CCIS Sanitation Survey Report												
Food Ins	pection Program							***	Pa	age		_ of
Business Name	T					عر	perator:				Phone:	211/1/20
Laves	Overn Inc	_		City			Komald (Seal-S	ONN C			ر ال	164-420
Address C	with Mara Stra	_	1	Ulty		haml	serchura 1726		10)		
General Health	Record ID P/E		٦ <u>.</u>	ate		ICHTE	EHS TO THE		ctivi	ty Ti	me	Travel Time
PR T		Т		Г							m	m
' ' ' _ _		Red	 { Hi/	∟∟ nh B	isk Fa	octors						
Red High Risk Factors High Risk Factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Circles indicate compliance status (IN OUT N/O N/A) for each item.												
	Circles indicate comp	lian	ce s	tatus	s (IN, C	OUT, N/O, N/A) for each item.	R = repeat			128 🗗	
IN = in compliance Compliance St		•	ea R	$\overline{}$		Compliance Sta			CDI I			Fld Pl Rvw
Demonstration		O D I					rdour Food Time/Temperatur	1			130 🗆	Complaint
0100 IN OUT	PIC certified by accredited program, or compliance			5			Proper cooling procedures		_	30		Illness / Injury
0200 IN OUT	with Code, or correct answers Food Worker Cards current for all food workers;	1	0	5	1		Proper hot holding temperatures (<130°f Proper hot holding temperatures	F)	_	□ 25 □ 5		Permit Inv. Field Education
	new food workers trained		_		1720		(between 130°F to 139°F)				127 🗀	Pre-Operat.
Employee Healt	Proper ill worker practices; no ill workers present;	To	0	25	1800		Proper cooking time and temperature No room temperature storage; proper us	a of time		25	2 400 □	HACCP
	proper reporting of illness		U	٤٧			as a control, procedures available				<u>'</u>]	
_	tamination by Hands	In					Proper reheating procedures for hot hold] 15 10	⊣ nesui	ts
0400 IN OUT N/O 0500 IN OUT N/A N/O	Hands washed as required Proper methods used to prevent bare hand contact	믐		15 15		IN OUT N/A	Proper cold holding temperatures (> 45° Proper cold holding temperatures	<u> </u>			ქ01 1 ⊔	Satisfactory
	with RTE foods	<u> </u>		_			(between 42°F to 45°F)				_	Unsatisfactory
0600 IN OUT	Adequate handwashing facilities ce, Wholesome, Not Adulterated		Û	10	2200	IN OUT N/A	Accurate thermometer provided and use evaluate temperature of PHF	ed to		5		Complete Incomplete
0700 IN OUT	Food obtained from approved source		Ō	45	Con	sumer Advi	sory					mcomplete
0800 IN OUT	Water supply, ice from approved source	Ö	D	15	2300	IN OUT N/A	Proper Consumer Advisory posted for ra undercooked foods	IM OL				
	Proper washing of fruits and vegetables			10			ble Population				Actio	
1000 IN OUT	Food in good condition, safe and unadulterated; approved additives	1	1		2400	IN JOUT NA	Besteurzed foods used as required; proh foods not offered	ibited		<u> </u>		Suspend Approved
1100 IN OUT	Proper disposition of returned, previously served, unsafe, or contaminated food	ים		18	Che	mical	ACCOS (IO) SINCICO				_	Disapproved
1200 IN OUT N/A N/O	Proper shellstock identification; proper parasite	0	P	5	2500	in out	Toxic substances properly identified, sto-	red, used		D 10		Follow-up Req'd
8	destruction procedures for fish		\				ith Approved Procedures	,		- T		
1300 IN OUT N/A	Food contact surfaces used for raw meat	ΤO		15	2600	IN OUT N/A	Compliance with risk control plans, varia mobile unit plan of operation	inces, or		10	1	Served
	thoroughly cleaned and sanitized	-		5	2700	IN OUT N/A	Variance obtained for specialized proces methods (e.g., ROP)	ssing			J	Breakfast
1400 IN OUT N/A	Raw meats below or away from RTE food Proper handling of pooled eggs	븀		5			memous (e.g., not)				6025	
					ick Ea	ctors					1	Dinner
Low Risk Factors are preventive measures to control the addition of pathogens, chemicals, and physical objects into foods.												
	Circled poli	nts i	ndic	ate i	tems r	ot in compli	ance.			- lor	<u> </u>	Other
Caral Tariffer	usa Cantral	CO	R	PTS	Hie	nsils and Eq	wipment		CDI	ויון א	■	Observed
Food Temperal	at proper temperature			5	4000	Food and non-	food sufaces properly used and construct	ted;		□ 5	•	Breakfast
2900 Adequate equ	pment for temperature control	回			4100	cleanable Warewashing f	acilities properly installed, maintained, us	ed:		d	6050	
	g methods used	D		3	<u> </u>	test strips avail	able and used			5	Lenss L) Dinner
Food Identifica 3100 Proper labelin		10		5	4200		ct surfaces maintained, cleaned, sanitized ontact surfaces maintained and clean	1		□ 5 □ 3	 6060 	
	n Contamination					sical Faciliti			0	9 5	6065 🖯	Other
	ts, animals not present; entrance controlled	0			4400	Plumbing prop	erly sized, installed, and maintained; prop	er backflow	D	O 5	Red Critic	al Points
3300 Potential food storage, displa	contamination prevented during preparation,			5	4500		ct drains, no cross-connections ewater properly disposed			□ 5	-	\leftarrow
3400 Wiping cloths	properly used, stored				4600	Toilet facilities	properly constructed, supplied, cleaned			3	Blue Point	<u> </u>
	Inliness and hygiene tasting, drinking, or tobacco use	믐			4700		se properly disposed; facilities maintained			□ 3 □ 2	11	
3600 Proper eating, Proper Use of I		1	u		4800	unnecessary p	es properly installed, maintained, cleaned ersons excluded from establishment	u,				\bigcirc
3700 In-use utensils	s properly stored		0	_	4900		ilation, lighting; designated areas used	ibla	_	□ 2 □ 2	-1 1 * * * * * * * * * * * * * * * * * *	pints
	ment, linens properly stored, used, handled		0	3	5000	Posting of perr	nit; mobile establishment name easily visi	IDIE				
D	d single-service articles properly stored, used on this day, the above items are violations, which mu	et ho	COFFE	actori	in the ti	me specified by t	the health officer. A food establishment r	permit may b	e susc	ende	d without warn	ling, notice or hearing if the
	and analysis and for dispositions of the booth Atticor are not i	നമിമ	11 IT W//	つしつじしつき	ne ara no	N CARRACTED IN THE	e time staten in this report. The defillin will	i de susperiul	su II ai	4 11 111 111	Helit Hazaiu C	(1313 O) IIIGIE BIE 13 OI IIIOI(
requirements of the rood code animor directives in the health officer will provide an opportunity for an appeal on the validity of a suspension or the findings of an inspection report if a written request is filed with the health officer within ten (10) days of the suspension or inspection, The filing of an appeal does not stay the effectiveness of a suspension. The completed inspection form is a public document that must be made available to any person												

