store		000			
31 Water and ice from approved source	P/Pf/C	00	44 O U	tensils/equipment/linens: prope	erly stored, dried, & handled	Pf/C O O			
32 O Variance obtained for specialized processing methods	Pf	00	45 O Si	ngle-use/single-service articles	s: properly stored & used	P/C 0 0			
Food Temperature Control			46 O G	loves used properly		000			
Proper cooling methods used; adequate equipment for	Pf/C	00			and Equipment	15 1 1 1 1 2 2 2 2			
temperature control		00000 0000		ood and non-food contact su		PPCOO			
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf			operly designed, constructe		PIPICO			
	Pf/C		48 O W	arewashing facilities: install	ed, maintained and used;	Pf/C O O			
Thermometers provided and accurate Food Identification	(Pf)C	00		eaning agents, sanitizers, ar					
Food identification [37] Food properly labeled; original container	Def	00	49 ON	on-food contact surfaces cle		C 00			
Prevention of Food Contamination	FIC	00	50 0 4	ot and cold water available;	cal Facilities				
38 Insects, rodents, and animals not present	Pf/C	00		lumbing installed; proper bar		Pf O O			
39 Contamination prevented during food preparation, storage & display		00		ewage and waste water properties		P/Pf/C O O			
40 Personal cleanliness	Pf/C	00	53 08 T	pilet facilities: properly const	ructed supplied & clean	PF/C O O			
41 Wiping cloths: properly used and stored	С	00	₹ 0 G	arbage and refuse properly dis	posed: facilities maintained	Vc_00			
42 Washing fruits and vegetables	P/Pf/C	00	(55) X PI	hysical facilities installed, ma	aintained, and clean	P/PfC O			
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ilable.	(56) X A	dequate ventilation and light	ing; designated areas used	800			
Person in Charge (Signature) and Hamos Date (0 -	771	14	Violation	atural rubber latex gloves no s documented	Date corrections due	#			
0 0 000	LTI	-	Priority Fo	em Violations oundation Item Violations	7/1/24	5			
Person in Charge (Printed) Tank Rangel	7/24		Risk Facto	Violations or/Public Health Intervention	9 / 27 / 24 Violations	7 9			
Inspector (Signature) 7 . SPIM Date 10 / L	114		Repeat R	isk Factor/Public Health Inte ail Practices Violations	rvention Violations				
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to cor	Requires	Reinspection - check box	if you intend to reinspect	a bald distin			
or dispose of unsafe food, may appeal such order to the	Directo	or of Hea	ith, not late	er than forty-eight hours aff	ter issuance of such order	moid, destroy,			

reinspection: Monday july 1st 2024

1st - White: Health Department

Page Z of 3Food Establishment Inspection Report LHD Manchester Inspection Report Continuation Sheet reinspect 1/1 Establishment EL (0) Deli Town Manchester Item/Location/Process Item/Location/Process Temp Item/Location/Process Temp MF Bay Marie pico Bay Marie ADF handunk nico 1000ppm 38F internal chicken 41F empanado 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 IDPF stored in nandwash sink (cos mentstored on floor in mop room stored on soda in back holding temperature - pilo empañada 55F, 4 containers sour cream all food product discarded voluntarily harge-owner to piace work order for repai at 56F-discarded voluntar indispenser in restroom in dispenser in restroom - on order preptable not under hood-to heremoved from

 $3_{\text{of}} 3$ Food Establishment Inspection Report Inspection Report Continuation Sheet LHD MANCHESTER Date Establishment ELSOI Dell Town Manchester Item/Location/Process Temp Item/Location/Process Temp Item/Location/Process **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 noice Machine -ice being made in Freezer-not approved 4) discussed commercial NSF or equivalent ice Machine clutter/trash bags beingstored in basement - remove clutter Itrash coffee with out lid stored on preptable while making empanadas Notex Health Dept requested CFPM to be present - not available ng time of inspection cooling, not holding, reneating at time of inspection Staff (at least 2) that is on site, 30 hrs or more per week position must obtain CFPM in Follow-up on cookles at Front of house Functioning properly ambient @ 39F - okay to use manchesteret gov when thermometer not Elasing carrectly - discusse

Person in Charge (Signature)

Risk Category: 3 Food Establ	lichn	aont	Inci	oooti.	on Don	na mi	Page 1	of 2
	1151111	leiit	1115	Jecu	on Kep	118/2024		oi <u>J</u>
Establishment type Permanen Temporary Mobile Other					Date:			
Establishment NOODLES + COMPANY	-	#sering C	omecticut	Nealing.	Time In_	11 CAM/F	PM Time Out	AM/PM
Address 1442 C pleasant valle V Ra			H		LHD M	anches	tek	
Town/City Manchester					Purpose	of Inspection:	Routine	e-op
Permit Holder MANAMMED	C	onnecticut of Publ	Departn ic Health	nent	Reinspec	ction O	ther	W
FOODBORNE ILLNESS RISK FA								
Risk factors are important practices or procedures identified as the most prevalent cont Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it		72.55		ne iliness o				ess or injury. /O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in						on-site during inspection	
IN OUT N/A N/O Supervision	V	cos			UT N/A N/O		rom Contamination	V COS R
1 Person/Alternate Person in charge present,	24		15			Food separated and		P/C 0 0
demonstrates knowledge and performs duties	Pf	0	16	600			ces: cleaned & sanitized	
2 Certified Food Protection Manager for Classes 2,	С	0) 17	9			of returned, previously	POO
3, & 4		\square					ed, and unsafe food	FOO
Employee Health		г					Control for Safety	
Management, food employee and conditional employee;	P/Pf	00)			Proper cooking time		P/Pf/C O O
knowledge, responsibilities and reporting Proper use of restriction and exclusion	Р	0	19				ocedures for hot holding	
Written procedures for responding to vomiting and		0				Proper cooling time Proper hot holding t		P O O
diarrheal events	Pf	0	21	00		Proper cold holding		PXO
Good Hygienic Practices			73		00	Proper date marking	g and disposition	P/PT O O
6 O Proper eating, tasting, drinking, or tobacco products us	e P/C	00	24				ealth control: procedures	
7 O No discharge from eyes, nose, and mouth	С	0	5 24			and records		P/Pf/C
Preventing Contamination by Hands	Na III					Consume	r Advisory	
8	P/Pf	0	25	00			vided: raw/undercooked food	Pf OO
9 No bare hand contact with RTE food or a	P/Pf/C	00		TETE		 Highly Suscept 	tible Population	
pre-approved alternative procedure properly followed Adequate handwashing sinks, properly supplied/accessible	1000		26				; prohibited foods not offered	
Adequate handwashing sinks, properly supplied/accessible Approved Source	PIC	1010		1010			and Toxic Substances	
11 S C Feod obtained from approved source	DIDIIC	00	27		The second second		proved and properly use	
12 O Food received at proper temperature		0		09		Toxic substances particles and stored & used	горепу ідепшіед,	P/P/ICO
13 5 Cood in good condition, safe, and unadulterated	P/Pf						Approved Procedures	
14 O Required records available: molluscan shellfish	P/Pf/C	0	29			compliance with va		D/D/IO
identification, parasite destruction						process/ROP criteri	ia/HACCP Plan	P/Pf/C O O
GO(OD RE	TAIL	PRAC	TICES				
Good Retail Practices are preventative measures to Mark OUT if numbered item is not in compliance V=violation type Mark it								
Mark OUT if numbered item is not in compliance V=violation type Mark i OUT N/A N/O Safe Food and Water	n appro	cos i		COS and	d/or R	COS=corrected on-si		R=repeat violation
30 Pasteurized eggs used where required	P	0		OUT	uca utanci	Proper Use of ls: properly stored	Utensiis	V COS R
31 Water and ice from approved source	P/Pf/C						stored, dried, & handled	C O O
32 O Variance obtained for specialized processing methods	Pf	0					roperly stored & used	P/C O O
Food Temperature Control			1 40	00	loves used	N. VANGESAN DVSD (1902)		000
Proper cooling methods used; adequate equipment for	Pf/C						d Equipment	
temperature control			_ 1/17			n-food contact surfa		p66000
34 O Plant food properly cooked for hot holding	Pf	0				gned, constructed, a		.000
35 O Approved thawing methods used 36 Thermometers provided and accurate		00					, maintained and used;	Pf/C O O
36 Thermometers provided and accurate Food Identification	Pt/C	0	2	Cle			test strips available	
Food properly labeled; original container	DEC	00	7 49	NINC	Jil-100d COT	ntact surfaces clean	Facilities	600
Prevention of Food Contamination	-1.6		50	OH	at and cold	water available; ade		Df O
38 Insects, rodents, and animals not present	Pf/C	00				talled; proper backfl		Pf 0 0
39 Contamination prevented during food preparation, storage & display	P)Pf/C	00	52			waste water properl		P/Pf/C O O
Personal cleanliness	PI/C	00	53				ted, supplied, & clean	Pf/C O O
Wiping cloths: properly used and stored	(0)	0	54				sed; facilities maintained	c 00
Washing fruits and vegetables	P/Pf/C	0		O Pr	nysical facil	ities installed, maint	tained, and clean	P/Pf/COO
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable.	56				; designated areas use sed per CGS §19a-36f	
Person in Charge (Signature) CMA FIL Date 7/8	3/20			olations	s document m Violation	nted 1	Date corrections due	#
Person in Charge (Printed)			Pri	ority Fo	undation It	em Violations	7/11/24	1
1 Phase of 1st -10	1100	126	Ris	sk Facto	Violations or/Public He	ealth Intervention Vi	iolations	3
Inspector (Signature) T. STUTION Date 18	120	14	Go	od Reta	ail Practice	Public Health Interve s Violations		12
Appeal: The owner or operator of a food establishment aggrieved by the	his orde	er to co	Re	anv ins	Reinspect	tion - check box if y	you intend to reinspect	1
or dispose of unsafe food, may appeal such order to the	Directo	or of H	ealth.	not late	er than fort	v-eight hours after	issuance of such orde	er

reinspection 7/11/24

1st - White: Health Department

grade

Person in Charge (Signature)

Inspector (Signature)

With

Date

Foo	d Esta	ablishmer	nt Insped	ction F	Report Pa	ige of
LHD Manchester		Inspection Report	Continuation Shee		Date	18/2024
Establishment NOODICS T	-compa	9	Manch			
			URE OBSERV	A CONTRACTOR OF THE PARTY OF TH		
Item/Location/Process	Temp	Item/Location	on/Process	Temp	Item/Location/Pro	
1A) LC					Incit water h	.S. Front 85F
Strak ting	40F	2 Door read	hin	365	inst MATER I	his 87P
garlic cream	395	1 cheese		201	101 00 001 01	11102
enicken tender		· creex	707	57'	and canificati	5 A OL 1-
enionen Tuna er	39F				quat sanitizer	400 ppm
Dasta	40F				13 ban	
Hot Water-womens	85P					
HOT WATER-MENC	INIF					Temp▶Rite. §
110. 1000 01 1. 0113	OE	SERVATIONS A	ND CORRECT	TIVE ACTIO	ONS	Date: Fecha Emp:
Item Violations cited in this	report must b	e corrected within the	time frames below	v, or as stated	in sections 8-405.11 & 8-40	D6.11 C PASS WHEN BLUE
Number						ES ACEPTABLE CUANDO LA BARRA AZUL CAMBIA A COLOR HARANIA
	- B					160°F/71°C
good equipr	nent/	utensil	STORAME	.s		
J 10 P			Joseph			
	-					
	N	\sim				
Person in Charge (Signature)	Ime	ifee			Date	7/8/24
Inspector (Signature)	TOMONE	K			Data	118121114

Risk Category: 3 Food Estab	lishn	nen	t Ir	nspect	ion Re	port	Page 1 c	of _3_	-	
Establishment types Permanent Temporary Mobile Other					Date: (126/24				
Establishment peoples (no)(0)		Serie	Conite	estican Health	Time In		MPM Time Out 12:	00	AM	PM
Address 179 middle Toke West				LI	LHD		ester			Ö
11000000000						e of Inspection:		e-op		
		onnectic	ut De	partment			Other TEINSOLCTIO		10-	10
Permit Holder BOODBORNE ILLNESS RISK F		of Pu	blic H	ealth	Reinspe			ш	D	12
Risk factors are important practices or procedures identified as the most prevalent cor	ntributing fa	ectors o	f foor	thorna illnass	or injuny Inte	DIGITINIER OF CONTROL	I moscures to propert feedbarns illes	on or lakes		
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered		1000	V = 2.00	compliance	The state of the s	not in compliance	36 A AGE - 01 964 567 567			- d
P=Priority item Pf=Priority foundation item C=Core item V=violation type								O=not ob		
IN OUT N/A N/O Supervision	V	cos	-				ted on-site during inspection on from Contamination	R=repea	_	_
Person/Alternate Person in charge present		000			N/A N/O	Food separated		P/C	cos	
demonstrates knowledge and performs duties	Pf	0	0		\$ 0		urfaces: cleaned & sanitized	R/PMC		00
2 Certified Food Protection Manager for Classes 2,							on of returned, previously		1	
3, & 4	С	0	0	17			tioned, and unsafe food	P	0	0
Employee Health				/			ture Control for Safety		TI BI	TA L
Management, food employee and conditional employee;	P/Pf	0			000	Proper cooking	time and temperatures	P/Pf/C		
knowledge, responsibilities and reporting	TSAN C		\subseteq				g procedures for hot holding	P	0	0
Proper use of restriction and exclusion	P	0	0	20	000	Proper cooling t	ime and temperatures		0	
5 Written procedures for responding to vomiting and	Pf	0	0			Proper hot hold			0	
diarrheal events			_	22		Proper cold hold	ding temperatures		0	_
Good Hygienic Practices 6 O Proper eating, tasting, drinking, or tobacco products us	T5:5			23			rking and disposition	P/Pf	0	0
6 O Proper eating, tasting, drinking, or tobacco products us 7 O No discharge from eyes, nose, and mouth		-	-	24 0			c health control: procedures	P/Pf/C	0	0
Preventing Contamination by Hands	_ C	0	\subseteq			and records		1		
8 O Hands clean and properly washed	D/Df	0	0	25 0			ımer Advisory	T 50	10	Т.
No hare hand contact with RTE food or a	FIFT		\subseteq	23			provided: raw/undercooked food	Pf	10	0
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 6			ceptible Population used; prohibited foods not offered	DIC	10	
10 Adequate handwashing sinks, properly supplied/accessible	PC	10	0	20 0	E		ves and Toxic Substances	P/C	0	10
Approved Source	- 1.00		_	27 0			approved and properly used	In	0	
11 Sood obtained from approved source	P/Pf/C	101	0			Toxic substance	es properly identified,			
12 O Food received at proper temperature		0		28		stored & used	es property identified,	P/Pf/C		0
13 Food in good condition, safe, and unadulterated		0	_	, (V-1II)	/(th Approved Procedures		-	_
14 O Required records available: molluscan shellfish						Compliance with	n variance/specialized	_	_	T
identification, parasite destruction	P/Pf/C	0	9	29			iteria/HACCP Plan	P/Pf/C		0
				RACTICES				e e a que e		20
Good Retail Practices are preventative measures	to contro	I the a	ndditi	on of patho	gens, chem	nicals, and physical	objects into foods.			
	in appror	priate	box	for COS an	d/or R	COS=corrected	on-site during inspection	R=repea	t viola	ation
OUT N/A N/O Safe Food and Water	V	cos	R	OUT			e of Utensils	V	cos	R
30 Pasteurized eggs used where required	P	0	_	43 O Ir	n-use utens	sils: properly store	ed	С	0	0
31 Water and ice from approved source	P/Pf/C	_	0	44 O U	Itensils/equi	ipment/linens: prop	erly stored, dried, & handled	Pf/C	0	
32 O Variance obtained for specialized processing methods	Pf	0	0				es: properly stored & used	P/C	_	
Food Temperature Control Proper cooling methods used; adequate equipment for				46 0	loves use			C	0	0
temperature control	Pf/C	0	\circ		and and a	Utensils	and Equipment	-		
34 O Plant food properly cooked for hot holding	Pf	0					urfaces cleanable,	P(Pf)C	0	0
35 O Approved thawing methods used	Pf/C		8			signed, constructe	lled, maintained and used;	1.0	+	-
36 Thermometers provided and accurate	Pf/C		3				and test strips available	Pf/C	0	0
Food Identification		-		10 X N	lon-food co	ontact surfaces cl	oon	(0)		
Food Identification 37 Food properly labeled; original container	PfC	0	0	49	1011-1000 60		ical Facilities		10	0
Prevention of Food Contamination	-0	191	$\stackrel{\smile}{-}$	50 O F	lot and cole		adequate pressure	Pf	10	
38 Insects, rodents, and animals not present	Pf/C	0	0	51 O P	lumhing in	stalled; proper ba	eckflow devices	P/Pf/C		
39 Contamination prevented during food preparation, storage & display	P/Pf)C			(52) XX S	ewage and	d waste water pro	nerly disposed	P/Pf/C	\leq	0
40 Personal cleanliness	Pf/C	0	0				tructed, supplied, & clean	Pf/C		
41 Wiping cloths: properly used and stored	С	0	0				sposed; facilities maintained	C	0	
42 Washing fruits and vegetables	P/Pf/C	0		(55) X P	hysical fac	cilities installed, m	naintained, and clean	P/PfC	D	0
Permit Holder shall notify customers that a copy of the most recent inspection rep	nort is ava	ilable		56 O A	dequate v	entilation and ligh	ting; designated areas used	C	0	
	701115 410	anabic.	·//)				ot used per CGS §19a-36f		-	
Borrow in Charge (Signature)	SITT	11	- 1		s docume		Date corrections due		#	
Person in Charge (Signature)	15/18	4			em Violatio		— ————————————————————————————————————		-	
Person in Charge (Printed) Cavic La /a/190	10	n.				Item Violations	7/5/24		6	
1 About All 1	× 1-1		\dashv		Violations	s Health Interventio	9 126124		6	
Inspector (Signature) 7 . Date 6 11	lo 174			Repeat R	lisk Factor	Public Health Intervention	n Violations ervention Violations		5	
LALIKAD CHANALI	-1-1			Good Re	tail Practic	es Violations	- J. Mon. Violationio	1	7	_
Inspector (Printed) [Q]) [EY] [TQY]QQ				Requires	Reinsped	ction - check box	if you intend to reinspect	+ -	V	
Appeal: The owner or operator of a food establishment aggrieved by	this orde	er to d	corre	ect any in	spection v	iolation identified	by the food inspector or to	o hold o	destr	'OV
or dispose of unsafe food, may appeal such order to the	e Directo	or of h	lea	Ith, not lat	er than for	rty-eight hours a	fter issuance of such order	,		-31

Food Establishment Inspection Report LHDMANCHESTE Inspection Report Continuation Sheet Date Establishment_Dennieschnice Town Manchestt Item/Location/Process Item/Location/Process Item/Location/Process loor undercounte handulashsink AOF 39F internal chix wing **OBSERVATIONS AND CORRECTIVE ACTIONS** Item Number

Temp 98F Atasa Freezer 39F 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. nozzies not clean 10 C not secure to wall in back room back room- 17 not being used Person in Charge (Signature) Inspector (Signature)

HD Manchester		Inspection Report Continuation Sh	eet	Date <u>6/26/2</u>	4
stablishment Ploples		Town Manch	ester	~ ~	
stabilishinent p (OV/C)	31.0.00	TEMPERATURE OBSER			
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
NIC	205				
yarınara	38F				
nicken wing Sinternal	167F				
		SERVATIONS AND CORRE			
Item Violations cited in t Number	this report must be	e corrected within the time frames bel	ow, or as stated ir	n sections 8-405.11 & 8-406.11 of the	e food code.
55c cove base	nv 3 hav	ynot secured to	111011		
	arar bo	avily gauged	00411		
The Country or	ulus IIt	uviry gargea			
Vilat Carry - arta	4	1			
lotex serv sate					
Itex discussed	dateM	arking			
otex Food aller	ray not	ta on site.			
		iconol Wipes ave	rilabio.	FAY TOMOS AL FA	nd prad
V V V V V V V V V V V V V V V V V V V	0.010 700	i cor vo i p co ovo i	A T T T T T T T T T T T T T T T T T T T	101.01110001100	upru
550 FLANK CRACK	ed hun	rencial - decres	ad man	MA -hallung Tana	
Pare Findly Flins	Cu by p	repaine - du cuss	ta muni	ng snewing temp	onany
8 PF Fruit Flies					
4 reach of	it to pest	control company	for bocked	w extermination	n
	12 			am 15	
* circled viol	ations n	of corrected at ti	me of ir	rspection 7/5/24	4
continue -	to clean	/ work on coming	into co	mpilance by	
next inspe	ction.				
- Inope	VI.VII.				
		^			
	/				

