		rood	EStar	JIISIII		zn	LI	NS	pection	Keport			Pag	ge 1	of 2					
	•	nt Name and Address				l _N	o. of	Risk F	actor/Intervention	n Violations	0	Date	04/02	2/201	9					
Logan County Department of Public Health 109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (217) 735-2317 Establishment License/Permit #						-						Time In 9:40a		0am						
—	<u> </u>	8, Lincoln, IL 62656 Phone: (2				_ No	o. of	Repe	at Risk Factor/Inte	rvention Violation	ns O	Time Out	10.4	l5am	_					
Establishment License/Permit # Imo's Cafe 278						Pe	Permit Holder Risk Category						—							
							Ilmi Balazi High/Class I													
	Street Address 616 Woodlawn Rd							urpose of Inspection						_						
			1 -	D C		۱.,	ıı pos	JC 01 1	пэрссион											
Lincoln, IL 62656								Routine Inspection												
LII	ICOIII, IL	FOODBORNE II			TO	DC /	N N I F) DI I	IBLIC LIEALTH	I INITED\/ENT	ONC									
-								PU	BLIC HEALTH	INIEKVENI	UNS									
	IN=in compliance	ed compliance status (IN, OUT, N, OUT=not in compliance N/O Mark "X" in appropriate box fo corrected on-site during inspectio	enot observor COS and/	/ed N/ /	A =no	d itei t app		ole	prevalent cont	e important pract ributing factors of ire control measu	foodborne	illness or injur	y. Public	c hea	lth					
Co	mpliance Status		·		СО	S R	П	Comp	liance Status					cos	R					
		Supervision			1-7	1	1 1			Protection from	n Contamin	ation		۳						
		Person in charge present, demonstra	ates knowledg	e, and	Ť	T	1 1	15	In	Food separated an										
1	In	performs duties			_		1 1	16	In	Food-contact surfa		and sanitized								
2	In	Certified Food Protection Manager (C Employee Health	CFPM)				1	17	In	Proper disposition reconditioned and		previously serve	d,							
		Management, food employee and co	onditional emi	olovee:	Ť	Т	11			Time/Temperatur		r Safetv								
3	In	knowledge, responsibilities and repo					ŀ	18	In	Proper cooking tin		· · · · · · · · · · · · · · · · · · ·			\Box					
4	ln	Proper use of restriction and exclusion	on				1 1	19	N/O	Proper reheating p										
5	In	Procedures for responding to vomiting	ng and diarrh	eal events			1 1	20	N/O	Proper cooling tim										
		Good Hygienic Practices	3				H F	21	In	Proper hot holding										
6	In	Proper eating, tasting, drinking, or to	obacco use				1 1	22	In	Proper cold holdin	•									
7	In	No discharge from eyes, nose, and m	nouth				1 F	23	In	Proper date marki					-					
		Preventing Contamination by	Hands				1 H	24	In	Time as a Public H	<u> </u>		ecords		\vdash					
8	In	Hands clean and properly washed				1	7			1	r Advisory	procedures & n	ecorus		-					
9	In	No bare hand contact with RTE food	or a pre-appr	oved			1 1	25	In	Consumer advisor		raw/undercook	ed food		7					
\vdash	""	alternative procedure properly allow	ved		_	-	4 1	23		Highly Suscept			keu 100u		Н					
10	In	Adequate handwashing sinks properl	ly supplied an	d accessible	-		1	26	N/A	Pasteurized foods			fored							
		Approved Source			_		4	20		d/Color Additive			iereu		-					
11	In	Food obtained from approved source	e		\perp]	27	In	Food additives: ap			4							
12	N/O	Food received at proper temperature	e				1 1	28	In In		•	<u> </u>	ducad							
13	In	Food in good condition, safe, and un	adulterated]	20		Toxic substances p	<u> </u>		u useu							
14	N/A	Required records available: shellstoc	k tags, parasit	te			1 }	29	N/A	Compliance with v	• • • • • • • • • • • • • • • • • • • •		IACCD		_					
		destruction		COOL	\ DE	TAI				Compliance with v	ariance/speci	alizeu process/r	IACCP		-					
-				GOOD																
L		Good Retail Practices are prevent nbered item is not in compliance		res to cor						corrected on-site	-		epeat vi	_	_					
<u> </u>					cos	R								cos	R					
		Safe Food and Water					-			Proper Use	of Utensils									
30	Pasteurized eggs u	sed where required					43	الل	n-use utensils: prope	erly stored					_					
31	1 Water and ice from approved source						44	44 Utensils, equipment & linens: properly stored, dried, & handled												
32 Variance obtained for specialized processing methods							45	!	Single-use/single-ser	vice articles: properl	y stored and u	used								
Food Temperature Control						46		Gloves used properly												
Proper cooling methods used; adequate equipment for temperature control						2			Utensils, Equipm	ent and Ven	nding									
34	Plant food properly cooked for hot holding				- 3		47		Food and non-food c	ontact surfaces clea	nable, properl	ly designed, con	structed,							
35	Approved thawing	methods used					48	_		es: installed maintai	ned. & used: t	test strins								
36 Thermometers provided & accurate					17.		49													
Food Identification							43	1	TOTALIOUS CUITACT SUI	iuces cicali										