who requests it under the provision of the Right to Know Law (Signature)

Person in Charge (Printed Name) (Signature) Regulatory Authority (Printed Name)

CCIS		Sanitation S	urvey Report
Food Inspection Program		Page	of
Business Name:	Operator:		Phone:
Dave's lavern Inc	City ZIP	Seat Checkouts	()264-428°
401 South Main	Street Cha 1720	10	
General Health Record ID P/E	Date JEHS	Activity Ti	me Travel Time
PR		ł	m m
1	EMPERATURE OBSERVATIONS	* 405)	Service
Item / Location	Temp (°F) Item / Location	Temp (°F)	128 Scheduled
Michael Marie	36°] 129⊡ Return] 126⊡ Fld Pl Rvw
treezer	IIO		130 ☐ Complaint
Deep Precze	/30		133 □ Illness / Injury 134 □ Permit Inv.
Prosi Cooler	<i>3</i> 3°		136 Field Education
2004	33		127 Pre-Operat.
FCPSI			106 HACCP
			Results
OBSER	ATIONS and CORRECTION ACTIONS		01 Satisfactory
Item Number Violations cited in this	area must be corrected with the time frame specified.	Points	02 Unsatisfactory 03 Complete
Corrected a	U Violations from	last	04 🔲 Incomplete
inspection.	V . C 27		
rispection.			Action
			04 ☐ Suspend 07 ➢ Approved
			10 Disapproved
,			26 Follow-up Req'd
			Meals Served 6020 ☐ Breakfast
			6025 Lunch
			6030 Dinner
			- 6035 □ Cater 6040 ⊠ Other
			1 ' '
			Meal Observed 6045 Breakfast
			6050 Lunch
			6055 Dinner
			6060
			Red Critical Points
			Blue Points
Comments			
			Total Points
			$\parallel A \parallel$
Rased on an inspection this day the shove items are violations, whi	th must be corrected in the time specified by the health officer. A food e	stablishment permit may be suspended	without warning, notice or hearing if the
requirements of the food code and/or directives of the health officer are	e not met or if violations are not corrected in the time stated in this report, icer will provide an opportunity for an appeal on the validity of a suspensi	The permit will be suspended if an immin on or the findings of an inspection report.	ent hazard exists or there are 75 or more if a written request is filed with the health
officer within ten (10) days of the suspension or inspection. The filing of	an appeal does not stay the effectiveness of a suspension. The complete	ed inspection form is a public document the	nat must be made available to any person

(Signature)

(Signature)

Person in Charge (Printed Name)

Regulatory Authority (Printed Name)