Risk Category: 3 Food Estab	sk Category: 3 Food Establishment Inspection Report Page 1 of 3										
Establishment type: Permanent Temporary Mobile Other_					- Date	e: 7/18	12024	t. -			
Establishment SONIC		+espine	Conne	cticut Health	Tim	e In 10	AM	PM Time Out_	11:30 (AM)PM		
Address 90 BUCKLAND STreet			D	H)	LHE	mai	nche	ster			
Town/City Manchester					Pur	pose of Ins	pection:	Routine	Pre-op		
Permit Holder Chad -CFPM		of Pul	blic He			nspection			cotion 7/23/2		
FOODBORNE ILLNESS RISK F	ACTO	RS A	ANI	D PUB	LIC H	EALTH IN	ITERVEN'	TIONS			
Risk factors are important practices or procedures identified as the most prevalent con	ntributing fa	actors o	f food	lborne illne:	ss or injur	y. Interventions	s are control me	asures to prevent foodborr	ne illness or injury.		
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered	item	IN	l=in	complian	ce O	UT=not in cor		N/A=not applicable	N/O=not observed		
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appro	opria	te box for	r COS a	nd/or R CC	S=corrected	on-site during inspecti			
IN OUT N/A N/O Supervision	V	cos	R		OUT N			from Contamination	The second secon		
1 Person/Alternate Person in charge present,				15.0			separated an		(A)c O O		
demonstrates knowledge and performs duties	Pf	0	\circ	16/0	000			ces: cleaned & sanit	ized PPC O		
2 Certified Food Protection Manager for Classes 2,	_				1			of returned, previous	sly		
3, & 4	С	0	9	17	0			ed, and unsafe food			
Employee Health		3						Control for Safety			
Management, food employee and conditional employee;	D/D6			18 🔘	00			e and temperatures	P/Pf/C O		
knowledge, responsibilities and reporting	P/Pf	0	\circ	19 🔾	00	Broper	r reheating p	rocedures for hot ho	Iding POO		
4 Proper use of restriction and exclusion	P	0	0	20 🔾	00	Proper	r cooling time	and temperatures	POO		
5 Written procedures for responding to vomiting and	D.			21 🐼	00	Proper	r hot holding	temperatures	P 0 0		
diarrheal events	Pf	0	\circ	22	00	O Proper	r cold holding	temperatures	POO		
Good Hygienic Practices			= 20	23	00	Proper	r date markin	g and disposition	P/Pf O O		
6 O Proper eating, tasting, drinking, or tobacco products us	se P/C			24 🔾				ealth control: proced	ures		
7 O No discharge from eyes, nose, and mouth	С	0	\bigcirc	24	V	and re		*	P/Pf/C O		
Preventing Contamination by Hands					/		Consume	er Advisory			
8 Hands clean and properly washed	P/Pf	0	0	25	00	Consum		ovided: raw/undercooked	food Pf OO		
9 No bare hand contact with RTE food or a	P/Pf/C	0			/			tible Population			
pre-approved alternative procedure properly followed				26	00	Pasteur	ized foods used	d; prohibited foods not off	fered P/C O		
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0		/	Food/Cold	or Additives	and Toxic Substan	ices		
Approved Source				27	00	Food a	additives: app	proved and properly	used POO		
11 O Sood obtained from approved source	P/Pf/C	-		28	00	Toxics	substances p	properly identified,			
12 O Food received at proper temperature			0	20		stored	& used		P/Pf/C O		
13 C Food in good condition, safe, and unadulterated	P/Pf	0	0			Conform	nance with A	Approved Procedur	es		
14 O Required records available: molluscan shellfish	P/Pf/C	0		29	0 0			ariance/specialized	P/Pf/C O O		
identification, parasite destruction	15 1907/2014			Junear Stan		proces	s/ROP criter	ia/HACCP Plan	P/PI/C		
Cood Betril Bergin	OD KE	IAIL	PK	ACTICE	ES						
Good Retail Practices are preventative measures											
		_	-	or COS	and/or R			ite during inspection	R=repeat violation		
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	V	cos		OUT			roper Use o	f Utensils	V COS R		
33	Р	0	_			utensils: prop			c 0 0		
	P/Pf/C	0		44 (Utensils	/equipment/lir	nens: properly	stored, dried, & handl	ed Pf/C O		
The second of th	Pf	0	9	45 🔾	Single-u	ise/single-sen	vice articles: p	properly stored & used	P/C (O (O		
Food Temperature Control				46 0	Gloves	used proper			000		
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0						d Equipment			
34 O Plant food properly cooked for hot holding				47 0	Food a	nd non-food	contact surfa	aces cleanable,	P/Pf/C O O		
35 O Approved thawing methods used	Pf	0		5.07 (80.566)			constructed,				
36 Thermometers provided and accurate		0						, maintained and use	ed; Pf/C O		
Food Identification	PT/C	0	4					test strips available			
Food properly labeled; original container	Tools	PI		49	Non-too	od contact su	urfaces clean		(0)00		
Prevention of Food Contamination	PIC	101	4	50			Physical	Facilities			
38 Insects, rodents, and animals not present	DEIO			50 0	Hot and	cold water a	available; ad	equate pressure	Pf O O		
39 Contamination prevented during food preparation, storage & display		0					proper backf		P/Pf/C O		
40 Personal cleanliness	P/Pf/C		_				water proper		P/Pt/C O O		
41 Wiping cloths: properly used and stored	C	0	-	23/92	Contract	acilities: prop	erly construc	cted, supplied, & clea	an Pf/C O		
42 Washing fruits and vegetables	P/Pf/C	0		54	Garbage	and refuse p	roperly dispos	sed; facilities maintaine			
	7		_	2	Adague	to vertiletie	stalled, main	tained, and clean	P/Pfic O		
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ilable.		30	Matural	rubbor lotov	alouse net	; designated areas u	used COO		
				Violatio	ne doc	umented		sed per CGS §19a-3			
Person in Charge (Signature) Date			18	Priority I				Date corrections of			
(A) bo	1 45 1	2.5				tion Item Vio	lations	7/21/24	3		
Person in Charge (Printed)	1 18 12	4		Core Ite				10/18/24	15		
I HAMANIN July	120	21		Risk Fac	ctor/Put	olic Health In	tervention Vi	iolations	5		
Inspector (Signature) A PIMON Date 7 1 8	120	14		Repeat	Risk Fa	ctor/Public F	lealth Interve	ention Violations			
borrow Birth I Alivon Arah Mil				Good Re	etail Pra	actices Violat	tions		16.		
Inspector (Printed)				Require	es Rein	spection - cl	heck box if y	ou intend to reinsp	oct i		
Appeal: The owner or operator of a food establishment aggrieved by t	his orde	er to c	orre	ct any ir	nspecti	on violation	identified by	the food inspector	or to hold doctron		
or dispose of unsafe food, may appeal such order to the	Directo	or of H	lealt	th, not la	ater tha	n forty-eight	hours after	issuance of such o	rder.		

reinspection: 7/22/24

Food Establishment Inspection Report Inspection Report Continuation Sheet reinspection Manchests **Establishment TEMPERATURE OBSERVATIONS** Item/Location/Process Item/Location/Process Item/Location/Process Temp Temp not dua-coid not water H.S 85F ANF not dog - not Chill 37F 38F rendu 58F 401 FOF corn doa 395 OF 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 3 bavin Front damaged In front of house, by ice Machine Hear by chak drive thru window (not in use)

goyp

Person in Charge (Signature)

	o Esta	ibiisnment insped	ction R	REPORT Page	or
HD Manchester		Inspection Report Continuation Shee	t	Date 7 / 18/20	24
Establishment SMMC		Town Man Che	STER		
-oranginoimione-OVI 150		TEMPERATURE OBSERVA	S. And D.		
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp /
	-				
	OB	SERVATIONS AND CORRECT	IVE ACTIO	NS	
item	s report must be	e corrected within the time frames below	, or as stated i	n sections 8-405.11 & 8-406.11 of the	food code.
Number		Wil and the second seco			
53 pf to lift paper	paper	towers not in disp	penser	or restroom	
	11 1	D			
Thermomet	21/14	- strips available			
discussed no	of cant	rot w/ pic - no is	CLIPI		
		ensil storage			
nood clean	ing au	18 In stpt. 2021			
pest contro	1 to com	report to treat by	trash		
discussed gri	juting	Hes with traci, I	villn	eld to let Heav	m
pept know	u whi	n work & plán	nim	on being done	
			J	Joe	
	Tin	genito@soargsr.	m		
	\	gerrio es ovar gor.	COTT		
		1000		71 1.7	1000
Person in Charge (Signature)	Francis A.	ADDRES		Date 7 (8	Jul
Inspector (Signature) 📈 .	may	J		Date ///8/17	1174

Risk Category: '2 Food Establ	ishn	nen	t Ir	nspection	on Re	port		Page 1 of	
Establishment type Permanent Temporary Mobile Other					Date: (0/17/24	1		
Establishment SWECTWATER SOUND BAY		4EER	ny Conne	octicus Health	Time In_	12	AM/PM) Time O	ut	AM/PM
Address 194 BUCK land Hills Dr. #2078		D	P	H)	LHD)	manci	hester		
TOWN/City Manchester	J	7			Purpose	of Inspection	n: (Routine	Pre	-op
Permit Holder MAINS.		of P	ublic H		Reinspe		Other		
FOODBORNE ILLNESS RISK FA Risk factors are important practices or procedures identified as the most prevalent control								odborne illnes	s or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it			_	compliance		ot in compliance			=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type IN OUT N/A N/O Supervision	V	cos					cted on-site during ins tion from Contamin		R=repeat violation v_ cos R
		7			UT N/A N/O		ed and protected	iation	1000
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0	(15) O X			surfaces: cleaned &	sanitized	P(Pf/C O O
Cortified Food Protection Manager for Classes 2	(3)	10					ition of returned, pre-		
2 Certified Food Protection Manager for Classes 2, 3, & 4	0	0	0	17 🐼 🤇		17	ditioned, and unsafe	10.50	POO
Employee Health		64.18	1.				ature Control for Sa		
Management, food employee and conditional employee;	P/Pf	0	0	18 0 0			g time and temperate		P/Pf/C O O
knowledge, responsibilities and reporting							ing procedures for ho		POO
Proper use of restriction and exclusion Written procedures for responding to vomiting and	Р	0	0	21 0/0			time and temperatu	ires	() 000
diarrheal events	Pf	0	0	22 00 0			ding temperatures		POO
Good Hygienic Practices		-	-	230 %			parking and disposition	nn .	PPROO
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	10	10				lic health control: pro		
7 O No discharge from eyes, nose, and mouth	С		0	24 0 0	ک احدا د	and records	e to a construction of the second	a partial and	P/Pf/C
Preventing Contamination by Hands	V-V-		7 - 1		/		sumer Advisory		
8 Hands clean and properly washed	P/Pf	0	0	25 0 0			ory provided: raw/underc		Pf OO
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0 0			sceptible Population		75/01010
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0		26 0 0			s used; prohibited foods tives and Toxic Sub		P/C 0 0
Approved Source	JF1/C			27 0 0			s: approved and prop		POO
11 Food obtained from approved source	P/Pf/C	0	0	^ -		Toxic substan	ces properly identifie	ed	
12 6 C Food received at proper temperature	P/Pf	_	0	(28) \(\pi \)		stored & used			PIPIC O
13 C Food in good condition, safe, and unadulterated	P/Pf	0	0			Conformance v	vith Approved Proc	edures	
Required records available: molluscan shellfish	P/Pf/C	0	0	29 0 0			ith variance/specialize		P/Pf/C O O
identification, parasite destruction	OD DE	TAI	DE	RACTICES		process/ROP	criteria/HACCP Plan		
Good Retail Practices are preventative measures to						icals and physic	eal objects into foods		
				for COS and			d on-site during inspec	tion F	R=repeat violation
OUT N/A N/O Safe Food and Water	v	cos	-	OUT		The state of the s	Ise of Utensils		V COS R
30 Pasteurized eggs used where required	Р	0	0			sils: properly sto		100	200
31 Water and ice from approved source	P/Pf/C			(44) 00 Ute	tensils/equi	pment/linens: pro	operly stored, dried, &	handled	(Pf/COO
32 Variance obtained for specialized processing methods	Pf	0	0	45 00 Sin	ngle-use/si	ngle-service artic	cles: properly stored &	used	(C)OO
Food Temperature Control Proper cooling methods used; adequate equipment for		-		46 O Glo	loves used		lo and Cavinacat		
as proper cooling methods used; adequate equipment for temperature control	Pf/C	0	0	Fo	nod and no		Is and Equipment surfaces cleanable,		
34 O Plant food properly cooked for hot holding	Pf	0	0	14/		signed, constru			P/Pf/C O O
35 O Approved thawing methods used		0		W/s			talled, maintained an	d used:	
36 Thermometers provided and accurate	Pf/C		0				and test strips avail		Pf/C
Food Identification				49 O No	on-food co	ntact surfaces	clean		C 00
Food properly labeled; original container	P(C	O	0				sical Facilities		
Prevention of Food Contamination 38) \(\text{\text{N}} \) Insects, rodents, and animals not present	60	1					e; adequate pressur	е	Pf O O
39 Contamination prevented during food preparation, storage & display	P/PI/C	0					backflow devices roperly disposed		P/Pf/C O O
40 Personal cleanliness		0		53 O To	ewage and	a waste water p	nstructed, supplied, a	2 cloop	Pf/C O O
41 Wiping cloths: properly used and stored	C		0	54 O Ga	arbage and	refuse properly	disposed; facilities ma	intained	C_00
42 Washing fruits and vegetables	P/Pf/C			(55) O Ph	hysical fac	ilities installed,	maintained, and clea	an	P/P(C)OO
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is av	ailable		56 O Ad	dequate ve	entilation and lig	ghting; designated ar	reas used	000
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	and Div		O Na	atural rubb	er latex gloves	not used per CGS §		
Person in Charge (Signature)	1.	انح		Violations			Date correction	ons due	#
Batte 6	4			Priority Iter		Item Violations	6/29/24		4
Person in Charge (Printed) / Orando for John	\downarrow			Core Item	Violations	3	9/17/24		6
Inspector (Signature) Z. Lh MCM Date (1)	1/21			Repeat Ris	isk Factor/		ion Violations* ntervention Violation	s	7
Inspector (Printed) (AUYEN GEORGE	•			Requires	Reinspec	es Violations ction - check b	ox if you intend to re	einspect	6
Appeal: The owner or operator of a food establishment aggrieved by the	nis ord	er to	corr	ect any insi	spection v	iolation identifi	ed by the food insp	ector or to	hold, destroy
or dispose of unsafe food, may appeal such order to the	Direct	or of	Hea	Ith, not late	er than for	ty-eight hours	after issuance of si	uch order.	, 200.031
reinspection 6/20/24									

410 Capitol Avenue MS#11FDP Hartford, CT 06134

	Foc	od Esta	blishment Ir	nspection	Report	Page 2	of
LHD_M	anchester		Inspection Report Continu	uation Sheet		Date 6 17	124
Establishr	ment <u>SWeetWO</u> d	tr	Town_M@	inchester	- (ei	spection	6/20/24
			TEMPERATURE (
1 0 - 10	/Location/Process	Temp Al F	Item/Location/Proc			ocation/Process	Temp
1011111	100	411	2 door Frida	(Ked) 39F	not wat	CI - HS	1205
KANDLA	-N no nin on	AIF	chichen (Ca	40F	quat so	MIHTER	2011 2000
10021	to be the co	170.	pricappa	10.	900150	uninoci.	200 8810
maken	Maicken	AIF	rut tomatoes	4104			
V40 - 1 (VI	Chichon	111	cooled chick				
Atoxa .	2000V	OF-	(V 4/2 C C 52)	- 11			
	Violations cited in thi		SERVATIONS AND Concept corrected within the time fr			5 11 8 8 406 11 6	the food code
Item Number			N	202	4 1 -	33.11 & 0-400.11 01	the lood code.
1			resent attir			20 25 11	, , , , ,
3/C	on/crari		nsqueeze by	/ • •	-	. /	
289	unlabeled	Chemic	al saileeze l	pottle und	erhan	dsink 10	05)
45 C	TO GO CONTAIN	TEX LUP	s used as sc	0010 in 10t	Cantain	on	
IBPF	interior of		unve notch	1	WHIT	43	
	Frazen Fruit		oor Fieter		eted/cm	iered ,	
	1				to marin		2 100 0
20 P		/	saimon disc		n perso		arge
*		. 11	proved for co		ooking to	order now	J
*	3) salmont	o. be rer	moved/disco	arded	0		
44 PF	dryma of e	auipme	int/utensils	with har	id towe		
SZC	stagnant u	vaterir	1 bucket by	mop sink			
SEC	no cove bas	e indi	y storage/	Falling of	wall		
138PF	Fruit Flies	presen	t in back of			schedoled	
F/2 c	no CFPM o	nsitt	A STATE OF THE STA		4 14	ed gable	signed up
1*	Thawing of	Shrim	patron	temperate	re per	nerion	in
	charge in	discus	sion - did no	t visiblyse	e disc	ussed th	nawing
1	under runi	nina co	id water in	sink/ ret	igerati	ion	J
23 DF	no date mai	-Kina of	- Food pradu	ict in refr	igeratia	n -3/50	laus
*	Test strips a	vailabe	l		() 3. 30 3	dist	vised
×	CFPM reals	red to	be on site du	rina opera	ting no	118	
			0,,	7 %	J		
	FOLLOW WIN	lanamen	nent pertrai	otto / /cove	base,	6/18/24-LVM	that put +
	862-684-1	1143 -	· Lexando s			responsibi	
Person in	Charge (Signature)	Sorm	I Sert -			Date 6	M. 7d
	(Signature)	maly				Date 0 117	124

Risk Category: 3 Food Establ	ishm	nen	t Ir	spect	ion Re	port	Page 1 o	of <u>3</u>
Establishment type: Permanent Temporary Mobile Other					Date: 7	5/28/24		
Establishment The Main course		+sepin	Corine	cticus Mealing	Time In	3:15 AM/PM	Time Out 4;	15 AMPM
Address 807 Main Strect			D	H)	LHD	Manches	ter	
Town/City Manchester					Purpose	e of Inspection:	Routine Pre	e-op
Permit Holder MIOULD.		of Pu	blic H	Marie Control	Reinspe	N.C. STOCKER, CARLAN.	O	
FOODBORNE ILLNESS RISK FA Risk factors are important practices or procedures identified as the most prevalent cont								ss or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it P=Priority item Pf=Priority foundation item C=Core item V=violation type	_			compliance				O=not observed R=repeat violation
IN OUT N/A N/O Supervision	V	cos	-30		N/A N/A	ALCOHOL SERVICE AND A SERVICE AND ASSESSMENT OF THE PARTY	n Contamination	V COS R
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0			Food separated and p		P/Pf/C O O
Certified Food Protection Manager for Classes 2,	С	0	0			Proper disposition of re	eturned, previously	POO
3, & 4 Employee Health						served, reconditioned, Time/Temperature Co		
Management, food employee and conditional employee;	P/Pf	0	0	0000 0000000000000000000000000000000000		Proper cooking time a	nd temperatures	P/Pf/C O O
knowledge, responsibilities and reporting Proper use of restriction and exclusion	P		0	19 🔾		Proper reheating proce		P O O
Written procedures for responding to vomiting and				-		Proper hot holding tem		P 0 0
diarrheal events	Pf	0		(22)	X OC	Proper cold holding te	mperatures	PXO
Good Hygienic Practices 6 O Proper eating, tasting, drinking, or tobacco products us	e R/C			230		Proper date marking a		P/PYOO
No discharge from eyes, nose, and mouth			0	24 🔾	0 0	Time as a public healt and records	n control: procedures	P/Pf/C O
Preventing Contamination by Hands					/	Consumer A	dvisory	
8 Hands clean and properly washed	P/Pf	0	0	25		Consumer advisory provide		Pf OO
No bare hand contact with RTE food or a pre-approved alternative procedure properly followed	P/Pf/C	0	0	26		Highly Susceptib Pasteurized foods used; pr		P/C O O
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	20 0	F	ood/Color Additives an		
Approved Source				27 🔾	20	Food additives: approv		
11 O O O O O O O O O O O O O O O O O O	P/Pf/C		_	28	00	Toxic substances prop	erly identified,	P/Pf/C O
12 Food received at proper temperature 13 Food in good condition, safe, and unadulterated	P/Pf	00				stored & used Conformance with App	roved Procedures	
Required records available: molluscan shellfish	P/Pf/C		0	29 🔾		Compliance with varia		P/Pf/C O O
identification, parasite destruction	William Parces				V	process/ROP criteria/l	HACCP Plan	F/FI/C O
Good Retail Practices are preventative measures t				ion of path		nicals, and physical object	s into foods.	
				for COS at		COS=corrected on-site		R=repeat violation
OUT N/A N/O Safe Food and Water	V	cos	1111111	OUT		Proper Use of U	tensils	V COS R
30 Pasteurized eggs used where required 31 Water and ice from approved source	P/Pf/C	00				sils: properly stored ipment/linens: properly sto	لد الديد ط ٥ لم داد له مد	C O O
32 O Variance obtained for specialized processing methods	Pf	_	0			ingle-service articles: prop		P/C 0 0
Food Temperature Control						d properly	,	c 00
Proper cooling methods used; adequate equipment for	Pf/C	0	0			Utensils and E	quipment	
temperature control 34	Pf		0			on-food contact surface signed, constructed, and		P/Pf(C)
35 O Approved thawing methods used		0		1		ng facilities: installed, m		
36 C Thermometers provided and accurate		0				gents, sanitizers, and tes	t strips available	Pf/C O O
Food Identification 37 Food properly labeled; original container	1060	0		49	Non-food c	ontact surfaces clean	****	(0)00
Prevention of Food Contamination	PIC			5000	lot and co	Physical Fa ld water available; adequ		Pf) 0 0
38 Insects, rodents, and animals not present	Pf/C	0	0			nstalled; proper backflow		P/PI/C O O
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	0			d waste water properly of		P/Pf/C O
40 O Personal cleanliness 41 O Wiping cloths: properly used and stored	Pf/C	0				ties: properly constructed d refuse properly disposed		Pf/C 0 0
42 Washing fruits and vegetables	P/Pf/C					cilities installed, maintain		PHICO O
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is av	ailable).	56 0	Adequate v	ventilation and lighting; d ber latex gloves not use	esignated areas used	
14%					ns docum		te corrections due	#
Person in Charge (Signature) Date				Priority I	tem Violati	ons (cos—	
Person in Charge (Printed) Miguel Promi	0				oundation Tolation		17124	4
Inspector (Signature) L. LIMOUY Date 5/28	2/20	74		Risk Fac	tor/Public	Health Intervention Viola	tions	5
1 A 1 100 to A has a decided	120	4				r/Public Health Intervent ces Violations	IOIT VIOIAUDIIS	15,
Inspector (Printed) LOUTEN & Panaly	1150			Require	s Reinspe	ction - check box if you	intend to reinspect	
Appeal: The owner or operator of a food establishment aggrieved by to or dispose of unsafe food, may appeal such order to the	his ord	er to or of	corr	ect any ir	spection ter than for	violation identified by the	e food inspector or t	o hold, destroy,

reinspection - 6/7/24

1st - White: Health Department

Food Establishment Inspection Report LHD Manches Ha Inspection Report Continuation Sheet Establishment The Main Town Manchester OUVER reinspection TEMPERATURE OBSERVATIONS Item/Location/Process Item/Location/Process Temp Temp Item/Location/Process handsink 38F 381 38F basement coolers: butter 30F 39F 38 F hamburger 40F **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 Person in Charge (Signature)

	FOO	u Esta	blishment inspe	ction R	eport Page	or — — —
LHD_M	anchester		Inspection Report Continuation Sh	eet	Date 5/28/	71
Establish	ment The Walk	LOURA	e rown Manch	ester	- reinspection	6/7/24
			TEMPERATURE OBSER	VATIONS	remopection)	01110
Item	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
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1 Caur		41				
	aiollo	7				
		151				
		OR	SERVATIONS AND CORREC	TIVE ACTION	NS	
192	Violations cited in this				sections 8-405.11 & 8-406.11 of the	food code
Item Number		,		on, or do claica in	. 000.00.00 0 100.11 0 0 100.11 0 100	1000 0000.
Number						
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	ernan proci	dure	for butter - Mus	t be tim	neldate marked	Y
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	Charge (Signature)	4 100 01 :	\bigcirc		Date 5/28	194
nspector	(Signature)	TMUN			Date 5/28/	24