 $\overline{\times}$

43		In-use utensils: properly stored	
44		Utensils, equipment & linens: properly stored, dried, & handled	
45		Single-use/single-service articles: properly stored and used	T
46		Gloves used properly	T
		Utensils, Equipment and Vending	
47		Food and non-food contact surfaces cleanable, properly designed, constructed, and used	
48		Warewashing facilities: installed, maintained, & used; test strips	
49		Non-food contact surfaces clean	
		Physical Facilities	
50		Hot and cold water available; adequate pressure	T
51		Plumbing installed; proper backflow devices	I
52		Sewage and waste water properly disposed	
53		Toilet facilities: properly constructed, supplied, & cleaned	T
54		Garbage & refuse properly disposed; facilities maintained	
55	X	Physical facilities installed, maintained, and clean	
56		Adequate ventilation and lighting; designated areas used	T
		Employee Training	
57		All food employees have food handler training	T
58		Allergen training as required	T
_			_

37

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39

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41

42

Food properly labeled; original container

Insects, rodents, and animals not present

Wiping cloths: properly used and stored

Washing fruits and vegetables

Personal cleanliness

Prevention of Food Contamination

Contamination prevented during food preparation, storage and display

Food Establishment Inspection Report

					P.	age 2 of 2				
Establishn	ment: Imo's Cafe			Establishmer —	nt #: 278					
Water Sup	pply: 🛛 Public 🗌 Priv	ate Wa	ste Water System: 🛛 Public	Private						
Sanitizer 1	Type: Chlorine		Heat:							
			TEMPERATURE OBSEI	RVATIONS						
	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp				
	All Temps in ∘F		Shredded cabbage in stor	age 39	Sausage Gravy in steam table	136				
All C	Cold Holding Units ≤	41	room, triple door fridge	9	Chicken & Dumpling soup	192				
					in serving station steam table					
Ham in	cooling unit near fryers	40	Diced chicken in walk-in co	ooler 41	Scrambled eggs on flat top grill	198				
Diced T	Tomatoes in prep table	38	Sliced potatoes in walk-in c	ooler 41	Hashbrowns on flat top grill	188				
	ed Ham in prep table	39	Ranch dressing in serving st	ation 39						
Meatlo	af in prep table cabinet	37	fridge							
Noodles i	in cooling unit near stove	39								
Steak in	cooling unit near stove	38								
			OBSERVATIONS AND CORRI	ECTIVE ACTIONS						
Item Number		Violat	ions cited in this report must be co	rrected within the t	ime frames below.					
39	Several food items uncovered throughout kitchen (ex - batter next to fryers, diced chicken, cooked ground meat, cooked potatoes									
	in walk-in, several foo	d items in co	poling units opposite the grill). <i>i</i>	All food items mus	st be protected from possible contam	ination.				
		Re	ference Sections 3-305.14 and 3	3-307.11 of the Fo	ood Code. COS					
55	55 Food splatters on walls of kitchen near fryers, floors soiled under fryers and grills. Tile near mop area cracked/missing.									
	facilities must be cleaned as often as necessary to keep them clean and must be maintained in good repair. Reference Sections									
	6-5	01.11 and 6	-501.12 of the Food Code. To b	e corrected by the	e Next Routine Inspection.					
CFPM Ve	rification (name, expiration	on date, ID#	t):							
	Ilmi Balazi Selvije Balazi Rilinda Dalipi									
15675047 Exp. 10/07/2022			15675048 xp. 10/07/2022	15699756 Exp. 10/11/202	Exp. 10/11/2022					
	•	ı	ures and temp monitoring	<u> </u>						
124	in Balanzi		Apr 2, 2019							
Person in Charge (Signature) Date										
0	a									
1/2	w A	-	Follow-up: Ye	s 🔀 No (Check on	ne) Follow-up Date: N/A					
Inspector Si	(gnature)		· ⊔	_ ·	,					