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.нь <u>Мапс</u>			Inspection Report Continuation	n Sheet		Date 6/20/20	124				
stablishmen	Between R	ounds	TownMUNCh	rester							
			TEMPERATURE OBS			6 5					
	ation/Process	Temp 40F	Bay Marie Crian	Temp	avat sar	cation/Process	700 ppm				
WIC-Chi	rese	40F	water	33F	hick f		Zuuppin				
Turkey		70.	cream cheese	36F	Doctro						
Bay Mar	cie let		Ci cui i i ci cosc								
water		34 F									
cream c	heese	36F									
		OF	BSERVATIONS AND COR	DECTIVE ACT	ONIS						
Item	Violations cited in this		be corrected within the time frames			5.11 & 8-406.11 of th	e food code.				
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30	y Maneli	eit + ri	ant) bûth Funci	TONING	maint	aining					
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ina	Amitaic + ex	muera	tural Militini	1 Hmes	thrailah	aut shif	+1/				
2.0	remperature of Food product person in charge to monitor temperatures multiple times throughout snifts/										
UV	operating hours.										
	J										
OF	iau tooper	7 this 1	day per Health	nept.							
				9 /							
51c Fa	West of bac	k han	dsink legning								
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47 pF C	utting boa	rds he	avily gauged-	to be re	placed						
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di	chiccoy CE	DM M	list he hiesent	durina	neratin	aballes					
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	- ruming	rriore	STUTT TO MITELY	TUM' FUU	u coole	requirer	r/C/11				
Person in Ch	arge (Signature)	(Munual H	HHAMATO .			Date 6/2	1/2024				
	0 (1	HINAN	1 N				1707 1				
Inspector (Sig	gnature) /X (V)	10/11/1				Date 6/2/	1017				

	Foo	d Esta	<u>blishment Inspe</u>	ection R	eport Page	of
HD MO	anchester		Inspection Report Continuation Sho		Date 6/25/	24
Establishn	nent Burger C	la55	Town Manche	ster		
			TEMPERATURE OBSER	VATIONS		
Item	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
ltem	Violations cited in thi		SERVATIONS AND CORRECT CORRECT CONTROL OF THE PROPERTY OF THE		NS n sections 8-405.11 & 8-406.11 of the	e food code.
Number	JREKE	2 ON 5	ite W/ fire mar.	Shal.		
			C			6
	Hood fan ou	ver flat	top acill not fun	ctioning.	Gas to gall has	been
	3 Bay Sin	k olumbi	na is leakina he	avilv. 3	bay Sink tagger	<u> </u>
	out of se	cvice bu	Building Dept.		bay Sink tagged	
	Restaurant v	aluataci	ly closed			
	1105 (with V	OIOII ICA I	1y 01000.			
	DO NOT	Reope	n until reinspec	ted by	Health Dept.	
	Contact hea	1th Dep	f. When above issu	res are	corrected to sched	lule
	more on.					
_	CFPM must	be or	site during all	operating	g haxs.	
		Migue	1 Rivera			
Person in	Charge (Signature)	Megn	hren		Date GF	120
Inspector	r (Signature)	12	——————————————————————————————————————		Date 6/2	5/24

	Foo	d Estal	blishment Inspe	ction F	Report Page	of
	anchester		Inspection Report Continuation She		Date 6/28	/24
Establishi	ment Burger	C a55	Town Manche	ester		E.
			TEMPERATURE OBSERV	ATIONS		
Item	/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
		OPS	SERVATIONS AND CORREC	TIVE ACTIO	ONG	
Item Number	Violations cited in this				in sections 8-405.11 & 8-406.11 of the	food code.
	CFPM on site	•				
	Hood Fan	has bee	en fixed And is	workin	g. Ok'd by fire m fire Marshal.	larshal.
	Hood has	been pro	openly cleaned. Ox	d by	tire Marshal.	
	kitchen has	s heen (cleaned throughout	H		
	OK to rec	open tod	ay.			
-						
		. 1	7			
Person in	Charge (Signature)	Vigue			Date	
Inspector	(Signature)				Date 6/28	1/24

TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Process Temp Nonline OBSERVATIONS AND CORRECTIVE ACTIONS Wolations cited in this report must be corrected within the time frames ballow, or as stated in sections 8-406.11 & 8-406.11 of the food code. Nonline TR+460n Site with Fire Marshal, Roger, for hood inspection. General cleaniness poor throughout kitchen. Discussed preparation time frames and procedures with passen in charge. Only prepare necessary quantities of food must be at least 6" off the filtor. Health Dept. to follow up on 6/28/24 regarding issues from previous report that are outstanding. Hood is overdue for professional cleaning. Hood must be cleaned by 1/2/24 per Fine Marshal.		Foo	od Estal	blishment	Inspec	ction R	Report	Page\	_of
Establishment Coin Cafe Town Manchester Temperature Observations Temp Remilocation/Process Temp Remilocation/Process Temp Observations and corrective actions Number Volations ated 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. The Marshal, Roger, for hand inspection. General cleaniness poor throughout Kitchen. Discussed preparation time frames and procedures with person in charge. Only prepare necessary quantities of food at one time. Storage of food must be at least b" off the floor. Health Dept. to follow up an 6/28/24 regarding issues from previous report that are outstanding. Hood is overdue for professional cleaning. Hood must be cleaned by 1/2/24 per Fire Marshal.	LHD @	Ton (S)	e	Inspection Report Cor	ntinuation Shee	t	D	ate 6/7	5/24
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Person in Charge (Signature) Date 5.28.24								34	
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	nanchester		0 0			Date(g C	2109
Establishi	ment <u>Charle</u>	42 01	illed_ Town_				
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			SERVATIONS AN	The state of the s	AND THE PERSON OF THE PERSON O		
Item Number	Violations cited in thi	is report must be	e corrected within the ti	me frames below,	or as stated in	sections 8-405.11 & 8-406.11 of th	e food code.
	JR + KP of for pro	on site ofestion 2/25	al clean ner fire	e Marsi ing, Ho Marsho	hal, pland n	ager. Hood ou nout be clea	urdue ned
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	Create a	plan	of acti	on for	FRI	replacement	۲,
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	by 6/2	8/24.					21(0)(
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	hours of	004	$\frac{(++11)}{(++11)}$	1000 De	on he	site during of the same pe	U1
	for two	1600	itions,	9(11.00)	·A	pe	10.07
	Usavel	Rivera					
Person in	Charge (Signature)	Migral	husen			Date 6/4	15/24
Inspector	(Signature)	12	_	_		Date 6/2	5/24

Risk Category: 2 Food Establ	ishn	nen	t Ir	nspec	ction	n Report		-	Pag	ge 1 of	3		
Establishment type: Permanent Temporary Mobile Other					- Da	ate: (a /	18/2	.4					
Establishment Charley's Grilled Subs		4EET	ng Conine	ectican Healing	Ti	ime In	1:00 A	мрм т	Time Out_	12:	30	AM/	FIV.
Address 194 Buckland Hils Dr. # 2058		D	P	H)	LI	HD max	nche	ester	>				
Town/City Manchester	J				Pt	urpose of In	spection:	Rou	tine	Pre-	ор		
Permit Holder Sung Woo		of P	ublic H		- 40	einspection		Other _					_
FOODBORNE ILLNESS RISK FA													
Risk factors are important practices or procedures identified as the most prevalent control. Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it			_	complian	100000	OUT=not in co			applicable		or injury. =not obs	-	h
P=Priority item Pf=Priority foundation item C=Core item V=violation type						1000 1000 1000		7 105 75-89 710	uring inspect		=repeat	- 1/1 -00	_
IN OUT N/A N/O Supervision	v	cos	-		-	N/A N/O	The state of the s		ontaminatio	-		cos	
Person/Alternate Person in charge present,	Pf	0	0	15	0	O O Food						0	
demonstrates knowledge and performs duties Cortified Food Protection Manager for Classes 2				100	X	Food			aned & sani ned, previou	itized	(P)Pf/C	0	0
3, & 4	0	0	0	17	0				unsafe food		P	0	0
Employee Health						Time	Tempera	ture Contro	ol for Safet	V			
Management, food employee and conditional employee;	P/Pf	0		18 🔾	0	O Prope	er cooking	time and te	mperatures		P/Pf/C		
knowledge, responsibilities and reporting Proper use of restriction and exclusion	Р	0		19 🔾	0	O Prope	er reheatin	g procedure	es for hot ho	olding		0	_
Written procedures for responding to vemiting and				21	5	O Prope						00	
diarrheal events	Pf	0	0	22	10			ding temper			P	0	
Good Hygienic Practices				@)	X	O Prope	er date ma	rking and d	isposition		P(Pf	9	0
6 Proper eating, tasting, drinking, or tobacco products use				24 🔾	0			c health cor	ntrol: proced	dures	P/Pf/C		0
7 No discharge from eyes, nose, and mouth Preventing Contamination by Hands	С	10	9		4	and r	ecords	ımer Advis	207/				
8 9 Hands clean and properly washed	P/Pf	0	0	25 🔾	0	Consu			w/undercooke	d food	Pf	0	0
9 No bare hand contact with RTE food or a	P/Pf/C	0	0			/ H	ighly Sus	ceptible Po	pulation	3519			
pre-approved alternative procedure properly followed	<u> </u>	0.25		26 🔾	0				ed foods not o		P/C	0	0
Adequate handwashing sinks, properly supplied/accessible Approved Source	Pic	0	0	27 0					xic Substa and properly		- In	0	
11 O ood obtained from approved source	P/Pf/C	10	0		/			es properly		useu			0
12 O Food received at proper temperature		0		28	0		d & used	oc proporty	idominiou,		P/Pf/C	0	0
Food in good condition, safe, and unadulterated	P/Pf	0	0	11/25/11					ed Procedu	res			
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29 🔾	0			h variance/s riteria/HAC			P/Pf/C	0	0
	OD RE	TAII	PF	RACTIC	ES	proce	33/1101 0	iteria/i iACC	JF FIAII	710		- 200	
Good Retail Practices are preventative measures to	o contro	l the	additi	ion of pat	thogen								
		-	_	for COS	-			on-site during		R	=repeat	1	A PROPERTY.
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	V P	cos	R	OUT		se utensils: pr		e of Utensi	ils		V	cos	
31 Water and ice from approved source	P/Pf/C	200	0			sils/equipment/			dried & hand	dled	C Pf/C	0	
32 O Variance obtained for specialized processing methods	Pf	0	Ō			le-use/single-se						0	
Food Temperature Control				46 🔾	Glov	es used prope					С	0	0
Proper cooling methods used; adequate equipment for temperature control	Pf/C	0		02	7	d ===d ==== f==		and Equip			E No.		
34 O Plant food properly cooked for hot holding	Pf	0	0	43 X		d and non-foor erly designed					P/P(C	\bigcirc	0
35 O Approved thawing methods used		0			P. 0 P.	ewashing facil				sed:			
36 Thermometers provided and accurate		0		48	clear	ning agents, s	anitizers, a	and test stri			Pf/C	0	0
Food Identification [37] Food properly labeled; original container	-6			(49) X	Non-	food contact					(0)	0	0
Food properly labeled; original container Prevention of Food Contamination	P(C)0	0	50	Llot	and cold wate		ical Faciliti			~		
[3] (Insects, rodents, and animals not present	PC	0	0			nbing installed					Pf P/Pf/C	00	
39 Contamination prevented during food preparation, storage & display	P/Pf/C					age and waste				-	PIPfIC	0	
40 Personal cleanliness	_	0		53 🗢	Toile	et facilities: pro	perly cons	structed, su	pplied, & cle	ean		0	_
41 Wiping cloths: properly used and stored 42 Washing fruits and vegetables	C	0		54 0	Garb	age and refuse	properly di	sposed; facil	lities maintai		C	0	
	P/Pf/C	100		56	Phys	sical facilities i quate ventilati	nstalled, n	naintained,	and clean	ucod	P/PfC	00	0
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable	9.	00	Natu	ral rubber late	x gloves n	ot used per	CGS §19a	-36f			$\stackrel{\smile}{-}$
m 70: - 11.	. /.	211		Violati	ions d	locumented			orrections			#	
Person in Charge (Signature)	5/2	7_	_			Violations	1-1-41	6-	21-2	9	_2	_	
Person in Charge (Printed) Meaul Livera	12					ndation Item V iolations	iolations	6,-	28-2	4_	-17	4	-
1 13	0/0	1		Risk Fa	actor/F	Public Health				~4_	1	5	(c)
Inspector (Signature) Date	لم إلا	4				Factor/Public		ervention V	iolations '				
Inspector (Printed) Sase Ramice?	1					Practices Vio einspection -		v if you into	and to roine	neot	+		
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to	corr	ect anv	inspe	ection violatio	n identifie	d by the foo	od inspecto	or or to	hold d	estr	OV
or dispose of unsafe food, may appeal such order to the	Directo	or of	Hea	Ith, not I	later t	than forty-eig	ht hours a	fter issuan	ce of such	order.			-y,
						Reinspe			2			/	1

	FOO	u Esta	<u>biisiimen</u>	t inspe	cuon r	teport	Page	<u> or</u>
LHD <u>M</u>	nchester		Inspection Report C	Continuation Shee	et		Date	/B/24
Establishm	ent_Charley's	Grilled	SUBS Town	Manc	he ster	- Rei	nspertie	on 6/28/24
			TEMPERATU	RE OBSERV	ATIONS			
Item/L	ocation/Process	Temp	Item/Location	n/Process	Temp	Item/Loc	cation/Process	Temp
Cold pre	e table chicken	41F	Hot Hold Che	ese sauce	138F	Hard Sin	k by ice ma	chine 95F
1	Steak	31F	WIC Slice		AIF	1,000)	0,130
	Shredded cheese	AIF		1 -1				
	Mozz Sticks	ALE		l tomatoes	277			
		917	Chic/	Ken	27F			
-	aw chicken	32F						
15	iced cheese	91F						
	iced tomataes	39F						
Hot ho	d Fries	135F						
			SERVATIONS A					
Item	Violations cited in this	report must be	corrected within the t	ime frames belov	v, or as stated	in sections 8-405	5.11 & 8-406.11	of the food code.
	Kevin manage	ec on s	ite (not c	FPM)	/			
49C	Metal cart			/				- E
2C	NO CFPM	01,5	site, Miguel	(CFPM)	arrived	mid way -	through in	Spection
16PF	NO Soap	at h	and Sink	by ice	machin	ev,	_/	
10PF	No paper	towels	at hand	SINK 6	y ice r	yachine.		
37C	unlabeled S	9,0007	e boffles o	+ front	Service	ce line		
23PF	Food not p	coperly	Late Mad	std. V	-			
38PF	live roache	s'unda	c Soda s	station	Dy POS	5		
	Ceiling tile	es unc	lean through	short	<i>,</i> .			
49C	exterior a	E equip	ment at ca	obline i	unclear	$n \checkmark$		
47RE.	Shelving u	nder s	oda Stat	ion at	cooklin	e dama	ged lunc,	leanable
52 P (grease tro	LP MISS	sing cover	/ uncleo	in lempt	ying into	uncovea	ed bocket
	Walls uncle	an thro	vahout /	,			it .	
· 20-20	FRP not s	scaled	to wall	through	shout			
47AE	WIF Gas	ket d	amaged					
49C	WIF Floor	unclea						
		sulatio	nin WIF	•				
47/61		. 1.	naged					
100 TO 10	Shelving in	/ /	peeling	1 / 1)	4 (/	
	Containers	-		beled thro				
190	Floors unc	lean t	ncough out,	e specially	y under	equipm	ent V	
INTE	se macinite	104 10	USE. New U	nit acrive	Sina.	ten weel	KS. Using	Burger class.
note	Multiple glue	taps 1	ivil of live	(oaches	at flor	nt line. I	(aps (epla	ced 2 days
Person in C	harge (Signature)	Magnel	frage				Date 6/	18/24
Inspector (Signature)	1/					Date 6	18/24
							1,	

FOO	ou esta	biisnment insp	ection R	eport Page	of
HD Manchester	14	Inspection Report Continuation S		Date6/18	124
Establishment Charley's	Grilled	SUBS TOWN MANC			
		TEMPERATURE OBSER	RVATIONS		
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
Health Dept	Cell				
866-734-6	669				
		\$ -5 \(\tau - \			
Item Violations cited in th		SERVATIONS AND CORRE corrected within the time frames be		NS sections 8-405.11 & 8-406.11 of the	e food code.
49c Storage	room f	floor unclean. V			
168 NO Sanifize	et prepa	red (COS)	14	to eat refrigerate r used within 7	
NOTES DISCUSSED	proper	date marking. A	Il ready t	to eat refrigerate	لـــــــــــــــــــــــــــــــــــــ
toods mus	t be do	ite marked and di	scarded o	c used within 7	days.
foods not a	late mack	sed during reinspe	ection will	need to be disc	arded.
Note PIC States	pest	control Service not available. P	treats a	every 4 weeks	
· Pest contro	1 report	not available &	PIC instru	orted to email	
Jeamicez	D March	hostoret and no	st andral	reports by 6/	21/21
	- I-IMIC	incidio i gov per	-1 CONTION	iquits by of	×1/24.
Note overall und	pan. Th	oash cleaning no	peden Fla	ocs valle coiling	
and puter	20 - E -	Il alles projected	- L L	ors, walls, ceiling cleaned and m	dial-incl
Address all	01 07 0	"C" L'OLOTENCE	PIUST DE	CIENTIED AND M	aintained
Mala II II CO	(014	1 010 -1 1 -C	Jaraina Cle	onlines in 10 da	42 [6]2
vote Hood battle	s are c	lean. ric states	battles	are cleaned dail	Y
Hood Was	due to	be cleaned Ap	ril 2026		•
late continue	emolaines	Sho CEOM La.	00 6 0	06100 - 04000 ·	<i>C</i> ^
ala lici	Cripique.	- che have	19 10 8	DUCE A LYTTI	2011
डाक्ट वर्णा	9 all	operating hours.		nsure a CFPM i	
				for the day.	
Ded to	e inspect	son when clear	lings i?	sves one address	realth real
orror to	180000	ng Hearth Dem	+ a ppor	ral required	W CV
Person in Charge (Signature)	Maun	there)	- Pr		14
nspector (Signature)	10	-		Date 6/18/	2/24

	Foo	d Esta	blishn	nent In	spe	ction F	Report	Page	e <u>1</u> of	f
LHD_M <i>Q</i>	nchester		Inspection F	Report Continu	ation Shee	et		Date	6/18	124
Establish	ment Charleys	Grilled	Subs	Town_M	mche	str				
				RATURE O		7				
Item	/Location/Process	Temp	Item/L	ocation/Proce	ess	Temp	ltem/L	ocation/Proc	ess	Temp
		0.5	CEDVATIO	NIC AND CO	00000	TIVE ACTIV	210			
Item	Violations cited in thi			NS AND CO				05.11 & 8-406	.11 of the fo	ood code.
Number										
	JR + KF	200	ite a	+ 3:	30m	for	(P-00)	20 1/00	inspa	e o tina
	0 2 701	-, .	10 00		Обри		c of	7	1 i i Ofo-c	L (1 0/1
	E-0 010, 005	\(\) \(\) \(\)	an Un 1	0 900	'00	0.200	11 '00	00 ,00	1.1/	
	Employees	(011	41179	CIEWY	1/19:	00~0	or im	01000011	ar 1;	
	Elena	- ^ ^ ^	\ 000 A \				- 1-	0 11	. 1 .	
	Exterior	or egu	prong	00	COOK	ine "	o se	Tolly	C 16	, anta
	by 4:00 p.	M.								
	700									
	oxay to	re-0p	$e \cap o \cap$	ce cl	eanin	ng is	comply	ete 01	1 600	Kline.
						<i></i>				
	email ji	amirez	. @ Man	chester	ct.g	iov ,	nest co	lortra	re por	72
	after eve	ry trec	utner t		U					
									1112	
		<i>n</i>	1-						111-1	
Person in	Charge (Signature) /	Magny	freder					Date	0/18/2	19
Inspector	(Signature)							Date (<u> </u>	24
	ر							4	, ,	

Risk Category: 2 Food Establ	lishn	nen	t Ir	nspection	on Rep	ort		Page	e 1 of <u>3</u>	
Establishment type: Permanent Temporary Mobile Other					Date:	1/2/	24			
Establishment Cheeks Chicken & Waffles		4eepin	g Conne	eticut Healty	Time In_	2:00	_AM(PM)	Time Out	3:30	_AM(PM
Address 648 center St.			P	H)	LHD M	lanche	ester	_		$\overline{}$
Town/City Manchester					Purpose of	of Inspecti	on: 🕏	outine	Pre-op	-
Permit Holder		of Pu	iblic He		Reinspec		Other			
FOODBORNE ILLNESS RISK FA Risk factors are important practices or procedures identified as the most prevalent cont									e illness or injur	γ.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if	tem	11	N=in	compliance	OUT=not	t in compliand	100000	not applicable	N/O=not o	
P=Priority item Pf=Priority foundation item C=Core item V=violation type	10000		_		7 7 7			e during inspection		at violation
IN OUT N/A N/O Supervision Person/Alternate Person in charge present,	V	cos	R	IN OL	JT N/A N/O	of the second		Contamination	n v	
demonstrates knowledge and performs duties	Pf	0	0				ited and prot	tected cleaned & saniti		
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 00 0		Proper dispo	sition of retu	urned, previous	ly	00
Employee Health	4							nd unsafe food trol for Safety		4-1
Management, food employee and conditional employee;	P/Pf	0		18 0 0				temperatures	P/Pf/	
knowledge, responsibilities and reporting	913983.3	1925	0	19 0 0	000	Proper rehea	ating proced	ures for hot hol		00
Proper use of restriction and exclusion Written procedures for responding to vomiting and	P	0	0	20 0 0		Proper cooli	ng time and olding temp	temperatures		000
diarrheal events	Pf	0	0	22	00	Proper cold	holding temp	peratures		
Good Hygienic Practices					00	Proper date	marking and	disposition	P(P	
Proper eating, tasting, drinking, or tobacco products us				24 0 0		Time as a pi	ublic health	control: procedu	ures P/Pf/C	
7 O No discharge from eyes, nose, and mouth Preventing Contamination by Hands	С	0	0			and records	A d	da.a		
8 Ø Ø Hands clean and properly washed	P/Pf	0	0	25 0 0			nsumer Adv	raw/undercooked	food Pf	100
No bare hand contact with RTE food or a					/		susceptible		1000	1010
pre-approved alternative procedure properly followed	P/Pf/C		0	26 0 0	0	Pasteurized for	ods used; proh	ibited foods not off	ered P/C	00
Adequate handwashing sinks, properly supplied/accessible	P)0	0					Toxic Substan		
Approved Source 11	DIDUG							d and properly	used	00
12 Cook Food received at proper temperature	P/Pf/C P/Pf	_		® ○\\$		oxic substa stored & use		rly identified,	(P)Pf/	
13 O Food in good condition, safe, and unadulterated		0		<u> </u>	100			oved Procedure	es	
14 O Required records available: molluscan shellfish	P/Pf/C	0	0	29 🔾	0	Compliance	with variance	e/specialized		
identification, parasite destruction	OD RE	TAII	PR	RACTICES		process/RO	P criteria/HA	CCP Plan		
Good Retail Practices are preventative measures to	o contro	I the a	additi	ion of pathog	ens, chemic	cals, and phys	sical objects in	nto foods.		
Mark OUT if numbered item is not in compliance V=violation type Mark i				for COS and				ring inspection	R=repe	at violation
OUT N/A N/O Safe Food and Water	٧	cos		OUT			Use of Uter	nsils	V	COS R
30 Pasteurized eggs used where required Water and ice from approved source	P P/Pf/C	00	-	(43) X In-	use utensil	ls: properly s	stored	d, dried, & handl	C	/
32 O Variance obtained for specialized processing methods	Pf	0	-					d, dried, & nandi	ed Pf/0	
Food Temperature Control					oves used		action proper	,, 0.0, 0.0 0. 0.000	C	
Proper cooling methods used; adequate equipment for	Pf/C	0					sils and Equ			
temperature control 34				11 24 / II (IA)			ct surfaces of		P/Pf/C	200
35 O Approved thawing methods used	Pf Pf/C	00	$\frac{2}{3}$	O / Pic			ructed, and u	ised ntained and use		
36 Thermometers provided and accurate		0						ntained and use strips available	Pf/C	00
Food Identification						tact surface			6	300
(37) Food properly labeled; original container	Pef/C		0				nysical Faci			
Prevention of Food Contamination 38 Insects, rodents, and animals not present	Pfig			50 O Ho	t and cold	water availa	ble; adequat	te pressure	Pf	
39 Contamination prevented during food preparation, storage & display	P/PVC			57 00 Se	umbing inst	talled; prope	r backflow d properly dis	evices		000
40 Personal cleanliness		0		53 O To	ilet facilitie	s: properly o	onstructed.	supplied, & clea	an Pf/C	00
(4) Wiping cloths: properly used and stored	0	0	0	54 🔾 Ga	rbage and r	efuse properl	y disposed; fa	acilities maintaine	ed Ç	
42 Washing fruits and vegetables	P/Pf/C	0	0	(55) Ph	ysical facili	ities installed	d, maintaine	d, and clean	P/Pf(C	
Permit Holder shall notify customers that a copy of the most recent inspection repo	lequate ver itural rubbe	ntilation and er latex glove	lighting; des	ignated areas oper CGS §19a-	used C	100				
Person in Charge (Signature) A Heal Date 7-) _ ?	L	,	Violations	documen	ited		corrections of	lue	#
Person in Charge (Signature) M. It am Date -	· - <	- 7	-		m Violation undation Ite	s em Violation	s	7 5 2		3
Person in Charge (Printed) Hoseb Ahmell	2271 P	Total Idea		Core Item	Violations			10/2/2	-1	21
Inspector (Signature) Date	12	21	1	Nepadit den deterri den fredati interventadi violations						
Inspector (Printed) Sase Ramice2				Requires	Reinspect	ion - check	box if you ir	ntend to reinsp	ect	28
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.										

reinspection 7/12/24

Foo	d Esta	<u>blishment Inspe</u>	ction F	Report Page	of						
LHD Manchester		Inspection Report Continuation She	et	Date 7 2	24						
Establishment Cheek 50	Chicker	1 Town Manche	ster	reinspection 7	12/24						
	,		ATIONS								
Item/Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp						
I door RIC North America	0			Hand Sink by 3 bay	110F						
Chicken	38F			Bathroom Sink	102F						
	1 A L										
reach in raw chicken	40										
Fried chicken internal	162	- SAME TO STATE OF THE STATE OF									
	12/										
	0.7										
Violations cited in this		SERVATIONS AND CORREC			food code						
litem 1)	Item Number 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. Haseb CFPM on Site										
Haseeb Cfr	MON S	ite									
43C Scoop bull	ied in	White Clase his									
C20 Casa la	- 1	- lin 1									
SET Grease trap	not ope	erating. Strong od	lo(
38PF Flies prese	nt arox	and 3 bay. Heavy	presense	2							
38PF Flies present around 3 bay. Heavy presense. 37C unlabeled containers unlabeled they granulars throughout											
410 Wet rag Stored on prep table by prep sink, throughout											
190 Walls world	The west (ag stored on prep table by prep 3111k, throughout										
400 and 1 and		Tiac (20 1- 0									
90 exterior of	- 41001	bills unclean									
3 helving a	bove 3	bay unclean	1/	7							
ISC Container o	Fdry	batter on prep to	ible no	tcovered							
490 exterior a	E earlie	ment unclean									
49c gaskets un											
		RIC unclean +	h couch	2.2	-						
			111009N	00 [
1990 Shelving u			/1								
390 Containers or	Foil &	ketchup Stored on	41000								
552 Storage 10	oom Ful	of garbage/cluth	er -bc-								
550 holes in w	all in 3	storage room - WII	be o	ffice space							
		door not screen			d						
10 cg Paper towe	5 not i	n dispenser in b	athroom	- Luc	100 mm 0 1						
49c Utility (00)	m Floor	unclean, lined	W/ cac	dboard - all clothe	aned						
38PF (odent dropp	rings pre	sent in Utility room		Ly new tiles :	n works						
16 P NO Sanitiz	et pres	pared.									
Person in Charge (Signature)	M. A	ed -		Date 07/8	1/24						
Inspector (Signature)	. 2	2		Date 7-2	2-29						

		d Esta	blishment l	nspec	tion R	eport	Page 3	of <u>3</u>
LHD_Ma	inchester		Inspection Report Contin	nuation Sheet		1	Date 7-2	-24_
Establishn	nent_CheekS (Chicken		anche:	ster	- rein	spection	7/17/24
			TEMPERATURE	OBSERVA	TIONS		7	
Polynera	Location/Process	Temp	Item/Location/Pro	cess	Temp	Item/Loca	tion/Process	Temp
WIC	Sliced tomate							
1	chicken	37F						
	Cheese	37F						
	Mac & cheese	34F						
Idans	RIC True							
1000	raw chicken	36F						
	TOUR CHOPS.)							
			SERVATIONS AND					
Item Number	Violations cited in this	s report must be	corrected within the time f	frames below,	or as stated in	n sections 8-405.1	11 & 8-406.11 of th	e food code.
390	Ice buil	dup in	1 chest Fre	eezer				
490	Shelving in	Wic	unclean					
390	Food Stored	,,						
23PF	. 1:		late Marked					
440		onclean		1				
490	1 1	No.	eptables un		1.11.6	1 1/00		1
370	7 1 1 1		on chest free	. /	WIC -	be19V -	o be rem	and
210	1 10 1 - 1	V ,	pottes at cook		1-		0 00 700	0046
170			stored w/ Food			also		
360	lights above	al toas	nec at cook li	ne - ne	praca	WI NOT		
560	Hood baffle							
	P1500 2001 10	3 Ono.	·wt					
Note	Hobby Has	eeb.	scheduled -	to me	et at	office	at ler	ч.
	come pre	pared	scheduled - with a	COMPI	eted	applica	2/01	nd
	payment	1	•	-		J V		
4899	No test str	ips ava	alable					
	dough mix							
	nes baci	c door	being in	stallec	mon	day		
		11	1			1	W. S	
Dorcon in	Charge (Signature)	M. 15	Lida				Data 7-2	-25

Date

Inspector (Signature)

TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Process Temp Item/Location/Process Temp OBSERVATIONS OBSERVATIONS AND CORRECTIVE ACTIONS	
TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Proce	1_
TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Proce	
Item/Location/Process Temp Item/Location/Process Item/Location/Proces	
Item/Location/Process Temp Item/Location/Pr	emp
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 of Number TR on site for mop sink follow up. Mop sink construction complete and now in compliance. All food surfaces protected during construction. Cooled au at 41 or below.	
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 of Number TR on site for mop sink follow up. Mop sink construction complete and now in compliance. All food surfaces protected during construction. Cooled au at 41 or below.	
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 of Number TR on sife for mop sink follow up. Mop sink construction complete and now in compliance. All food surfaces protected during construction. Cooled au at 41 or below.	
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 of Number TR on sife for mop sink follow up. Mop sink construction complete and now in compliance. All food surfaces protected during construction. Cooled au at 41 or below.	
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 of Number TR on site for mop sink follow up. Mop sink construction complete and now in compliance. All food surfaces protected during construction. Cooled au at 41 or below.	
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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 of Number TR on sife for mop sink follow up. Mop sink construction complete and now in compliance. All food surfaces protected during construction. Cooled au at 41 or below.	
TR on site for mop sink follow up. Mop sink construction complete and now in compliance. All food surfaces protected during construction. Cooled au at 41 for below.	ode.
Mop sink construction complete and now in compliance. All food surfaces protected during construction. Cooles au at 41° or below.	
Mop sink construction complete and now in compliance. All food surfaces protected during construction. Cooles au at 41° or below.	
Cooles au at 41 or below.	
Cooles au at 41° or below.	
All food surfaces protected during construction. Cooled an at 41 for below.	
cooles au at 41 For below.	
cooles au at 41 For below.	
cooles au at 41 For below.	
Okay to operate per Health Dept. this day	
The state of the s	
Person in Charge (Signature) Math Musika Date 7-10-2	34
Person in Charge (Signature) Math Marks Date 7-10-2 Date 7-10-2	14

Risk Category:	3	Food Establ	ishm	en	t In	specti	ion F	Repo	ort	Page 1 o	f_2_	
Establishment typ	e Pe	rmanent Temporary Mobile Other					Date:	6	14/24			
Establishment (cal	b Catcher		45erin	Connect	ticut Health	Time	ln_	2:00 AN	Time Out 3:3	30 A	AM/ED
Address 40	M	TW		DI	D	H)	LHD		anches			
Town/City Ma	nc	hester					Purp	ose o	of Inspection:	Routine Pre	e-op	
Permit Holder	Lie	J FOODBORNE ILLNESS RISK F		of Pu	ıblic He			Spect		Other		
Pick factors are	importa	nt practices or procedures identified as the most prevalent cont	ributing fa	ctors o	of food!	borne illness	or injury.	Interv	entions are control r	neasures to prevent foodborne illne	ss or injury.	
		nnce status (IN, OUT, N/A, N/O) for each numbered it				compliance			in compliance	N/A=not applicable N/	O=not obse	erved
P=Priority item Pf=	=Priority	y foundation item C=Core item V=violation type	Mark in	appr	opriat	te box for (COS and	d/or R	COS=correcte		R=repeat	
IN OUT N/A N/O		Supervision	٧	cos	R		OUT N/A			n from Contamination		COS R
		n/Alternate Person in charge present,	Pf	0	0				ood separated	and protected faces: cleaned & sanitized	35.00.515	00
		ed Food Protection Manager for Classes 2,	С	0	0		X O	F	Proper disposition	n of returned, previously		00
2 0 0	3, & 4					., _				oned, and unsafe food		
/		Employee Health				40.			4	ire Control for Safety ime and temperatures	DIDFIC	00
		ement, food employee and conditional employee;	P/Pf	0	0	18 🔾				procedures for hot holding		00
4 0 0		edge, responsibilities and reporting r use of restriction and exclusion	P	0	0	20 0	-			me and temperatures		
		n procedures for responding to vomiting and				-			Proper hot holding			
5 000		eal events	Pf	0	9	22 0	00	OF	Proper cold hold	ing temperatures		00
	1	Good Hygienic Practices		No.		230	X	PI	Proper date mar	king and disposition	PPF	00
		r eating, tasting, drinking, or tobacco products us		-	-	24 🔾	00			health control: procedures	P/Pf/C	00
7000		charge from eyes, nose, and mouth	C	0	0			1	and records	8.5.2		
and to the	_	Preventing Contamination by Hands	TD/D	10		25	ОТС			mer Advisory provided: raw/undercooked food	Pf	00
8 00 0		clean and properly washed re hand contact with RTE food or a	P/PI	0	-	25	010	1		eptible Population	2000	0,0
9000	76 300	proved alternative procedure properly followed	P/Pf/C	0	0	26 0	00	1	The second secon	sed; prohibited foods not offered	P/C	00
10 00		ate handwashing sinks, properly supplied/accessible	Pf/C	0	0		1	THE RESERVE	The second secon	es and Toxic Substances		044118
	1	Approved Source				27	00		Food additives:	approved and properly used	j P	00
11 00 0	Food	obtained from approved source	P/Pf/C	0	0	280	X		Toxic substance	s properly identified,	PPfC	00
120000		received at proper temperature	P/Pf	0	0		7		stored & used		100	
13		in good condition, safe, and unadulterated	P/Pf	0	0		/			h Approved Procedures		
14 000	1	red records available: molluscan shellfish	P/Pf/C	0	0	29	00			variance/specialized teria/HACCP Plan	P/Pf/C	00
	identii	ication, parasite destruction	OD RE	ΤΔΙ	I PR	RACTICE	S	THE REAL PROPERTY.	process/NOF cri	teriarriAcor Fran		
		Good Retail Practices are preventative measures						chemic	als, and physical	objects into foods.		
Mark OUT if numb	pered it					for COS a				n-site during inspection	R=repeat	violation
OUT N/A N/O		Safe Food and Water	V	cos	R	OUT				e of Utensils	_	COS R
	eurize	d eggs used where required	Р	0	-	(43)	In-use t	utensi	ls: properly store	ed	(0)	00
		ice from approved source	P/Pf/C	_	_	44 0	Utensils.	/equip	ment/linens: prop	erly stored, dried, & handled	Pf/C	
32 0 Varia	ance o	btained for specialized processing methods	Pf	0	0				gie-service article properly	s: properly stored & used	P/C C	00
Pror	oer coo	Food Temperature Control ling methods used; adequate equipment for		T	Γ	40	Gioves	useu		and Equipment		00
		e control	Pf/C	0	0	OX	Food a	nd no		urfaces cleanable,	-60	
		properly cooked for hot holding	Pf	0	0		properly	y desi	gned, constructe	ed, and used	P P C	00
		hawing methods used			_	10	Warewa	ashing	facilities: instal	led, maintained and used;	Pf/C	00
36 O The	rmome	ters provided and accurate	Pf/C		0		cleanin	g age	nts, sanitizers, a	nd test strips available	10 W 12894A	7 0 107
2		Food Identification		1		(4)	Non-foo	od cor	ntact surfaces cl		0	00
37 Food proper	rly labe	led; original container	P		0	50	1124 22	1 . 1		cal Facilities	D.	
00 0 10		Prevention of Food Contamination	Dil	10		50 C	Plumbi	na inc	talled; proper ba	adequate pressure	Pf	00
		nd animals not present ented during food preparation, storage & display	P/Pf/C						waste water pro			00
40 O Personal cle										tructed, supplied, & clean		00
		perly used and stored	С	_	0	54	Garbage	e and	refuse properly di	sposed: facilities maintained	С	00
42 Washing fru	its and	vegetables	P/Pf/C		0	(55) X	Physica	al faci	lities installed, m	aintained, and clean	P/Pf/O	00
Permit Holder shall	notify o	customers that a copy of the most recent inspection re	port is av	ailab	le.	(56)	Adequa	ate ve	ntilation and ligh	ting; designated areas use ot used per CGS §19a-36f	d (9	00
		1	- /	. /		Violatio				Date corrections due		#
Person in Charge	(Signa	ture) Date 56	104	1/3	4	Priority	Item Vi	olation	ns	6-7-24	3	3
	W-1000	xangbin chem			,				tem Violations	6-14-29		3,
Person in Charge	(Printe	ed) Xianyoir Carr		_		Core Ite			ealth Interventio	n Violations	/3	-13-
Inspector (Signatu	ire)	Date 6/	1/2	4						n violations ervention Violations	4	
opcotor (oignate			110	-					s Violations	The second secon	15	
Inspector (Printed) =	Jose Kamirez	• `			Require	es Reir	rspec	tion - check box	if you intend to reinspec	t	V
Appeal: The own	er or o	perator of a food establishment aggrieved by e of unsafe food, may appeal such order to the										destroy,

Reinspection 6/14/24

		d Esta	blishi	ment Inspe	ction F	Report	Page	of	
LHD_M	anchester		Inspection	Report Continuation Sho	eet		Date 6/4/2	4	
Establishr	ment Crab Cato	ner		Town Manches	ter		, ,		
			TEMP	ERATURE OBSER	VATIONS				
Item	/Location/Process	Temp	ltem/	Location/Process	Temp	Item/Loc	ation/Process	Temp	
Cold (rep table		hot h	old rice	1420	handsin	K (back)	95°F	
1	Sausage	41E		eptable Fish		Chlorine	17 1	140000	
b	oiled eggs	415	1 1	7111	33 F	Office for		120 PM	
- V	0 1 100	115		ded Shrimp		3bay 5	/ \	IZOF	
_	rotatoes	911		epsi RIC cdeslai		- I I I V	BRSINK	92F	
-	Shrimp	40F		aw chicken wing	39F	Hand Sink	server station	95 F	
	MUSCES	415		Sausage -	38 F	Handsink	at bar	100F	
	2 Co(n	41E		c (ab lea	41F	Customer		95F	
1 /a	w Chicken	37F		ut meton	38 F				
	\/;=\=\;=\;=\;=\;\;\;\;\;\;\;\;\;\;\;\;\		SERVATION			ONS			
Item	violations cited in this	report must be	corrected w	thin the time frames belo	ow, or as stated	in sections 8-405.	.11 & 8-406.11 of the f	ood code.	
Number					\<	Sein Spect	in 6/14/2	4	
37c	inalcholod	50, 500	00	nead may			1	- 1/1	
7.2	unlabeled	grus	0/1 3	specialic		1 50 T 51	ottles on c	OOK line	
150	chicken ou				WIF				
49c	floor in	WIF /							
56C	hood uncle			5 27 2	Y, PIC	to sche	dule ASAP	0	
49C	gaskets	uncled	in thr	oughout					
43c	tongs store	ed All	on ov	en handle					
490 Floor unclean under cookline equipment									
23PF	/ 1	- 1	. /	narked thro	1 /				
490	exterior of				3/,		1.		
49C	exterior of				in (by i	ce Maci	hine		
168F	handheld Co					CC			
56C	Wir light		right e						
49c	WIC Shelv	ing und		700917					
43c	(ice spoon	1	1	stagnant we	ater by	rice coo	bor		
55C	Damaged F		1	rear 3 be	1,		AC.		
518	7 7 11	A = 1000 A	1 /	aker at mo	1				
47PF	V-11		10	avaed V	POMA				
Note	2-door read			oxline not	`	0 v 1			
490	6	1	through	1	17) 00	1			
289	izalabeled	Secau	III	111	o cham	ical			
Note	DISCUSSE	Cooli	ni	W/ Cleanin	19 Chem	I(a) V			
Note	O Collides	alleran	000	Ster					
Person in	Charge (Signature)	-	1	<u> </u>			delo	4/24	
	(Signature)		7				Date / / /	2/	
apector (Oignature)	-/	0				Date 6/4/6	24	

District T			rain ner					
Risk Category: 7 Food Estable	lishn	nen	it Ir	nspecti	on Rep	port	Pag	e 1 of
Establishment type: Permanent Temporary Mobile Other					Date: /	1-9-20	4	
Establishment Creamy Kolls Ice Cream		+Estimate 1	nd Conne	ecticar Health	Time In_	3:00 A	MIPM Time Out_	400 AMIE
Address 699 Main St.			P	[-])	LHD M	anches	te	
Town/city Manchester	J	1			Purpose	of Inspection:	Routine	Pre-op
Permit Holder Daniel Dalila	G		cut De ublic H	partment lealth	Reinsped	ction	Other	
FOODBORNE ILLNESS RISK FA	ACTO	RS	ANI	D PUBLI	C HEAL	TH INTERVE	ENTIONS	
Risk factors are important practices or procedures identified as the most prevalent cont		actors o	of food	dborne illness o	or injury. Inter	ventions are contro	l measures to prevent foodborn	e illness or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered if				compliance		ot in compliance	N/A=not applicable	N/O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type IN ØUT N/A N/O Supervision	Mark ir	cos					ted on-site during inspection	
Person/Alternate Person in charge present	V	CUS	K		UT N/A N/O	Food separated	on from Contamination	200000000000000000000000000000000000000
demonstrates knowledge and performs duties	Pf	0	0	16 0 0			urfaces: cleaned & saniti	P/C O C
2 Certified Food Protection Manager for Classes 2,					200		ion of returned, previous	lv.
3, & 4	С	0	0	17 🐼 🤇		served, recondi	tioned, and unsafe food	POC
Employee Health					1	Time/Tempera	ture Control for Safety	
Management, food employee and conditional employee;	P/Pf	0			000	Proper cooking	time and temperatures	P/Pf/C O C
knowledge, responsibilities and reporting Proper use of restriction and exclusion	P		0		000	Proper reheatin	g procedures for hot hol	
Written procedures for responding to vemiting and		0		1		Proper cooling	time and temperatures ing temperatures	POO
diarrheal events	Pf	0	0	22 0	500	Proper cold hole	ding temperatures	POC
Good Hygienic Practices				23 🕏 🤇	000	Proper date ma	rking and disposition	P/Pf O C
6 Proper eating, tasting, drinking, or tobacco products us	e P/C	0	0	24 0 0			c health control: procedu	Iron
7 No discharge from eyes, nose, and mouth	С	0	0	24 0		and records		P/Pf/C O
Preventing Contamination by Hands 8	1						umer Advisory	
No bose bond centest with DTF ford and	P/Pf	0	9	25 0 0) Q		y provided: raw/undercooked	food Pf O
9 pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 0 6	00		ceptible Population used; prohibited foods not off	ional DIC O
10 Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0	200			ves and Toxic Substan	
Approved Source	1			27 8			approved and properly	
11 O O Food obtained from approved source	P/Pf/C	0	0		10000		es properly identified.	
12 C Food received at proper temperature		0		28 4 9		stored & used	so proporty identifica,	P/Pf/C O
13 C Food in good condition, safe, and unadulterated	P/Pf	0	0				th Approved Procedure	es
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29 🕏 🔾			h variance/specialized	P/Pf/C O C
	OD RE	ΤΔΙΙ	PR	RACTICES		process/ROP ci	riteria/HACCP Plan	
Good Retail Practices are preventative measures to	contro	I the a	additi	ion of pathog	gens, chemi	cals, and physica	l objects into foods	
				for COS and			on-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	V	cos	R	OUT	-1	Proper Us	e of Utensils	V COS F
30 Pasteurized eggs used where required	Р	_	0	43 O In-	-use utensi	ils: properly stor	ed	c 0 c
31 Water and ice from approved source 32 Variance obtained for specialized processing methods	P/Pf/C		0				erly stored, dried, & handle	
32 Variance obtained for specialized processing methods Food Temperature Control	Pf	0	0	10 0 01			es: properly stored & used	P/C O C
Dropper applies mostly and used and a state of	T			40 CIG	loves used		and Equipment	C O C
temperature control	Pf/C	0	0	Fo	ood and no		urfaces cleanable,	
34 O O Plant food properly cooked for hot holding	Pf	0	0			gned, construct		P/Pf/C O C
35 O Approved thawing methods used	Pf/C	0	0				lled, maintained and use	ed; 🖎
36 C Thermometers provided and accurate	Pf/C	0	0	cle	eaning age	nts, sanitizers, a	and test strips available	BIC OC
Food Identification	T			49 O No	on-food cor	ntact surfaces cl		C O C
37 Food properly labeled; original container Prevention of Food Contamination	Pf/C	0	0	50 0 11		Phys	ical Facilities	
38 Insects, rodents, and animals not present	DEIC	0		50 O Ho	ot and cold	water available	adequate pressure	Pf O C
39 Contamination prevented during food preparation, storage & display	P/Pf/C			52 0 50	umbing ins	talled; proper ba waste water pro	acktiow devices	PIPFIC O
40 Personal cleanliness		0		53 O To	ilet facilitie	es: properly cons	structed, supplied, & clea	P/Pf/C O C
41 Wiping cloths: properly used and stored	С	0	0	54 🔾 Ga	arbage and i	refuse properly di	sposed; facilities maintaine	ed C O C
42 Washing fruits and vegetables	P/Pf/C	0	0	55 O Ph	nysical facil	lities installed, m	naintained, and clean	P/Pf/C O C
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable		56 O Ad	dequate ver	ntilation and ligh	iting; designated areas υ	used C C
11 10 -	^	7	,	Violations	atural rubbe	er latex gloves n	ot used per CGS §19a-3	
Person in Charge (Signature) Hell Date	-9-	11	1		m Violation		Date corrections of	
blood L.						em Violations	7-19-2	
Person in Charge (Printed) / TEU Me WING				Core Item	Violations			0
Inspector (Signature)	9-7	1		Risk Facto	or/Public He	ealth Interventio	n Violations	0
0- 0)	-	Good Reta	all Practice	Sublic Health Int	ervention Violations	7
Inspector (Printed) Jose Kamirez				Requires I	Reinspect	tion - check box	if you intend to reinspe	ect
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to	corre	ect any inst	pection via	plation identified	d by the food inspector	or to hold destroy
or dispose of unsafe food, may appeal such order to the	Directo	or of I	Heal	Ith, not late	er than fort	y-eight hours a	fter issuance of such o	rder.

Reinspection 7-22-24

Foo	d Esta	blish	men'	t Inspe	ection F	Report	Page	<u>^</u> •	f_&
HD Manchester		Inspection	n Report C	ontinuation Sh	eet		Date	19	124
Establishment Creamy Roll	is Ice C	ream	Town_	manci	hester	- Re	inpsection	7-	22-24
		TEMP	ERATU	RE OBSER	VATIONS				
Item/Location/Process	Temp	Item	/Location	/Process	Temp	Item/L	ocation/Process		Temp
LOOP RIC CREAM	415					h co	dsink by	2 has/	1115
Lagor Hic Clear	-111					714	09 HX BY	SDAY	111
						Quat	3 bay		130 HM
							1		** **
									1
	OBS	SERVATI	ONS AN	ID CORRE	CTIVE ACTION	ONE			
Violations cited in this							05 11 & 8-406 11	of the f	ond code
Item				ino named be	on, or do oldica	000110113 0	00.11 0 0 400.11	or the it	ood code.
Number									
51P Customer ba	Har h	110	1 [121	- 1201	11 -1	1 1 1	805	1
51P Customerba: 48PF No test s	11100M III	arasin	K at	135	1284	, addust	µater heate alue	60	install
48PF NO test 5	rips av	ailable	2 /			ruxing v	alve		
Note Discussed:	Sianina	UD M	1020	em alove	201 Ac	120 C	FPM C	5.7/(0
	7	1 >	17	Villonde	2) 10(1.66	() ()	,010	
Vote Discussed		1	1	^	11		11 1		
Note Discussed p	(oper c	late	mack	ina.	II RIE	100c5	that ar	e	
refrigerate	in ust	be	date	Mark	7	/	or discar		
10/14hin 7	da vs.	·					/ C/-CO.		
Note Provided alle	001	120-							
17	ergen fo								
Vote Thermometer	availab	1C							
	11 /								
Person in Charge (Signature)	Teull	A) M		1		Date 7	7-9-	24
nspector (Signature)	9-	-1					Date 7	_ 9	_ 14
		/ -							~ .

Risk Category: 2 Food Establ	ishn	nent	Ins	snecti	ion Rer	orf		Pag	e 1 of	2		
Establishment type: Permanent Temporary Mobile Other				орсон	Τ.	-1101	7/1					
		.0	omectic	Cur ,	Date:	7/16	24			~		_
Establishment DONKIN DONN'S -OGKKIND		4sering.		The same of	Time In_		AM/PM)	Time Out_) (10_	AM	PM)
Address & Oakland St.		DP	ŀ	-[)	LHD M	nanch	rester		9			
Town/City Manchester	J				Purpose	of Inspecti	on: Ř	outine	Pre-	эp		
Permit Holder Derek Pacheco	Co	onnecticut of Publi			Reinspec	ction	Other					_
FOODBORNE ILLNESS RISK FA	TOTAL TOTAL CONTRACTOR		27					77		****	gr.	
Risk factors are important practices or procedures identified as the most prevalent control. Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				ome iiiness ompliance		ot in complian		not applicable	20.00	not ob	toni lu Wie	ed
P=Priority item Pf=Priority foundation item C=Core item V=violation type										=repea	1	
IN OUT N/A N/O Supervision Person/Alternate Person in charge present,	V	cos	_		N/A N/O	Food separa		Contaminatio tected	n	P/C	cos	
demonstrates knowledge and performs duties	Pf	0		60				cleaned & sanit	tized	P(P)C		
Certified Food Protection Manager for Classes 2, 3, & 4	С	0	$> \parallel$	17 🕜		(7.5)		urned, previous nd unsafe food	- 5	P	0	0
Employee Health	20,000				/	Time/Temp	erature Cor	trol for Safety		51		
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	00) I -					temperatures ures for hot ho		P/Pf/C		
4 Proper use of restriction and exclusion	P	0						temperatures	iding		00	
5 Written procedures for responding to vomiting and	Pf	0		21 0	$\circ\circ \mathscr{A}$	Proper hot h	olding temp	eratures		P	0	0
diarrheal events Good Hygienic Practices			- (23 0		Proper cold Proper date				P/Pf	X	00
6 Proper eating, tasting, drinking, or tobacco products use		0	511					control: proced	ures	P/Pf/C		0
7 O No discharge from eyes, nose, and mouth Preventing Contamination by Hands	С		2	24		and records			L. J	FIFIIC		
8 Hands clean and properly washed	P/Pf	100	5	25 0			isory provided:	raw/undercooked	i food	Pf	10	0
9 No bare hand contact with RTE food or a	P/Pf/C	0			/	Highly S	Susceptible	Population				15
pre-approved alternative procedure properly followed Adequate handwashing sinks, properly supplied/accessible	(P))C	9-9 12		26 0				ibited foods not of		P/C	0	0
Approved Source		, 0 10		27 0 9			the second second second second	d and properly		P	0	0
11 Sood obtained from approved source	P/Pf/C		_	28	00	Toxic substa	ances prope			P/Pf/C		
12 C Food received at proper temperature 13 C Food in good condition, safe, and unadulterated		000	21			stored & use		oved Procedu	roc	. // // 0		
Required records available: molluscan shellfish	P/Pf/C			29 0				e/specialized	62	DIDNIC		
identification, parasite destruction				ACTICES	- 100	process/RO	P criteria/HA	CCP Plan		P/Pf/C		\subseteq
Good Retail Practices are preventative measures to						icals, and phy	sical objects i	nto foods.				
Mark OUT if numbered item is not in compliance V=violation type Mark in				or COS an				ring inspection	R	=repea	t viola	ation
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	V P	cos		OUT	a uso utono	Proper ils: properly :	Use of Ute	nsils		V	cos	_
31 Water and ice from approved source	P/Pf/C							d, dried, & hand	lled	Pf/C	_	00
32 O Variance obtained for specialized processing methods	Pf	0	2	45 OS	Single-use/sin	ngle-service a	rticles: proper	ly stored & used		P/C	0	0
Food Temperature Control Proper cooling methods used; adequate equipment for	T	Т		46 O G	Sloves used		sils and Eq	uinmont	-	C	0	0
temperature control	Pf/C	0	$\geq \cdot $	DXF	ood and no	n-food conta					5	
34 O Plant food properly cooked for hot holding	Pf					igned, const				P/Hf/C		0
35 O Approved thawing methods used 36 Thermometers provided and accurate			_					ntained and us strips available		Pf/C	0	0
Food Identification	1. 170		_			ntact surface		strips available		(0)	0	0
Food properly labeled; original container	Pf/C			50 0			hysical Fac			_		
Prevention of Food Contamination 38 Insects, rodents, and animals not present	Pf/C	100				l water availa stalled; prope				Pf/Pf/C	10	00
Insects, rodents, and animals not present	P/Pf/C	100	51 [52 OS	Sewage and	waste water	properly dis	posed		P/Pf/C	0	0
40 Personal cleanliness 41 Wiping cloths: properly used and stored		00						supplied, & cle		Pf/C		
42 Washing fruits and vegetables	P/Pf/C	0						acilities maintair d, and clean	100000000000000000000000000000000000000	P/Pf/C		00
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is av	ailable.		59 X A	dequate ve	entilation and	lighting; des	signated areas	used	0		0
Il Carlon This	0 1	TIC	-		natural rubbi ns docume			per CGS §19a- corrections			#	
Person in Charge (Signature)	I C	PΚ		Priority It	em Violation	ns		7/19/24	1		7	
Person in Charge (Printed) Kaisha (Disha)	a.k				oundation It n Violations	tem Violation	ns	7/26/2			3	
1000000	1/-	,11	4	Risk Fact	tor/Public H	lealth Interve	ention Violati	ons			4	
Inspector (Signature) Date	10-	2				Public Healthes Violations		n Violations			9	
Inspector (Printed) TOSE RAMITEZ				Requires	s Reinspec	tion - check	box if you is	ntend to reins	pect			
Appeal: The owner or operator of a food establishment aggrieved by the	nis ord	er to co	orre	ct any in	spection vi	iolation iden	tified by the	food inspecto	r or to	hold,	destr	oy,
or dispose of unsafe food, may appeal such order to the	Direct	or of H	eait	ii, not lat	ter than for	ty-eight hou	rs after issu	ance of such	order.			

Reinspection 7/30/24

1st - White: Health Department

Food	Establish	<u>iment Inspec</u>	ction R	eport	Page _d_ c	of_d
LHD_Manchester	Inspection	on Report Continuation Shee	et		Date 7/16	124
Establishment DUNKIN DO	onuts Coakia	nd Jown March	rester	-Kein	Spection:	7/30/24
		PERATURE OBSERV				7 7
Item/Location/Process	1 / 611	m/Location/Process	Temp		cation/Process	Temp
VY L		reptable eggi	4/F	3 bay 5	1 1	120F
WIC ambient	38F L	Sausage	39F	3 bay	Quat	400pgm
WIC MILK	7/F	quiche	41 F	,	1 - 1	
2 door RIC TurboAr		Cream choese	39F	under c	ounter cooler	
Sausage patty	GOF Crear	n cheese cold pep-	able		Cream	39F
Wrap ,	915	5 iced chase	50F,	1 11	Spenser cream	
lega patty	3.3 F	individual cream cha	se my	Quat bu	CONTRACTOR OF THE PARTY OF THE	#400ppin
-311	00000014	TIONS AND SORDES	37+		er BR Sink	1255
Violations cited in this re		TIONS AND CORRECT within the time frames below			5 11 & 8-406 11 of the	food code.
Item ; ,	20 525	1	r, or do oldlog .	.,		
Number Kaisha CI	-PIVI DN SI	te				
108 F interior of	hand sink	by ovensu	200/000	lused	as dump.	sink 1/
da la	1 11/	by bychs	PICIENT	10000	43 6517	V
490 WIF Ceiling			1 1	· a 10/1/	,	
SOL Employee to	od Cominge	ed w/ restaurar	17 tood	11 10010	<u> </u>	
AGC WIC FLOOR	unclean					
490 Standing 10	avid under	dry storage	Shellin	062		
	11 1	y unclean lund		1 3 1	be white	,
6.0	/	(cambro) u	1			
	3/1	vidual cream of	1 7	7	41F.605) discate
a Islan I i	1	bles unclean	1	KUP bu	ild up	
	1 1	I lids uncl	1 1	-7	discarded	
390 ice boild up	£ standi	na inster in	dive	has bei		
490 Floors uncl						
51P Customer B	athroom 5	ink 125F.	1271	- (mus	st be fixed	1 bu
8-5-24 00	chice a di	fferent plumber	Correct	Plumber on	vacation	,
Note Customer Ba	throom hance	Isink must b	ne 85	-115F		
Note Discussed		191			1	
Food contac	+ surface	S	0			
Note Instructed P	7 2		rep tal	ole w/	cream ch	eese
until unit	in AlFor	below.		(8	
Note Test Strip.	5 & ther	mometer avail	labe			
Person in Charge (Signature)	7. 2005	<u></u>			Date 7-10	1-24
Inspector (Signature)	111-				Date 7=1	5-24

Risk Category: 3 Food Establ	ishn	nen	t Ir	Inspection Report Page 1 of 2
Establishment type: Permanent Temporary Mobile Other				Date: 7/15/24
Establishment EA Teriyaki		4.cerim	Conner	Time In 2:45 AM/PM Time Out 3:45 AM/PM
Address 194 Buckland Hills dr # 2056			P	H) LHD Manchester
Town/City Manchester	J			Purpose of Inspection: Routine Pre-op
Permit Holder		of Pu	blic He	Reinspection Other
			100	ND PUBLIC HEALTH INTERVENTIONS odborne illness or injury. Interventions are control measures to prevent foodborne illness or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it				n compliance OUT=not in compliance N/A=not applicable N/O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	appr	opria	iate box for COS and/or R COS=corrected on-site during inspection R=repeat violation
IN OUT N/A N/O Supervision	V	cos	R	in you make
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	0	0	15 0 0 Food separated and protected P/C 0 0 Food-contact surfaces: cleaned & sanitized P/C 0 0
0.45.45.45.45.4				Proper disposition of returned previously
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 O served, reconditioned, and unsafe food
Employee Health				/ime/Temperature Control for Safety
Management, food employee and conditional employee; knowledge, responsibilities and reporting	P/Pf	0	0	18 O O Proper cooking time and temperatures P/Pf/C O 19 O O Proper reheating procedures for hot holding P O
4 Q Proper use of restriction and exclusion	Р	0	0	
5 Written procedures for responding to vomiting and	100000	100000		21 CO Proper bot holding temperatures PO
diarrheal events	Pf	0	0	22 2 Proper cold holding temperatures POO
Good Hygienic Practices 6 O Proper eating, tasting, drinking, or tobacco products us	. 7		_	23 O O Proper date marking and disposition P/Pf O O
6 Proper eating, tasting, drinking, or tobacco products use 7 No loscharge from eyes, nose, and mouth	e P/C	0		
Preventing Contamination by Hands	10		\subseteq	Consumer Advisory
8 Ø P Hands clean and properly washed	P/Pf	0	0	
9 No bare hand contact with RTE food or a	P/Pf/C	0	0	Highly Susceptible Population
pre-approved alternative procedure properly followed		100		26 Pasteurized foods used; prohibited foods not offered P/C O
Adequate handwashing sinks, properly supplied/accessible Approved Source	(Pf)C	0	\subseteq	
11 O Spood obtained from approved source	P/Pf/C	0	0	Toyic substances properly identified
12 O Food received at proper temperature			ă	-1 128 (C) (C) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D
13 CO Food in good condition, safe, and unadulterated	P/Pf	0	0	
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	Compliance with variance/specialized
	OD RE	ΤΔΙΙ	PR	PRACTICES
				lition of pathogens, chemicals, and physical objects into foods.
Mark OUT if numbered item is not in compliance V=violation type Mark in				x for COS and/or R COS=corrected on-site during inspection R=repeat violation
OUT N/A N/O Safe Food and Water	٧	cos		A de la
30 Pasteurized eggs used where required Water and ice from approved source	P/Pf/C	00		
32 O Variance obtained for specialized processing methods	Pf		8	
Food Temperature Control	113			46 O Gloves used properly C O
Proper cooling methods used; adequate equipment for	Pf/C	0		Utensils and Equipment
temperature control 34				1 17 Pood and non-lood contact surfaces cleanable,
35 O Approved thawing methods used	Pf/C	00		properly designed, constructed, and used Warewashing facilities; installed, maintained and used:
36 O Thermometers provided and accurate		0		
Food Identification	111300			(49) Non-food contact surfaces clean
Food properly labeled; original container	Pf/C	0	0	
Prevention of Food Contamination 38 Insects, rodents, and animals not present	Dir			Hot and cold water available; adequate pressure
39 Contamination prevented during food preparation, storage & display	P/Pf/C	00		
40 Personal cleanliness		0	-	
41 Wiping cloths: properly used and stored	С	0		54 Garbage and refuse properly disposed; facilities maintained C C
42 Washing fruits and vegetables	P/Pf/C	0	0	
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable	.	56 Adequate ventilation and lighting; designated areas used C Natural rubber latex gloves not used per CGS §19a-36f
01	- 1	200-1		Violations documented Date corrections due #
Person in Charge (Signature) & EINO Date O'HI	5/2	02	4	Priority Item Violations 7117124 2
Person in Charge (Printed)			1	Priority Foundation Item Violations 7 25 24 4
Person in Charge (Printed)	-1		-	Core Item Violations Risk Factor/Public Health Intervention Violations
Inspector (Signature) Date 7/1	5/6	24		Repeat Risk Factor/Public Health Intervention Violations
Inspector (Printed) Tose Ramilez	ı			Good Retail Practices Violations
	nis orde	er to	corre	Requires Reinspection - check box if you intend to reinspect rect any inspection violation identified by the food inspector or to hold, destroy,
or dispose of unsafe food, may appeal such order to the	Directo	or of l	Heal	alth, not later than forty-eight hours after issuance of such order.

Reinspection 7/16/24

	Foo	d Esta	blish	men	t Inspe	ction I	Repor	t	Page _	of _
Inspection Report Inspection Report Inspection Report Inspection Report Inspection Report Inspection Report Continuation Sheet Town Manchester Temperature Observations Item/Location/Process Temp Remilection Process Temp Remilection Chicken Safe Harld Sink by ice 120 F In all Beef 37F Ince 144 F Manchester Temperature Observations Temp Remilection Safe Harld Sink by ice 120 F In all Beef 37F Ince 144 F Manchester Temperature Observations Temp Remilection Safe Harld Sink by ice 120 F In all Beef 37F Ince 144 F Manchester Temperature Observations Temp Remilection Safe Harld Sink by ice 120 F In all Counter Cooler Colc Lawer Chicken 32 F Marinted Caw Chicken 41F Spring (all 154 F Marinted Caw		-24								
Establishment_E	EA Ter	iyaki		Town_	Manch	ester	_ R	einsa	ection	7-16-24
			TEMP	ERATU	RE OBSERV	/ATIONS				
Item/Location	/Process	Temp	Item	/Location	/Process	Temp	Item	/Location/F	Process	Temp
2 Jac RIC	Chicken	GOF	4-4-4	2/2	cill chick	NIENE	Hand	SINI	hi ice	IDAT
	-	Company of the Company	1101			134	LIMIC	311) K	by the	170[
- law	Dee+	314		rice	<u>e</u>	1997				
Marinated raw	chicken	41F	l t.	Spring	Soll	145F				
		• • • • • • • • • • • • • • • • • • • •	1			375				
1 4	•	Air	Will a							
11 / 7.					SIGNE	3/1				
Hot H	old rice	170 F			THE TOPY	365				
		120F	4.LL	10/1	noralles	157F				
			1107	1010	11000100	1201				
VOIC CI	NCECII		OFDI/ATI	ONIO AN	ID CODDEC	TIME LANGE	0110			
Viole	tions sited in this									
Item	itions cited in this	report must be	e corrected v	vitnin the ti	me frames belo	w, or as stated	in sections 8	3-405.11 & 8	-406.11 of the	food code.
Number					1100		10-1	/ 7	9 E	
(0 ()1	11 /	1 1			Under	COOKIC	1 (00)	2(, I T	
SOYF NO	Hot wa	ter at	3 bai	I = II	5F					
					1					
796 11146	rior of u	nder co	unter	CODE	CUNCIE	ean				
436 500	ne Handl	e poss	Todil	n Fl	rac hin					
	1 1 1	2	1 /	1.7	11 - 1	- (
310 UNI	abeled E	a vecto	2 001	Tes	thaval	Now+				
2 /9 - (17	1			Į,		F.0.7		
0/0/1	2105 04	7100	DIV C	mole	ar)		-,			
1085 1960	Phin amen	t Str	od in	han	1 Sint	- 611	2 6011	. /		
								V		
	IK Grown	$d \leq ba$	W 120	clear	n/not c	leanab	le			
-10 1	1		1 .	1	1 1	= 1				
100 C				/)					
I. n	1,		, \					C: 124		
COC INTE	1106 2 (exterior	cof C	OOK 1	ne equ	rifment	UNCle	<u>an</u>		
990 3ta	ading lik	yvid on	+1001	10	3tocage	(com	_/_			
1017 110	paper to	wels o	T has	10 5	MK by	WIC				
49c She	elvina t	hovaho	wt v	nclea	m '					
49C WIC	ceiling	2 12 AC	lean							
490 Cei	lina 1/0	ent ab	DIVE .	Shal	uncle	ean.				
	3				Onch					
Malan	1		<u> </u>	1			1.11 . 1		. 1	
Note Do	NOT 05	e 0110	e co	onte	c react	Ain v	1 till it	155	erviced	5
1) ((((l holdi	19 too	d at	4	FORD	elow.	Unit	at 3	39F	
Note Hot	water	MUST	be av	allab	le by	7-16-0	24 lD:	odam.	Canno	of open
und	ess hot	water	c i5	avail	able at	- 3 bo	wan	d ins	pected	
bu	health a						1			
Paragrain Ci-	****	1							/1-	10 211
Person in Charge	1 /	Reino	<u> </u>					Date	0/15	12024
Inspector (Signatu	ire)	11/1						Date	· 7-12)-24

The state of the s									
Risk Category: 3 Food Estab	lishn	nen	t Ir	spe	ctic	n Re	port	Page	e 1 of <u>2</u>
Establishment type: Permanent Temporary Mobile Other					_ [)ate:	7/1/24		
Establishment Filomena'S		4serin	of Contract	cticus Health		ime In_	12.30A	MAPM Time Out_	1:45 AMEM
Address 775 main St.			P	H)	1	HD N	1anchesta	er a	
Town/City Manchester					F	urpose	of Inspection:	Foutine	Pre-op
Permit Holder Michael Kelley		of Pu	ıblic He	S. V. S.		Reinspe		Other	
FOODBORNE ILLNESS RISK F	ACTU	IKS	ANI	ט פטפ	RLIC	HEAL	IH IN I ERVE	ENTIONS	
Risk factors are important practices or procedures identified as the most prevalent con		1000	2015 DVI			100 Personal Property Co.			
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered				complia			ot in compliance	N/A=not applicable	N/O=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type	1000				-			ted on-site during inspection	
IN OUT N/A N/O Supervision	V	cos	R			N/A N/C		on from Contamination	
Person/Alternate Person in charge present,	Pf	0	0	19 C	_		Food separated		PC 0
demonstrates knowledge and performs duties		-		16	19	0		urfaces: cleaned & saniti	
2 Certified Food Protection Manager for Classes 2, 3, & 4	С	0	0	17 🖎				ion of returned, previous tioned, and unsafe food	101010
/ Employee Health				The same	/			ture Control for Safety	
Management, food employee and conditional employee;	P/Pf			18 👁	10	00	roper cooking	time and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting	E/EI	0	0	19 🤇		00	Froper reheatin	g procedures for hot hol	ding POO
4 Ø Proper use of restriction and exclusion	P	0	0	20 C	0/9	00	Proper cooling	time and temperatures	POO
5 Written procedures for responding to vomiting and	Pf)		21 0	1/	00	Proper hot hold	ing temperatures	P 0 0
diagrheal events	PI	0	\circ	22	40	00	Proper cold hole	ding temperatures	POO
Good Hygienic Practices				23 0) X	00	Proper date ma	rking and disposition	R/PI)
6 Proper eating, tasting, drinking, or tobacco products us	se P/C	0	0					c health control: procedu	Ires
7 No discharge from eyes, nose, and mouth	С	0	0	24			and records	72.	P/Pf/C O
Preventing Contamination by Hands			TIE!	THE RESERVE	1	Marie E	Const	umer Advisory	THE REAL PROPERTY.
8 V P Hands clean and properly washed	P/Pf	0	0	25	10	0		y provided: raw/undercooked	food Pf OO
9 No bare hand contact with RTE food or a	DIDIO		227			1		ceptible Population	11100
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26		0		used; prohibited foods not off	ered P/C O
Adequate handwashing sinks, properly supplied/accessible	PFIC	0	0		1	Fo		ves and Toxic Substan	
Approved Source	0		90	27	10	0		approved and properly to	
11 O ood obtained from approved source	P/Pf/C	0	0		/-	200	Toxic substance	es properly identified,	
12 O Food received at proper temperature		0		28	0		stored & used	so propony identinou,	P/Pf/C O
13 V Food in good condition, safe, and unadulterated		0	_		1	(th Approved Procedure	PS
14 O Required records available: molluscan shellfish	Dinio				1			h variance/specialized	
identification, parasite destruction	P/Pf/C	0	0	29 🗷		0		riteria/HACCP Plan	P/Pf/C O
GO	OD RE	TAIL	PR	ACTIC	CES				terral residence
Good Retail Practices are preventative measures	to contro	I the a	additi	on of pa	athoge	ns, chem	icals, and physical	l objects into foods.	
	in approp							on-site during inspection	R=repeat violation
OUT N/A N/O Safe Food and Water	V	cos	R	OUT	Т			e of Utensils	V COS R
30 Pasteurized eggs used where required	Р	0	0	43	⊃ In-u	se utens	sils: properly store		000
31 Water and ice from approved source	P/Pf/C	0	0	44 () Uter	sils/equi	pment/linens: prop	erly stored, dried, & handle	ed Pf/C O
32 O Variance obtained for specialized processing methods	Pf	0	0	45 C	Sing	le-use/si	ngle-service article	es: properly stored & used	P/C 0 0
Food Temperature Control							d properly		c 0 0
Proper cooling methods used; adequate equipment for	Pf/C				98		Utensils	and Equipment	
lemperature control	312000	0		47 (Foo	d and no	on-food contact s	urfaces cleanable,	Dings of -
34 O Plant food properly cooked for hot holding	Pf	0	0	47			signed, constructe		P/Pf/C O
35 O Approved thawing methods used		0		48 🔾	Wa	ewashir	ng facilities: insta	lled, maintained and use	ed; pro
36 Thermometers provided and accurate	Pf/C	0	0	40	clea	ning age	ents, sanitizers, a	and test strips available	Pf/C
Food Identification				(49)	2 Nor	-food co	ntact surfaces cl	ean	1000
Food properly labeled; original container	Pf/C	0	0				Phys	ical Facilities	
Prevention of Food Contamination	_			50 🔾	Hot	and cold	d water available;	adequate pressure	Pf OO
38 Insects, rodents, and animals not present	PIC	0	0	51	Plu	nbing in	stalled; proper ba	ackflow devices	P/Pf/C O O
39 Contamination prevented during food preparation, storage & display	P/Pf/C	0	0	52	Sev	age and	waste water pro	perly disposed	P/Pf/C O O
40 Personal cleanliness	Pf/C	0	0	53 🔾	Toil	et faciliti	es: properly cons	structed, supplied, & clea	an Pf/C O O
41 Wiping cloths: properly used and stored	С	0	0	54 🔾	Garl	page and	refuse properly di	sposed; facilities maintaine	ed C O O
42 Washing fruits and vegetables	P/Pf/C	0	0	55	Phy	sical fac	ilities installed, m	naintained, and clean	P/Pf/C O O
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is our	ilabla		56	Ade	quate ve	entilation and ligh	iting; designated areas u	ised C O O
The most recent inspection rep	or is ava	ilaDI0	×		Nat	ıral rubb	er latex gloves n	ot used per CGS §19a-3	36f
2			,]			docume		Date corrections of	
Person in Charge (Signature) Date	-/-	CY		Priority	y Item	Violatio	ns		0
Borrow in Charge (Dringer) M. SANI A 1- 1/0.	,						Item Violations	7-11-20	
Person in Charge (Printed)						iolations		7-11-24	5
Inspector (Signature)	12	1		Risk F	actor	Public F	lealth Interventio	n Violations	3
Inspector (Signature) Date	10	7_		Repea	at Risi	-actor/	Public Health Int	ervention Violations	
Inspector (Printed) Jose Ramicez	1						es Violations		4
Appeal: The owner or energies of a feed establishment and in the				Requi	ires F	einspec	tion - check box	if you intend to reinsp	ect
Appeal: The owner or operator of a food establishment aggrieved by to or dispose of unsafe food, may appeal such order to the	Directo	or of l	corre Heal	th, not	/ insp	than for	iolation identified ty-eight hours a	by the food inspector	or to hold, destroy,

Reinspection 7-11-29

Food Establishment Inspection Report LHD Manches Inspection Report Continuation Sheet Establishment Filomena'S Town_Manchester TEMPERATURE OBSERVATIONS Item/Location/Process Item/Location/Process Item/Location/Process Temp WIF ambient 13F Hand sink by wasewash Prep table Pizz station 38F Hand SINK by PIZZA Stoten 100 F Customer BR Marinara 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 Item Number all 'C' violations above must be corrected by 7-11-24. much improved. Continue to monitor and the mometer available Person in Charge (Signature)

Inspector (Signature)

Risk Category: 3 Food Establishment Inspection Report Page 1 of 2											
Establishment type: Permanent Temporary						Т	ate:	5/3//10			
Establishment La Toavilla			4sezine	Connect	icon Health		ime In_	12:00 AM/FM)	Time Out / 3	.ద	AMUPIN
Address 21 Oak 5+.				DI	H)	L	HD /	Manchester			
Town/City Manchester						P	urpose	of Inspection:	utine Pre	-ор	
Permit Holder Mis PLUSPHIO		Co	01.0	ut Dep	uitui		einspe				
FOODBORNE Risk factors are important practices or procedures identif								TH INTERVENTIONS		s or injury	
Mark designated compliance status (IN, OUT, N/A, I				-	ompliand				Ma Control Con	=not obs	Co
P=Priority item Pf=Priority foundation item C=Core			-					Park and the second sec			violation
IN OUT N/A N/O Supervis		V	cos	R	~		N/A N/O				COS R
Person/Alternate Person in char demonstrates knowledge and po		Pf	0	\circ	15 3	X	0	Food separated and prote Food-contact surfaces: cle		P/Pf/C	00
Certified Food Protection Manage		С	0	0	17 🐠			Proper disposition of retur		P	longer lives
3, & 4					17 30			served, reconditioned, and			00
Employee Heal Management, food employee and of					18	4		Time/Temperature Control Proper cooking time and t		P/Pf/C	00
knowledge, responsibilities and		P/Pf	0	0	19 🔾	0		Proper cooking time and the proper reheating procedu		P	
4 9 Proper use of restriction and ex		P	0	0	20 🔾	Ď	00	Proper cooling time and to	emperatures	P	
5 Written procedures for respondi	ing to vomiting and	Pf	0	0	21	P	00	Proper hot holding temper	ratures	Р	
diarrheal events Good Hygienic Pra	otions	-101			22 V	0		Proper cold holding temper Proper date marking and		P	00
6 Proper eating, tasting, drinking,		e P/C	0			*	7	Time as a public health of		P(Pf	
7 O No discharge from eyes, nose,	and mouth	С		0	24 🔾	0		and records	, , , , , , , , , , , , , , , , , , ,	P/Pf/C	00
Preventing Contamination						/		Consumer Advi			
8 Hands clean and properly wash No bare hand contact with RTE		P/Pf	0	0	25	0	0	Consumer advisory provided: ra Highly Susceptible P		Pf	00
9 pre-approved alternative proces		P/Pf/C	0	0	26 🔾			Pasteurized foods used; prohib		P/C	00
Adequate handwashing sinks, prop	Pf/C	0	0			Fo	od/Color Additives and T		1.70		
Approved Sour				27 🔾	0	0	Food additives: approved	and properly used	P	00	
11 O O Ood obtained from approved s		P/Pf/C			6	\$	0	Toxic substances properly	y identified,	PPf/C	00
12 Food received at proper temper 13 Food in good condition, safe, ar	ature	P/Pf P/Pf	-	00		/.	10000	stored & used conformance with Approv	and Bracoduras	<u> </u>	
Pequired records available: mo	lluscan shellfish			Jacob Control			/	Compliance with variance		1	
identification, parasite destruction		P/Pf/C	0	0	29 🔾	0		process/ROP criteria/HAC		P/Pf/C	00
					ACTIC						
								icals, and physical objects int			
OUT N/A N/O Safe Food and W		1 appro	cos	_	or COS	_	or R	COS=corrected on-site duri Proper Use of Utens		v v	cos R
30 Pasteurized eggs used where require		P	0		The Party of Street, S	_	se utens	ils: properly stored	5115	C	00
31 O Water and ice from approved source		P/Pf/C	0	0	44 🔿	Uter	sils/equip	pment/linens: properly stored			00
32 Variance obtained for specialized pro		Pf	0	0				ngle-service articles: properly	stored & used	P/C	
Food Temperature					46	Glo	ves used	properly		_ C	00
Proper cooling methods used; adequitemperature control	iate equipment for	Pf/C	0	0	0.1	Foo	d and no	Utensils and Equi on-food contact surfaces cl			
34 O Plant food properly cooked for hot ho	olding	Pf	0	0	(T)X			signed, constructed, and us		P@c	00
35 O Approved thawing methods used			0	0	48 🔾	Wai	rewashir	ng facilities: installed, maint	tained and used;	Pf/C	00
36 Thermometers provided and accurate		Pf/C	0	0				ents, sanitizers, and test st	rips available	10 8800	
Food Identification Food properly labeled; original container	tion	T Def			49	Non	-food co	ntact surfaces clean	'A'	С	00
Prevention of Food Cor	ntamination	IFIC			50 0	Hot	and cold	Physical Facili d water available; adequate		Pf	00
38 Insects, rodents, and animals not present	State Continues Control Control	Pf/C	0	0				stalled; proper backflow de			00
39 Contamination prevented during food preparation	n, storage & display	PIETO			52 🔿	Sev	age and	waste water properly disp	osed	P/Pf/C	00
Personal cleanliness			0					es: properly constructed, s			00
Wiping cloths: properly used and stored Washing fruits and vegetables		P/Pf/C						refuse properly disposed; facilities installed, maintained		D/D	000
**************************************			-					entilation and lighting; design		C	86
Permit Holder shall notify customers that a copy of the r	nost recent inspection repo	ort is ava	ailable	÷.				per latex gloves not used per			
Person in Charge (Signature)	Date OJ -	24.	201		-		docume		corrections due		#
Person in Charge (Signature)	Date U	21-7	7	-			Violation I		13/24		2
Person in Charge (Printed)	ramo"						iolations	S K	11 2		5
122-07	2' - 11-	11-	1		Risk Fa	ctor	/Public F	lealth Intervention Violation	ns		\$
Inspector (Signature) Date 5 5 4 Repeat Risk Factor/P Good Retail Practices					Public Health Intervention	Violations					
Inspector (Printed)	iceZ	ı							tend to reinspect	-	/
Inspector (Printed) Requires Reinspection - check box if you intend to reinspector. The owner or operator of a food establishment aggrieved by this order to correct any inspection violation identified by the food inspector.						ood inspector or to	hold,	destrov			
or dispose of unsafe food, may ap	peal such order to the	Direct	or of	Heal	th, not I	ater	than for	ty-eight hours after issua	nce of such order		

Reinspection 6/14/24

1st - White: Health Department

	F00	d Esta	<u>biisnment insp</u>	ection i	Report	Pageo	<u> </u>
LHD MO	anchester		Inspection Report Continuation S	heet		Date 5/3//	24
Establishr	ment La Togl	rilla	Town Manc	nester	Rein	Spection 6	14/24
			TEMPERATURE OBSER	RVATIONS			
Item	/Location/Process	Temp	Item/Location/Process	Temp		ation/Process	Temp
cold A	IMP Steak	38	chicken (not hold) 140	handsin		110
1 '	chicken	37	rice 11	180	3-ba	not	110
8	liced tomatoes	39	Steak intern	al 205	bathroom	n employee	90°F
	coolled poric	40		3.55		customer	134°F
1	cooked shring	39	reach in ribs	38	dishmack	rine chlorine	100 ppm
	on cold prep		Shredded mozz	38			
l	chicken	37	Sassage	38			
	steak	38	reach in freeze				
		OB	SERVATIONS AND CORRE	CTIVE ACTI			
Item	Violations cited in this	report must be	e corrected within the time frames be	elow, or as stated	in sections 8-405.	11 & 8-406.11 of the f	ood code.
Number							
16.00	0. 61	0.000	La 01. 1 1 1 1	S . 1 .	1/21-1	- 1 le	
			towels at hand				
47 PF	Knife w/	me ta	I shavings on	it in	Knife	holder 1	
1			i 1				
			not used for fo	٥٥٠ ، ١٤٩٨	loved tr	om nora	
54 C	no trashca	n by	handsink				
37C	1		e bottles in 1	older o	0 (00)/	1000 1 51001	Voc
_							
15 C	4000 JUCON	ered in	n v/c cold	omp u	not on	COOKling	
410			rying dishes o				
28 P	italabeted	Olo essà	as I hattle	1	7 1		
			cal bothe ac	NON	m 5° g	lay V	
23PF	improper d	ate or	na King V			<i>t.</i>	
39PF			freezer uncken	ice	build up	1 deposs	
****				, ,	301/K OP	/ @ O. 13 V	
20C	mop not pr	speriy	nung				***************************************
51 P	customer be	ath, 000	n hot water @	13400	max 11	5° - allowe	d
				- ,	-		
				Jrami	CEZ QMAN	chester ct.	900
				ioras Persona de Colo de Cara			ے ح
Note:	All TCS. rea	dy - to-	eat, food must	be or	operly	date mari	ed
1)210.	DTC SIGIO	La 15	-10	0/11	T		- · · · · ·
MOLE,	1 TC States	NO 17	planning on inst	alling a	1 02+000	o/ with	mymot
	to contac	t Bui	Iding Dept and	SBbm	+ Spec	Sheets to	Health
Note:	Discussed w	1 PTC	to monitor dist	on Cale	0 0612	1 0 4010	100
174	000000	1 1 40	10 / 10/ 10/ 013/	1124CM1/)+ (mill	ine lask n	707
Note	Provided al	ergen	poster				
			mer more ter	analla	6No		
				المراجعة		-1	1- :
Person in	Charge (Signature)	Mus'	MUBBANO			Date 5/31	124.
	(Signature)					Date 5/3/	120
	1-3 XU //					Date. 1 1 2	1 (47

Risk Category: 3	Food Establ	ishn	nent li	nspecti	ion Re	port	Page 1 c	of <u>2</u>
Establishment type: Permanent	Temporary Mobile Other				Date:	7-3-6	24	
Establishment Poke D),o\U		teering Cons	ecticus Health	Time In	10:30 A	MPM Time Out 12	· OO AMPIN
Address 179 Deming	st. #12		OP	H)	LHD N	lanches	ter	
Town/City Manchesti		J			Purpos	e of Inspection:	Routine Pro	э-ор
Permit Holder	hus		of Public H	ealth	Reinsp		Other	
	DĎBORNE ILLNESS RISK FA procedures identified as the most prevalent cont							ss or injury.
	N, OUT, N/A, N/O) for each numbered it			compliance		not in compliance		O=not observed
P=Priority item Pf=Priority foundation	item C=Core item V=violation type Supervision	Mark in	cos R		OS and/o		on from Contamination	R=repeat violation v cos R
	Person in charge present,	Pf	00	15 00	000	Food separated	and protected	P/C O O
demonstrates know	wledge and performs duties tection Manager for Classes 2,			19 0 g	% O		urfaces: cleaned & sanitized	(P)Pf/C (S)
3, & 4		0	00	17 🐼 🤇	> M	served, recondi	on of returned, previously tioned, and unsafe food	POO
Manager of Control	mployee Health employee and conditional employee;			18 0	000		ture Control for Safety time and temperatures	P/Pf/C O O
knowledge, respon	nsibilities and reporting	P/Pf	00	19 00	000	Proper reheating	g procedures for hot holding	POO
Written procedure	riction and exclusion s for responding to vomiting and	Р	00	20 0	200	Proper cooling Proper hot hold	time and temperatures	P 0 0
5 diarrheal events	s for responding to vorniting and	Pf	00				ding temperatures	P O O
	Hygienic Practices					Proper date ma	rking and disposition	PØ00
	ting, drinking, or tobacco products us eyes, nose, and mouth	e P/C	00	24 🐼 🤇	000	Time as a publi and records	c health control: procedures	P/Pf/C O O
Preventing	Contamination by Hands			/			umer Advisory	
8 Hands clean and p		P/Pf	00	25 🐼 🤇			y provided: raw/undercooked food	Pf OO
	tact with RTE food or a mative procedure properly followed	P/Pf/C	00	26 0 0	0		ceptible Population used; prohibited foods not offered	P/C O O
10 S Adequate handwash	ning sinks, properly supplied/accessible	Pf/C	00	20 0	Property and Parkets		ves and Toxic Substances	
	pproved Source	DIDGG) I		approved and properly used	POO
12 O Food received at p	m approved source	P/Pf/C	00	(28)	X O	stored & used	es properly identified,	PPf/C
13 Ø P Food in good cond	dition, safe, and unadulterated		00			Conformance w	th Approved Procedures	
Required records identification, para	available: molluscan shellfish	P/Pf/C	00	29 🔾	0		h variance/specialized riteria/HACCP Plan	P/Pf/C O O
	GO			RACTICES				
Good Retail	Practices are preventative measures to							
Mark OUT if numbered item is not in co	ompliance V=violation type Mark in Food and Water	n appro	cos R	for COS an	id/or R		on-site during inspection	R=repeat violation
30 Pasteurized eggs used		P	00		n-use uter	sils: properly stor	e of Utensils	000
31 O Water and ice from app		P/Pf/C		44 O U	tensils/equ	ipment/linens: prop	perly stored, dried, & handled	Pf/C O O
	pecialized processing methods	Pf	00			single-service article ed properly	es: properly stored & used	P/C 0 0
	s used; adequate equipment for	Delo		40 0 0	010463 036		and Equipment	1000
temperature control 34 O O Plant food properly coo	had for box botaling		00	14/10			surfaces cleanable,	P/Pf/C O O
35 O Approved thawing meth		Pf/C	00			signed, construct	ed, and used lled, maintained and used:	1
36 C Thermometers provided			00				and test strips available	Pf/C O
	od Identification	-/-	1-1-			ontact surfaces c	lean	000
Food properly labeled; original Prevention	of Food Contamination	PIG	00	50 O H	lot and co		ical Facilities ; adequate pressure	Pf 00
38 Insects, rodents, and animals n	ot present	Pf/C	00			nstalled; proper b		Pf O O
39 Contamination prevented during for	ood preparation, storage & display		00	52 O S	ewage ar	d waste water pro	perly disposed	P/Pf/C O O
40 Personal cleanliness 41 Wiping cloths: properly used ar	nd stored	Pt/C	00	53 O T	oilet facili	ties: properly cons	structed, supplied, & clean sposed; facilities maintained	Pf/C O O
42 Washing fruits and vegetables			00	55 O P	hysical fa	cilities installed, n	naintained, and clean	C O O
Permit Holder shall notify customers that	a copy of the most recent inspection repo	ort is ava	ailable.	66)X A	dequate v	entilation and ligh	nting; designated areas used not used per CGS §19a-36f	000
Person in Charge (Signature)	h 7/	2/2	(1.	Violation	s docum	ented	Date corrections due	#
/,\	Date //	12	.Ψ		em Violati oundation	ons Item Violations	7-13-24	12
Person in Charge (Printed)	her Zhao			Core Item	n Violation	is	10-3-24	q
Inspector (Signature)	Date Date			Repeat R	Risk Facto		on Violations tervention Violations	4
Inspector (Printed)	Ranicez					ces Violations	x if you intend to reinspect	8
Appeal: The owner or operator of a	food establishment aggrieved by the	nis orde	er to corr	ect any in:	spection	violation identifie	d by the food inspector or t	o hold destroy
or dispose of unsafe f	food, may appeal such order to the	Directo	or of Hea	ith, not lat	er than fo	orty-eight hours a	after issuance of such order	r.

reinspection 7/15/24

	FOO	d Esta	blish	<u>ment Inspe</u>	ction h	keport	Page _ Z c	of <u>4</u>
	anchester		Inspectio	n Report Continuation She	1	Date	_e 7-3-	24
Establishm	ient <u>Poke Doi</u>	\cap		Town Manche	Ster	- reinspe	ction 7	18/24
			TEMF	PERATURE OBSERV	/ATIONS			
Item/I	Location/Process	Temp	Iten	n/Location/Process	Temp	Item/Location	/Process	Temp
Cold ore	e table by Fryer		WIFO	imbient	-1 F	Handsink by	Prep Sink	10F
1	Cooked onion	91F		line coles/aw	Marie AIS	Customer Han	d sink	115F
	milk	415	71011	11116 Spice 111	111	W-1 - W 1,5-11	J 3:107	6122
11/21	7 1	- 1 1	1	Shrimp 414	Zar			
	nold (ice	200F	1/ / 11	Sauce	39F			
WIC	Salmon	AIF 41F	Hot Ho	d brown rice	150 F			
	Chicken							
	Shrimp	41F						
l	Cos	41F						
			SERVAT	IONS AND CORREC	TIVE ACTIO	NS		
Item	Violations cited in this	report must be	corrected v	within the time frames belo	w, or as stated	in sections 8-405.11 &	8-406.11 of the	food code.
Number								1
411		(ratio .	. 10 1 6			
				reptable i				
				n (CFPM) ca			1 through	<u> </u>
37C	unlabeled say	reeze ba	iffles.	throughout	W/ Sauce	? <i>5</i> '		
				water by t				
289	unlabeled Sa	veeze !	offle	W/ Somp COS				
	Food not pro							
49e	WIF Floor	unclea	۸	, 00 , 11 , 00 , 0				
490	exterior of			lean				
490	Shelving un	ı						
560	Hood baffles	unclean	. H00	d was due to	be cle	raned June	2024	
490	Ilmar unlar	acrion.	201	lan			2	
16 P	chlorine buc	ket at	Front	line at opp	m/Co-	5) remade.	10 50pp	m.
U	1174 106 07	Cappie	Unoc	I hand sill a	1 tront	ine unclean		
Note	Parasite des	troction	n re	cords availa	able c	and never	ned	
Note				ite during				
				ise as hec				
	★ 10.000 to			CFPM is awa	ailable	the FSE	d twm	e close
207	until a	CFPM	10 Zi	r site.				
NOK				old prep un				
NOR	Keep lids	on f	foo	service cold	garg f	foods who	en not s	erving.
Juote	Pest control	twice	a mon	th				J
Note	Test Strips	& the	mome	e available			y ~	
Person in	Charge (Signature)	1/2	6			Da	ate 7/3/3	24
Inspector ((Signature)	2 2				Da	ate 7 - 3'-	- 24

3		621945				- 2
Risk Category: Food Estab	lishn	nent l	nspecti	ion Report	Page 1 o	f_ _ 5_
Establishment type: Permanert Temporary Mobile Other				Date: 7-10-24		
Establishment Randys Woosfer St. Pizza		teating Con	section Health	Time In 12:00 AMIEM	Time Out [: 30	2 AMIEM
Address 285 E. Center St.		DP	H)	LHD Mancheste	26	l.
Town/City Manchester				Purpose of Inspection:	Routing Pre	е-ор
Permit Holder Eweling Oldzie	C	onnecticut D of Public I	epartment Health	Reinspection Oth	er	
FOODBORNE ILLNESS RISK FA	ACTO	RS AN	D PUBL	IC HEALTH INTERVENTION	ONS	
Risk factors are important practices or procedures identified as the most prevalent cont						ss or injury.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered it	tem	IN=in	compliance	OUT=not in compliance N/A	A=not applicable N/C	D=not observed
P=Priority item Pf=Priority foundation item C=Core item V=violation type						R=repeat violation
IN OUT N/A N/O Supervision	V	COS R			m Contamination	V COS R
Person/Alternate Person in charge present, demonstrates knowledge and performs duties	Pf	00		Food separated and p		Pc 0 0
Certified Food Protection Manager for Classes 2	-			Food-contact surfaces Proper disposition of r		
2 O O O 3, & 4	С	00	17 0	served, reconditioned		POO
Employee Health				Time/Temperature C	ontrol for Safety	
Management, food employee and conditional employee;	P/Pf	100	18 🔾 🤇	Proper cooking time a	and temperatures	P/Pf/C O O
knowledge, responsibilities and reporting			19 0	O Proper reheating proc	edures for hot holding	POO
Proper use of restriction and exclusion	P	00	20 0	O Proper cooling time as	nd temperatures	POO
Written procedures for responding to vomiting and diarrheal events	Pf	00	21 0 0	O Proper hot holding ter	nperatures	POO
Good Hygienic Practices			6300	Proper cold holding te	mperatures	POO
6 O Proper eating, tasting, drinking, or tobacco products us	e P/C	1010		Proper date marking a		P(Pf) 0 0
7 O No discharge from eyes, nose, and mouth	C	00	24 0	and records	ir control, procedures	P/Pf/C O
Preventing Contamination by Hands				Consumer A	Advisory	
8 O Hands clean and properly washed	P/Pf	00	25 🔾			Pf OO
9 No bare hand contact with RTE food or a	P/Pf/C	00		Highly Susceptib	le Population	
pre-approved alternative procedure properly followed	70.07/ 1000m		26 🔾	Pasteurized foods used; pr	rohibited foods not offered	P/C O O
Adequate handwashing sinks, properly supplied/accessible	(P)C	00		Food/Color Additives an	d Toxic Substances	
Approved Source	l nuncia	1 - 1 -	27 0 0		ved and properly used	POO
11 C Food obtained from approved source 12 C Food received at proper temperature		00	28 0	Toxic substances prop	perly identified,	P/Pf/C O O
13 O Food in good condition, safe, and unadulterated		00		stored & used		11010
Beginsed assessed as it blooms to the transfer of				Conformance with App Compliance with varia		
identification, parasite destruction	P/Pf/C	00	29 0	process/ROP criteria/l		P/Pf/C O
GO	OD RE	TAIL PI	RACTICES	S CONTRACTOR OF THE STREET	THE RESERVE	
Good Retail Practices are preventative measures to	o contro	ol the addit	tion of patho	gens, chemicals, and physical object	s into foods.	
COUNTY TO SEE PROPERTY OF THE			for COS and	d/or R COS=corrected on-site	during inspection F	R=repeat violation
OUT N/A N/O Safe Food and Water 30 Pasteurized eggs used where required	٧	COS R	OUT	Proper Use of U	tensils	V COS R
30 Pasteurized eggs used where required 31 Water and ice from approved source	P	00	#3)90 In	-use utensils: properly stored		000
32 O Variance obtained for specialized processing methods	P/Pf/C Pf	00	(#4) (A) (I)	tensils/equipment/linens: properly sto	red, dried, & handled	Pf(C)OO
Food Temperature Control	FI	00	46 0 6	ingle-use/single-service articles: prop loves used properly	erly stored & used	(D)(O)(O)
Droppe applies mathed and death of the first		T	40 0	Utensils and E	quinmont	1000
temperature control	Pf/C	00	22 - AFG	ood and non-food contact surface		
34 O Plant food properly cooked for hot holding	Pf	00		roperly designed, constructed, and		P/Pf(C) (C)
35 O Approved thawing methods used	Pf/C	00		arewashing facilities: installed, m		
36 C Thermometers provided and accurate	Pf/C	00	40 Cl	eaning agents, sanitizers, and tes	t strips available	Pf/C O O
Food Identification				on-food contact surfaces clean		000
③ ← Food properly labeled; original container	PfO	00		Physical Fa		
Prevention of Food Contamination	(3)		50 O H	ot and cold water available; adequ	uate pressure	Pf O O
(8) 🕸 Insects, rodents, and animals not present Contamination prevented during food preparation, storage & display Personal cleanliness			51 O P	lumbing installed; proper backflow	/ devices	P/Pf/C O
40 Personal cleanliness	P/Pf/C	00	52 0 5	ewage and waste water properly o	lisposed	P/Pf/C O O
41 Wiping cloths: properly used and stored	C	00		pilet facilities: properly constructed arbage and refuse properly disposed		Pf/C O O
42 Washing fruits and vegetables		00	(55) (36) PI	hysical facilities installed, maintair	; racilities maintained	000
			68 00 A	dequate ventilation and lighting; d	esignated areas used	P/P(C) O O
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is ava	ailable.	O N	atural rubber latex gloves not use	d per CGS \$19a-36f	
Secrett Mad 71	-	011	Violation		te corrections due	#
Person in Charge (Signature Cullu Ollh Date	Ule	24		em Violations	7/13/24	q
Person in Charge (Printer Willing Oldrie)		/		oundation Item Violations	1/20/24	9
	1920			Violations or/Public Health Intervention Viola	10/10/24	21
Inspector (Signature)	0-	24	Repeat Ri	isk Factor/Public Health Interventi	on Violations	8.
01/00/11				ail Practices Violations	on violations	28/
Inspector (Printed) 3058 Kamilez			Requires	Reinspection - check box if you	intend to reinspect	
Appeal: The owner or operator of a food establishment aggrieved by the	nis orde	er to corr	ect any ins	spection violation identified by th	e food inspector or to	hold, destroy.
or dispose of unsafe food, may appeal such order to the	Directo	or of Hea	ilth, not late	er than forty-eight hours after iss	suance of such order.	3. Company of the Com

Reinspection 7-22-24

1st - White: Health Department

	Foo	<u>d Esta</u>	<u>blishn</u>	<u>nent Inspe</u>	ction	Report	Page _ Z	of
LHD Ma	anchester			Report Continuation Shee		100	Date 7-10	-24
Establishr	nent <u>Randy Wa</u>	oster st.	Pizza -	rown Manche	ster	-RI	7-22-	24
			TEMPE	RATURE OBSERV	ATIONS			
Item	/Location/Process	Temp	^	ocation/Process	Temp		ation/Process	Temp
WIC	meatball 5	38F	rizza	Station		Hand Sin	K Basement	IIIF
1	Chicken	39 F	1	Pelle(5	39F	- Control of the cont	+ BR Sink	C. C
	Sliced tomatoes			ground beef	40F		BR SINK	ILLE
	2: 23	41F		Maria de la		Wording	DISTINA	
0 1)	122a	_		Mashod potato	5 40 5			
rold	preptable cookline			Pizza Souce	914			p Rite, É
	sliced tomorfoes						Tell	
	(anch	39F					Fech Em	Diado nul
							PA PA BA	SS WHEN BEANGE AR TURNS ORANGE
				NS AND CORREC				ACOPTANA COLOR BOTO
Item	Violations cited in this	report must be	corrected with	nin the time frames below	w, or as stated	d in sections 8-405	.11 & 8-406.11 0	lou sae.
Number	EWA CFF	PM pn	Site.					
		1 20	0.,0					
		1 ==	1 1	1 1	1			
10 PF	No paper to	swels a	at har	d Sink in	basemo	ent /		
49C	Speed (ack							
					.1			
370	unlabeled bi						·	
37c	Unlabeled	Savee	ze bot	tles through	shout			
38 PF	Flies presen	t in b	a Seme	it oreo area	Month	nly Pest	antrol New	Britain
16 PF	unclean ta	ble mi	sunted a	Can preper	dade		Silver Fest	CATILOT
39 PF						sh cana		
		1 1	,			/ Carr		y
5000	interior of					/	111.	
49 06	unclean kni	re Sta	ed 0/1	unclean not	e book	on pref	table	
	Dish racks						ment v	,
47 C	Cracked pl	astic 1	contain	ers on wire	e Shel	ving by	dish mac	hige v
440	Sumbled is	tensils	s on	wire shell	ling b	y dish	machine V	
49 C	exterior o	f ice	Machin	ve unclean				
16 PF	interior of			unclean				
15 P	Bottle of		1 1		mach	ine V		
550	Cove base	.)	1 1		2 mach			
450	0 1		stored ,	J / 1	1	ment /	_	
10PF	1100		n emo	1 11		basement	/	
39 P	Non Commercia	1 1	cket u	1-1-	e 1	un cirios		
	in Unlabele	7		111	1	. /		
	1, 1, 2019			0.20	ook line			
710	Kep table	y over	S GARAGE	gauged, not	ON NO	st or equ	olvalent	1011
Person in	Charge (Signature)	well	u Ol	de la			Date #/0/	24
Inspector	(Signature)	10	~	,•,•			Date 7-10	1-24

Food E	<u>stablishment Inspe</u>	ction R	Report Page 2	.of <u>-</u> 5
LHD Manchester	Inspection Report Continuation Sh		Date_ 7-10-	-24
Establishment Randys Woosfe	x St. Pizza Town Manche	ster		
	TEMPERATURE OBSER	VATIONS		
Item/Location/Process Te	emp Item/Location/Process	Temp	Item/Location/Process	Temp
Lance RIC by pien	Call Cawer valor of			
1000 PIC BY OVEIL	_ Cold drawer under gri			
Chicken 41	F Chicken Wing			
Sliced cheese 411	F Cold prep table by ant			
ham 411	5 slices format	& ADF		
Sical banatas 11	51000	AIR		
Sliced tomatoes 41	Cheese	111		-
Ldoor RIC AtoSa	Chicken	415		
1 (Oasted tomatoes 40	OF Hot Hold Maripara	135F		
l Pepperoni 40		160 =		
· 14 FORDIN D	OBSERVATIONS AND CORRE	CTIVE ACTIO	NS	
Violations cited in this report	must be corrected within the time frames bel	ow, or as stated i	n sections 8-405.11 & 8-406.11 of the	e food code.
Item Number		W\$X		E FOR EL DO BARRY
Number				
49C Pizza Cold	100 1 0	1	2.0	
	preptable gasket	s uncle	zari	
49c interior of pi	37 cold ocen table	uncles	· ^	
		Unclea	<i>(</i> 1)	
169 Chlorine bucket	7200 00m V			
	at hand sink by ou	201		
2200 118 Trasi Can	at hallo Sills by ou	درو		
23 PF Containers of	tood not properly day	ema(kec	Moughout	
	over grill fryer unch			
A			- 4	
, , , , , , , , , , , , , , , , , , , ,	I equipment at cooklin	ie uncle	ear	
10PF equipment Stor	ed in hand sink by	Frec -		
	black speed rack car		leanable lunchen!	damanel
49C 10 000000 000000	a vala la Fara con	1/0	J. S. MOLDIO JOHOLOWY	3
100 07 MICH	cowave by Fryer uncl	CAN		
49C gaskets uncle	an throughout			
490 Wire Shelving	by fryer unclean			
490 Wire Shelving 490 Floor unclean	throughout			
	111100-53100			
Note: continue to de	activities uposed and	ment v	hornahant ESE	
				0
SODM'T WATER	procedure to Health D	ept. 10 1	use lime as a 1	100611C
Health contro	1 for pizza 801d	by my	e slice. Weld t	o be
labered wir	th time prepleises	ed time	. No more then	4 hours.
NOVE: 2-DOOR RIC At				
Note Discussed orace	s date macking All R	TF cofci	perated foods must	he.
Note Discussed prope date marked o	nd used at distarle	1 isthin	7 days Fools	not
1. La markel.	will be discarded.	2 WILIII	1 0003	1101
10075 1100 100 1	MIN DE CIDEM DED.		/	, , ,
Person in Charge (Signature)	en olgen		Date 7/1	10/24
Person in Charge (Signature)	Mill.		Date 7- 1/	2-24
				/ /

Risk Category: 2 Food Estab	olishr	ment l	Inspec	tion Report	Page 1	of_ Z	
Establishment type: Permanent Temporary Mobile Other				Date: 2/2	1/24		
Establishment Roosters Chicken & Waffles		seding Co.	unochicus Mealles	Time In 11:40	1	20	AM/6N
Address 394 Middle Toke West	1	DE	LI	LHD MANC	9 -		_Auto
Town/City Manchester	1			Purpose of Inspe		re-op	
Permit Holder RICCardo Francois		Connecticut I	Department Health	Reinspection	Other		
FOODBORNE ILLNESS RISK F	ACTO	DRS AN	ID PUBL	IC HEALTH INT	ERVENTIONS		nt's en
Risk factors are important practices or procedures identified as the most prevalent cor	ntributing f	factors of fo	odborne illnes:	s or injury. Interventions ar	e control measures to prevent foodborne illn	ess or injur	у.
Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered	item	IN=ir	n complianc	e OUT=not in compli	WORLD THE THE THE THE THE THE	/O=not ob	
P=Priority item Pf=Priority foundation item C=Core item V=violation type	Mark in	n appropr	iate box for	COS and/or R COS=	corrected on-site during inspection		at violation
IN OUT N/A N/O Supervision	V	COS R			otection from Contamination	V	COS R
Person/Alternate Person in charge present,	10		715/0	S O Food sep		PC	
demonstrates knowledge and performs duties	P	00	160	Food-con	tact surfaces: cleaned & sanitized		
Certified Food Protection Manager for Classes 2,	19			Dropper di	sposition of returned, previously		
3, & 4	0		17 🕏	served, re	econditioned, and unsafe food	P	00
Employee Health	HELL			/Time/Ter	nperature Control for Safety		-
Management, food employee and conditional employee;	P	500	18 🔾	O Proper co	ooking time and temperatures	P/Pf/C	000
Z z z z z z z z z z z z z z z z z z z z			19 🔾	O O Proper re	heating procedures for hot holding	1 P	
4 Proper use of restriction and exclusion	P	00	20 🔾	O Proper co	oling time and temperatures	P	00
5 Written procedures for responding to vomiting and	Pf	00	21 🔾	O O Proper ho	ot holding temperatures		00
diarrheal events	454		299	✓ Proper co	old holding temperatures		200
Good Hygienic Practices			23 🕏	O Proper da	te marking and disposition	P/Pf	00
Proper eating, tasting, drinking, or tobacco products us			24 0	Time as a	public health control: procedures		
7 O No discharge from eyes, nose, and mouth	С	00		and recor		P/Pf/C	
Preventing Contamination by Hands 8 O Hands clean and properly washed		1 - 1 -			Consumer Advisory		
No hard hand contact with DTF feed as	P/Pi	f 0 0	25		advisory provided: raw/undercooked food	Pf	00
pre-approved alternative procedure properly followed	P/Pf/C		0		y Susceptible Population		
Adequate handwashing sinks, properly supplied/accessible	(A)rc	0.000	26	O D Pasteurized	foods used; prohibited foods not offered	P/C	00
Approved Source	(Br/C		107101	Food/Color /	Additives and Toxic Substances		111
11 O ood obtained from approved source	DIDEGO	Jala	27 0	O V Food add	itives: approved and properly used	d P	00
12 O Food received at proper temperature		00	(28)		stances properly identified,	PPPC	
13 Food in good condition, safe, and unadulterated	P/Pf	00		Stored & t		.00	
Demind and Mild and discontinuous	FIFI	00	-	Complian	ice with Approved Procedures		
identification, parasite destruction	P/Pf/C		29 0		ce with variance/specialized	P/Pf/C	00
	OD RE	TAII PI	RACTICE	S DIOCESSIN	OF CITIETIA/HACCP Plan		
Good Retail Practices are preventative measures in	to contro	of the addi	tion of patho	oriens chemicals and o	hysical phicata into feeds		
			for COS ar	odlor P COS-corr	ected on-site during inspection	_	
OUT N/A N/O Safe Food and Water	v	COS R	OUT		ected on-site during inspection er Use of Utensils		t violation
30 Pasteurized eggs used where required	Р	00		n-use utensils: properl	v storod	V	COS R
31 Water and ice from approved source	P/Pf/C		44 0 1	Itensils/equipment/linen	s: properly stored, dried, & handled	C Pf/C	00
32 O Variance obtained for specialized processing methods	Pf	00	45 O S	ingle-use/single-service	articles: properly stored & used		00
Food Temperature Control				Bloves used properly	articles, properly stored & used		
Proper cooling methods used; adequate equipment for	200				ensils and Equipment		00
temperature control	Pf/C	00	C) . F	ood and non-food cor	tact surfaces cleanable,		J
34 O O Plant food properly cooked for hot holding	Pf	00	(47/9C)	roperly designed, con	structed and used	P/Pf/C	00
35 O O Approved thawing methods used	Pf/C	00	I V	Varewashing facilities:	installed, maintained and used;	1	
Thermometers provided and accurate	PfC	00	48 O c	leaning agents, sanitiz	zers, and test strips available	Pf/C	00
Food Identification			49 XO N	lon-food contact surfa	ces clean	(3)	00
Food properly labeled; original container	PC	00			Physical Facilities		100
Prevention of Food Contamination			50 O H	lot and cold water ava	ilable; adequate pressure	Pf	00
38 Insects, rodents, and animals not present	Pf/C	00	(5) (D) P	lumbing installed; pro	per backflow devices		00
39 Contamination prevented during food preparation, storage & display		00	52 O S	ewage and waste wat	er properly disposed	PIDFIC	00
40 Personal cleanliness	Pf/C	00	53 O T	oilet facilities: properly	constructed, supplied, & clean	Pf/C	00
41 Wiping cloths: properly used and stored	C		54 O G	arbage and refuse prop	erly disposed; facilities maintained	C	00
42 O Washing fruits and vegetables	P/Pf/C	00	(55) XO P	hysical facilities instal	led, maintained, and clean	P/Pf/C	00
Permit Holder shall notify customers that a copy of the most recent inspection repo	ort is our	ilabla	58 X A	dequate ventilation ar	led, maintained, and clean nd lighting; designated areas used	7	00
, and a sopy of the model resont inspection repr	JIL IS ava	mable.	ON	atural rubber latex glo	ves not used per CGS §19a-36f		0 0
Porton in Charma (Cimentum)			Violation	s documented	Date corrections due		#
Person in Charge (Signature) Date 21 8	12/20	24	Priority Ite	em Violations	2-24-24	4	
Person in Charge (Printed)	7		Priority Fo	oundation Item Violation	ons 3-2-24		5
. around a little of a Cont			Core Item	Violations	5-21-21	10	
Inspector (Signature)	211.	11	Risk Fact	or/Public Health Inten	vention Violations	Ĭ ĕ	
Inspector (Signature) Date	~110	×1	Good D	isk Factor/Public Hea	Ith Intervention Violations	Ö	7
Inspector (Printed) Sose Ramirez	1		Requires	tail Practices Violation	S Is how if you into a late	1	0/
Appeal: The owner or operator of a food establishment aggrieved by the	nis orda	er to cor-	ect opvires	remspection - chec	k box if you intend to reinspect		V
or dispose of unsafe food, may appeal such order to the	Directo	or of Hea	ith, not lat	er than forty-eight ho	runed by the food inspector or to	o hold, d	estroy,
COLOR OF THE PROPERTY OF THE P			,	and it is ty orgitt 110	and after issuance of such order		

Inactivates 17 24
as of 2-21-24
2nd - Yellow: Owner/Operator/Person in Charge

Food Establishment Inspection Report LHD Manchester Inspection Report Continuation Sheet Establishment Roosters Chicken Wattlestown Manchester TEMPERATURE OBSERVATIONS Item/Location/Process Temp Item/Location/Process Item/Location/Process Temp Temp COL prep table SINK by 3 bay 105F 37F SINK emplayee Bathson Shredded these MOF (aw chicken winds **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 49C interior of all equipment in RIC stored directly on 15 P 51c Pres Sink heina washed counter & behind cold les W/ Vacious Sauces throughou unclean cleaning Chemica he cleaned To ap containers of various sauces stored discarded damaaed knowledgeable on basic Food Safety principles. Employee called owner, no answer Louinel Sterling 860-960-4222 Riccardo Franchise owner Person in Charge (Signature) Date 02 21 24

Inspector (Signature)

7	Foo	d Esta	blishment Insp	ection R	Report Page_=	3_of_3_
LHD_M	anchester		Inspection Report Continuation S		Date 2/2	1/24
Establishn	nent Roosters	chicken.	& WaffleStown Manch			L
Itom	/Location/Process	Toma	TEMPERATURE OBSE			
item	Location/Process	Temp	Item/Location/Process	Temp	Item/Location/Process	Temp
		ОВ	SERVATIONS AND CORRE	ECTIVE ACTIO	NS	home many and all
Item	Violations cited in this	report must be	e corrected within the time frames b	elow, or as stated in	n sections 8-405.11 & 8-406.11 o	f the food code.
Number						
Note	00000000	L. L. 1 L	la av a ca a millu	dia lil	1	
NOTE	EMYloyee 57	ated t	hey are manually w	insping Kit	chen wases in pr	ep SIMF
	because z	3 bay	Sink plumbing	leaks u	when used.	
Note			be scheduled			
Marka	_ , , , ,		. /	1. / / /	- /	1 11
10098	JK Spoke		Low (owner) on			
	Violations	w/L	ov. Low agreed +	o voluntar	rily close until	3ba4
	Sink is	repaire	d, thermometer i.	5 availab	le and com	15 00
	319E 001111	9 411,0	operating hours.	1903111ess	to remain c/o.	sed
. 7	Until LOU	Contac	cts JR or healt	n dept. a	and reinspection	1 completed
Vote			Sauces have bee			
	makes the	00 000	TCS. Explained	1-1-11	. I	-1
	1190/003 1116	1 1 1	103. Explained	10 COO TI	nat a leguest r	דבטף
	be Submit	ted q	approved by healt	h dept. 1	before that specie	al process
	continues.				· ·	
			+			
	Inactivat	ed 51	17/24 a5 of	2/21/2	24	
				a all		
		0				
erson in (Charge (Signature)	Kowi			Date 02	21/24
nspector (Signature)	7	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		2/	21/2/
1,		1	×		Date L	XIIde

		d Establishme	ont Incr	nectio	on Repo	rt	Page 1 of	2
sk Category: 3		584505	;iit iiiop		~	121/24		
tablishment type: P	ermanent Temporary Mobile		Connecticut		Date: 0	2:30 AMP	M Time Out 10:0	D AMPM
tablishment Sh	ady Glen Dairy	Bar	BU	The state of the s	Time In)ancheste		
Idress 8 40	middle Toke E)PF			Inspection:	Routine Pre-	op
own/city Man	ichester	Con	nnecticut Departs of Public Health		Reinspecti	28	ther	
1.5	Illiana March					· · · · · · · · · · · · · · · · · · ·	TIONS	e er injunt
initi riolas,	the ar procedures identified as the m	lost prevalent contribution	tors of foodbor	rne illness	or injury. Interve	ntions are control mea	N/A=not applicable N/C	=not observed
Risk factors are impo	pliance status (IN, OUT, N/A, N/O) for ea prity foundation item C=Core item V=	ich numbered item	IN=in cor	box for 0	COS and/or R	COS=corrected	on-site during inspection from Contamination	R=repeat violation
P=Priority item Pf=Prio	Supervision	V		IN 2			nd protected	P/C O C
IN OUT N/A N/O	and Alternate Person in charge prese	ent, Pf	00			and contact suits	of returned, previously	PPICO C
dem	nonstrates knowledge and performs of tifled Food Protection Manager for Cl	lasses 2, C	00	17		coved recondition	ned, and unsafe food	
$2 \bigcirc	Employee Health			1		Time/Temperatur	ne and temperatures	P/Pf/C O
Mar	aggregate food employee and conditions	al employee; P/Pf		18		Propor reheating I	aracequies for flor florening	PO
3 0 2	owledge, responsibilities and reporting oper use of restriction and exclusion	9P	00	20 0	200	Proper hot holding	ne and temperatures temperatures	PO
Wr	ritten procedures for responding to vo	omiting and Pf	00	21 2		Proper cold holding	ng temperatures	P ()
5 diz	arrheal events			22 0	1	Proper date mark Time as a public	ing and disposition health control: procedures	P/Pf/C
606 Pr	appreating tasting, drinking, or toba-	cco products use P/C		24 🔾	000	and records	ner Advisory	
709 ONO	Preventing Contamination by H	lands	of 00	25	00	Consumer advisory	provided: raw/undercooked foot	Pf O
8 0 0 Hz	ands clean and properly washed o bare hand contact with RTE food or					Highly Susc	eptible Population sed: prohibited foods not offere	d P/C O
0 0 0 0	alternative procedure DIC	ppeny lonowed		26 0	/ Fo	adicolor Additiv	es and Toxic Substance	5
(0) 0 % Ac	dequate handwashing sinks, properly su Approved Source	pplieu/accession		27	00	Food additives: a	approved and properly use s properly identified,	P/Pf/C O
11 0 =	and obtained from approved source		C 0 0 Pf 0 0	28	00	heart & used		
12 0/0 0 0 F	ood received at proper temperature ood in good condition, safe, and una	dulterated P/I	Pf O O			Compliance with	h Approved Procedures variance/specialized	P/Pf/C
P	Required records available: molluscar dentification, parasite destruction	P/Pf/	2000	29	100	process/ROP cr	iteria/HACCP Plan	
14 10	Good Retail Practices are preve	GOOD F	RETAIL PE	tion of pa	ces athogens, cher	nicals, and physical	objects into foods.	R=repeat vio
Made OUT if number	Good Retail Practices are prevered item is not in compliance V=viola	ation type Mark in app	Tophate box	101 000		COS=corrected of	on-site during inspection e of Utensils	v co
OUT N/A N/O	Safe Food and Water	V		43 C	In uno utor	eile: properly store	ed	C C
Motor	urized eggs used where required rand ice from approved source	P/Pf	f/C O O	111	> ! !tennile/og!	inment/linens: prop	perly stored, dried, & handled es: properly stored & used	P0 C
32 O Variar	nce obtained for specialized processi Food Temperature Contr	ng methods Pf	f 00	46	Gloves use	ed properly		c c
Prope	er cooling methods used; adequate ed	quipment for P	ef/C O O		Food and	Utensils	s and Equipment surfaces cleanable,	P/Pf/C
33 C tempe	erature control		Pf OO	47 0)	ocianed construct	ed and used	
25 O Appro	food properly cooked for hot holding oved thawing methods used		of/C O C	140	cleaning a	gents, sanitizers,	alled, maintained and used and test strips available	
36 O Thern	mometers provided and accurate Food Identification			49	Non-food	contact surfaces of	elean sical Facilities	0
37 O Food properly	v labeled: original container		Offic O	Enc	Hot and c	old water available	e; adequate pressure	Pf C
	Prevention of Food Contami ents, and animals not present	Vi-	100	51 (Plumbing	installed: proper b	ackflow devices	P/Pf/C C
69 Contamination	n prevented during food preparation, stor		FIC O C	0	Tailet fooi	nd waste water pr lities: properly cor	istructed, supplied, a clea	n Pf/C C
10 Dereonal cles	anliness s: properly used and stored		c 0 C	- FA /	Carbaga	nd refuse properly (disposed; facilities maintaine maintained, and clean	ed C C
42 Washing frui	its and vegetables		Pf/C O C		Adaquata	ventilation and life	inting, designated areas o	sed C
Permit Holder shall	notify customers that a copy of the most r	ecent inspection report is	s available.		Natural ruations docu	ibber latex gloves	not used per CGS §19a-3	701
D - i- Charge	(Signature) Luis UM	Date 5/3//	124	Prior	rity Item Viola	ations	1.10-24	
	1	r-121	1,9	Core	tem Violati	on Item Violations ons	8-31-24	9
Person in Charge (Printed) 41.5 4.451e	5/3//	1011	Diel	Easter/Duhl	c Health Intervent	ion Violations ntervention Violations	5
Inspector (Signatu	^	Date 3/3/	104	Coo	d Potail Prac	tices Violations		nect \
Inspector (Printed)	Jose Ramice				ny inapactio	n violation identif	ox if you intend to reinspied by the food inspector	or to noid, de
Appeal: The own	er or operator of a food establishm dispose of unsafe food, may appea	ent aggrieved by this I such order to the Di	rector of H	lealth, n	ot later than	forty-eight hours		
ord	hispose of disale lood, may appear						Reinspection	6/14/

	Fo	od Esta	ablishm	<u>ent Inspe</u>	ction F	Report	Page	of <u></u>
LHD_M	anchester	79.01	Inspection Rep	port Continuation She	et		Date 5 31	124
Establish	ment_Shady	Glen	То	wn manch	rester	- Rein	rspection 6	14/24
				ATURE OBSERV			1	
- 11	/Location/Process	Temp	A .	ation/Process	Temp	MARKET CONTROL	cation/Process	Temp
Cold Pre	eptable cookline	1 1 1	,	1C Steak	40F	WIC BU	riger	38F
	. Sliced tomatoe			ole Slaw	39F	Pie Cool	ec apple pie	41F
\vdash	Sliced Ham	39F	Hot hold	Potatoes	140F	Şa		39 F
	tuna	41 F	Steak C	acked to	180F	CuStom	er BR Sink	115F
	tartar Sauc	e 39F	MILK dis	penser	39F		080	20
-	Burger raw	38F		g salad	36F			
L	Hot dog	37.F	Slice	ed to Matoes	35F			
Hot	hold Sausage	140F		ied Choose	38F	ONO		
	Violations cited in t			S AND CORREC the time frames below			5 11 8 8 40 Temp	Rite. de.
Item Number	Violationio dica in t	nio report must b	e corrected within	the time frames below	w, or as stated	III Sections 6-40.	Date:	ue.
Number							Emp: Empleado PASS WHE	N BLUE
							BAR TURN E5 ACEPTABLE CL AZUL CAMBIA A	S ORANGE IANDO LA BARRA COLOR NARANIA
IOPF	Rags St	oced in	hand sin	k by ice	Cream	Station	1600	F/71°C
49C	Gaskets	at cool	Eline una	clean				
49c	Exterior of							
23PF	Food not p			ked through	about v			
16 PF	interior of					/		19-
16PF	table moun-				ean			
49C	Window Ac	unit b	/ Warewas	sh unclean				
39PF	Wet Spona	es stores	on count	er by ice o	ream 5	Ponges (removed this	day
38C	Basement	screen	doc le	Et open ($-\cos$			
49c	WIC Floor	c, sheli	jes, Fan			walkins		
490	WIF Floor	unclear)				/	
381F	Mouse da	oppings	throughou	of basemen	it dry	Storage	$\sqrt{}$	
IOPF	Milk crate	5 toce	din ha	nd sink bu	12 ba	y in bo	sement (Co	5)
	Boxes of 5							
II.	Attic Floo							
55c	Domaged +							
	Discosked w	I PIC o	nly havin	g one op	en box	per it	em in at	₩C.
	provided a	llergen	poster o	,				
	well repos	+0						
	Discussed	past co	ntrol, t	reat ments	occun'n	g mon	thly	
	Discussed	repairi	ng floor	in secti	ins a	5 rees		
Person in	Charge (Signature)	hus !	yhu				Date 5/3	1/24
Inspector	(Signature)	27					Date 5/3(1/24

	Foo	d Esta	blish	men'	t Insp	ection	Repo	rt F	Page	of		
LHD Manchester				200	ontinuation S			Date_	611	8/24		
Establishment Charley's Grilled			Subs Town Marchester									
			TEMP	ERATU	RE OBSE	RVATIONS	144	em/Location/P	700000	Temp		
Item/	Location/Process	Temp	item	/Location	Process	Temp	ite	elli/Location/P	100635	Temp		
ltere	Violations cited in this					ECTIVE ACT elow, or as state		s 8-405.11 & 8-	-406.11 of th	e food code.		
Item Number								W 1000				
	JR + KP onsite at 3:30pm for re-opening inspection											
						9.		7	y			
	Employees	(7)(1	enthy	c1	eaning	. over	W in	nprow	enert	4		
	1 - 7		1		. 0			1	8	*		
	Exterior	of equ	ipmen	+ 01	200	okline	to 5	e ful	ly c	leaned		
	by 4:00 p	m.	1						/			
	, ,											
	okay to	re-0p	en oi	nce	clear	ning is	com	olete	on Co	oldline.		
	email jeamirez@manchesterct.gov pest control reports after every treatment.								orts			
	after eve	efnert.										
					_							
						=						
		0 -							111-	. [0]		
Person in	Charge (Signature)	Mayery	fine	T_		Date 6/8/29						
Inspector	(Signature)						Dat	te 0/ / <	1/dT			
										AN .		

Risk Category: 3 Food Establishment Inspection Report Page 1 of 2											
Establishment type: Permanent Temporary Mobile Other						Date: 7/12/24					
Establishment Wendys	connecticur Heart				ime In	AM/PM					
Address 21e2 Spencer St	DDH			L	LHD Manches tec						
Town/City Manchester					P	Purpose of Inspection: Routine Pre-op					
Permit Holder	Connecticut Department of Public Health				Reinspection Other						
FOODBORNE ILLNESS RISK F								N MEMBER			
Risk factors are important practices or procedures identified as the most prevalent continuous Mark designated compliance status (IN, OUT, N/A, N/O) for each numbered in				complian			AVII.	or injury. not observed			
P=Priority item Pf=Priority foundation item C=Core item V=violation type								=repeat violation			
IN OUT N/A N/O Supervision	V	cos	_	1		N/A N/		V COS R			
Person/Alternate Person in charge present							Food separated and protected	P/C 0 0			
demonstrates knowledge and performs duties	Pf	0	\circ	16 0			Food-contact surfaces: cleaned & sanitized	P/Pf/C O O			
Certified Food Protection Manager for Classes 2							Proper disposition of returned, previously	200 200 200			
2 0 0 3, & 4	С	0	0	17 0	0		served, reconditioned, and unsafe food	P 00			
Employee Health							Time/Temperature Control for Safety				
Management, food employee and conditional employee;	P/Pf	0					Proper cooking time and temperatures	P/Pf/C O O			
knowledge, responsibilities and reporting		-		19 🔾	0	00	Proper reheating procedures for hot holding	POO			
Proper use of restriction and exclusion	P	0	0				Proper cooling time and temperatures	P 0 0			
Written procedures for responding to vomiting and diarrheal events	Pf	0	0				Proper hot holding temperatures	800			
Good Hygienic Practices	_						Proper cold holding temperatures Proper date marking and disposition	P/Pf 0 0			
6 O Proper eating, tasting, drinking, or tobacco products us	se P/C	0		Property.			Time as a public health control: procedures				
7 O No discharge from eyes, nose, and mouth	C	0	-	24 0	0	0	and records	P/Pf/C			
Preventing Contamination by Hands		101			4		Consumer Advisory				
8 O O Hands clean and properly washed	P/Pf	0	0	25 🔾	10		Consumer advisory provided: raw/undercooked food	Pf 00			
9 No bare hand contact with RTE food or a	DIDGO						Highly Susceptible Population				
pre-approved alternative procedure properly followed	P/Pf/C	0	0	26 🔾	0	0	Pasteurized foods used; prohibited foods not offered	P/C 00			
10 O Adequate handwashing sinks, properly supplied/accessible	Pf/C	0	0			F	ood/Color Additives and Toxic Substances				
Approved Source				27 🔾	0	0	Food additives: approved and properly used	POO			
11 O Food obtained from approved source	P/Pf/C			28	0	0	Toxic substances properly identified,	P/Pf/C O O			
12 O O Food received at proper temperature		0		20		100	stored & used	111110			
13 O Food in good condition, safe, and unadulterated	P/Pf	0	0				Conformance with Approved Procedures				
Required records available: molluscan shellfish identification, parasite destruction	P/Pf/C	0	0	29 🔾	0	0	Compliance with variance/specialized process/ROP criteria/HACCP Plan	P/Pf/C			
	OD RE	TAII	PR	ACTIC	FS	100	process/ROP Chiena/HACCP Plan				
Good Retail Practices are preventative measures to	to contro	I the a	additio	on of pat	thoaer	s cher	micals and physical objects into foods				
	in appro							=repeat violation			
OUT N/A N/O Safe Food and Water	V	cos	-	OUT	100	2-12-	Proper Use of Utensils	V COS R			
30 Pasteurized eggs used where required	P	0	0	_	District Control	se uten	sils: properly stored	c 00			
31 O Water and ice from approved source	P/Pf/C	0	0	44 0	Uten	sils/equ	ipment/linens: properly stored, dried, & handled	Pf/C O O			
32 O Variance obtained for specialized processing methods	Pf	0	0	45 🔾	Sing	e-use/s	single-service articles: properly stored & used	P/C 0 0			
Food Temperature Control				46 🔾	Glov	es use	ed properly	C 00			
Proper cooling methods used; adequate equipment for	Pf/C	0			-		Utensils and Equipment				
temperature control				47 0	2.1		non-food contact surfaces cleanable,	P/Pf/C			
34 O Plant food properly cooked for hot holding 35 O Approved thawing methods used	Pf	_					esigned, constructed, and used				
36 Thermometers provided and accurate		0		48			ing facilities: installed, maintained and used; gents, sanitizers, and test strips available	Pf/C O O			
Food Identification	Pi/C	101	\subseteq	10			ontact surfaces clean				
37 Food properly labeled; original container	Pf/C	0	0	43	INOIT	-1000 0	Physical Facilities	(0)00			
Prevention of Food Contamination	1.40			50 0	Hot:	and col	Id water available; adequate pressure	Pf OO			
38 O Insects, rodents, and animals not present	Pf/C	0	0				nstalled; proper backflow devices	PPIC O O			
39 Contamination prevented during food preparation, storage & display	P/Pf/C						d waste water properly disposed	P/R/COO			
40 Personal cleanliness	Pf/C	0	0	53 🔾	Toile	et facilit	ties: properly constructed, supplied, & clean	Pf/C O O			
41 Wiping cloths: properly used and stored	С	0					d refuse properly disposed; facilities maintained	000			
42 O Washing fruits and vegetables	P/Pf/C	0	0					P/P(/C)			
Permit Holder shall notify customers that a copy of the most recent inspection rep	ort is ava	ailable	•		Natu	ral rub	ventilation and lighting; designated areas used ber latex gloves not used per CGS §19a-36f	100			
Person in Charge (Signature) A Cull Mate 7	1121	24	1	Violati Priority	_			#			
21.	16	/	-				Item Violations July 22,24	2			
Person in Charge (Printed) 700 508				Core It	em V	iolation	is godine	1			
- 0 0 -1	1			Risk Fa	actor/	Public	Health Intervention Violations	1			
Inspector (Signature) Venise to une Date 7/12	424			Repeat Risk Factor/Public Health Intervention Violations			r/Public Health Intervention Violations	6			
Inspector (Printed) Dear se Paul LS							ces Violations	6			
							L				
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.											

Food Establishment Inspection Report Page 2 of 2											
LHD Manchester	Inspection Report Continuation Sho	Date	- /a. /a. /								
Establishment Wendys											
TEMPERATURE OBSERVATIONS											
Item/Location/Process	Temp Item/Location/Process	Temp	Item/Location/Pro	cess 1	Temp						
Hamburge Sta.	39F Chicken breast	158P	1	8.							
	41F Hamburger	138F	Hornator -	+18 1	DOF						
by milk	V T J T T T		jos auce	7.0 7	007						
	38 F	148F		<i></i>	0.						
Sour cream	39 F Potatoes	185F	nort HS@80	+ X Deop	ill						
	Chicken Nugget	167F	using ?? N	Inco states							
	00		Wtempork	but take	,a						
			white No	Hylinus	e reg						
	OBSERVATIONS AND CORRECT	CTIVE ACTIONS	S III	0							
Item Number Violations cited in this	report must be corrected within the time frames belo			6.11 of the food o	ode.						
22P American C	heese @ 60F Disca	sded.									
	Manager Statest Time vs Temp - no approved written										
6.1	Dioceedure of time marking on Dorducte - Povide via emil tos										
	container + included			7100	val						
51PF MOD SINK+	Handsink unit - di	00.000/	eavione	9							
		1 4 . ()	r .	0	11						
Ja Hais gene	tioors, generally uncleans grease build up at 3 bay wall										
behind	behind ice machine Lime build up y unclear										
	behind dire thru Soda Machere										
Walk	in freeze - tood deb	ins/trac	phontoor	underra	cks						
49c Candingent	holders atsenice a	ounter a	and drive	thre							
uncle	as with build-up.										
39c Reach in t	Reach in freezer - Vento interior Ice buildupt dip.										
	repair or replace unit.										
33PF Walkin Co	poler@ 45F onext th	erm. 2/1	for interior	or.							
Mana	Manager statest defrosts 1030am - 1130pm (30min Ago)										
- Rese	thine to depost attent	مسع			3						
- 1/0-1	+ Unit is maint + able	*1 FF&1	fond sodue	of below	w l						
417	Manager Contacted	Penional	W DEV VISO	toge							
Smean	re out Today (back				1						
Note: Discussed	Relocating drying ut	cosils of	Look o'm	Con-	211						
52c Stanting	Wateron Cookline Hoo	C.	THE O	Juli. D							
			a recoi.								
Person in Charge (Signature) Mall Library Date											
			Date	7/-/-							
Inspector (Signature) Delines Tayne Date 7/12/24											
11 repair: locay											

mail repair: Today
Distribution: 1st - White - Health Department 2nd - Yellow - Owner/Operator/Person in Charge

— dpayre@manchestcrct.gov)