## Food Establishment Inspection Report

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1.0.0	al Haalth Danartman	at Nama and Address												
Local Health Department Name and Address Logan County Department of Public Health						No. of Risk Factor/Intervention Violations 0 Date 11/1 Time In 2:0							-	)
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (217) 735-2317					No	No. of Papast Pick Easter/Intervention Violations							)pm	
Establishment License/Permit #													)pm	
Culver's Restaurant 228						Permit Holder Risk Category								
Street Address						Sekn, Inc. High/Class I								
2530 Woodlawn Rd						Purpose of Inspection								
	/State		ZIP Code		Ro	Routine Inspection								
Linc	coln, IL		62656											
		FOODBORNE II	LNESS RISK FA	СТО	rs A	۱N	D PI	UBLIC HEALTH	INTERVENT	IONS				
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered it						n								
IN=in compliance OUT=not in compliance N/O=not observed N/A=not a						lical	ble		e important prac					
Mark "X" in appropriate box for COS and/or R							prevalent contributing factors of foodborne illness or injury. Public heal interventions are control measures to prevent foodborne illness or injury							
	COS=0	corrected on-site during inspectio	n <b>R</b> =repeat violat	ion	1	_								<i>.</i>
Con	npliance Status			COS	R		Com	npliance Status					COS	R
		Supervision							Protection fro	m Contamina	ition			
1	In	Person in charge present, demonstra performs duties	tes knowledge, and				15	In	Food separated a	nd protected				
2	In	Certified Food Protection Manager (	CEDW)	_	-	-	16	ln	Food-contact surf	,				
-		Employee Health					17	In	Proper disposition reconditioned and		reviously served	l,		
		Management, food employee and co	nditional employee	Time/Temperature Control for Safety										
3	In	knowledge, responsibilities and repo					18	In	Proper cooking tir					_
4	In	Proper use of restriction and exclusion	on				19	N/O	Proper reheating					
5	In	Procedures for responding to vomiting	ng and diarrheal events				20	N/O	Proper cooling tin		_			
		Good Hygienic Practices					21	In	Proper hot holdin	g temperatures	5			
6	In	Proper eating, tasting, drinking, or to	bacco use				22	In	Proper cold holdin	ng temperature	S			
7	In	No discharge from eyes, nose, and m	outh				23	In	Proper date mark	ing and disposi	tion			
		Preventing Contamination by	Hands				24	N/A	Time as a Public H	lealth Control;	procedures & re	cords		
8	In	Hands clean and properly washed							Consum	er Advisory		I		
9	In	No bare hand contact with RTE food alternative procedure properly allow					25	N/A	Consumer advisor	ry provided for	raw/undercook	ed food		
10	In	Adequate handwashing sinks proper		e					Highly Suscep	tible Populat	ions			
		Approved Source	,	-	1		26	N/A	Pasteurized foods	used; prohibit	ed foods not off	ered		
11	In	Food obtained from approved source	2		T	1.		Foo	d/Color Additive	es and Toxic S	ubstances			
12	N/O	Food received at proper temperature					27	In	Food additives: ap	proved and pr	operly used			
13	In	Food in good condition, safe, and un	adulterated		1		28	In	Toxic substances	properly identif	fied, stored, and	used		
14	N/A	Required records available: shellstoc	k tags, parasite					Со	nformance with	Approved Pr	ocedures			
17	10/74	destruction					29	N/A	Compliance with	variance/specia	lized process/H	ACCP		
			GOO	D RE	TAI	L P	PRA	CTICES						
		Good Retail Practices are prevent												
Μ	lark "X" in box if nur	nbered item is not in compliance	Mark "X" in appr	<u> </u>		(for	r COS	and/or R COS=c	corrected on-site	e during inspe	ction R=re	peat vio	1	_
				COS	R					<i></i>			COS	R
20		Safe Food and Water								of Utensils				
30		sed where required			_	43	-	In-use utensils: prope		tored dried P	handlad			
31 32	Water and ice from	n approved source for specialized processing methods			-	44	-	Utensils, equipment & Single-use/single-serv						-
52	variance obtained	Food Temperature Control				43		Gloves used properly	ice articles, proper	iy storeu dilu u	JCU			_
33	Proper cooling met				_	40			Utensils Fauinm	ent and Ven	ding			
34	Proper cooling methods used; adequate equipment for temperature control Plant food properly cooked for hot holding				_	Utensils, Equipment and Vending Food and non-food contact surfaces cleanable, properly designed, cc					•	tructed.	- 1	_
35	Approved thawing				_	47	1	and used			,,	,		
36	Thermometers pro				_	48		Warewashing facilities	s: installed, mainta	ined, & used; t	est strips			
- 1		Food Identification				49	9	Non-food contact surf						
37	Food properly labe	eled; original container						L	-	Facilities				
	Prevention of Food Contamination				50 Hot and cold water available; adequate pressure									
38	Insects, rodents, and animals not present				51		Plumbing installed; proper backflow devices							
39	Contamination prevented during food preparation, storage and display			$\neg$	52		Sewage and waste wa							
40	Personal cleanliness			$\neg$	53									
41					54		Garbage & refuse properly disposed; facilities maintained							
42 Washing fruits and vegetables					55								-	
			ł			56	<u>ا</u>	Auequate ventilation			eu			
						57	7	All food employees ha		e Training				
						57	+	Allergen training as re		annig				-
						1.20	~I	, and be a set of a s	quicu					

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Establishment: Culver's Restauran	t		Est	Establishment #: 228									
Water Supply: 🛛 Public 🗌 Pri	vate Wa	iste Water System: 🔀 F	Public 🗌 Priva	ate									
Sanitizer Type: Quat	PPN	1: 200		Heat:	Heat:								
		TEMPERATURE	OBSERVATIO	NS									
Item/Location	Temp	Item/Locati	on	Temp	Item/Lo	ocation Temp							
All Temps in ∘F													
All Cold Holding Units ≤	41	Chili, in walk-in coole	er near back	35									
		Lemon near front	of walk-in	36									
Mayo, make table in kitchen	40	Berries in custarc	station	35									
Pickles, make table in kitchen	39												
Raw burger, next to grill	41	Chili in steam table	in kitchen	164									
Chicken breast, next to grill	40	Pot roast, steam tabl		172									
		Burger, just done coo	oking on grill	181									
		OBSERVATIONS AND	CORRECTIVE	ACTION	S								
ltem Number	Violations cited in this report must be corrected within the time frames below.												
	No Violations Noted During Inspection												
CFPM Verification (name, expirat	ion date, ID#	£):											
Elaine present, info on file	Devan	present, info on file											
HACCP Topic: Discussed cooking	and holding	temperatures for TCS for	ods in establish	nment									
Elaine au													
		Nov 12, 2019											
Person in Charge (Signature)		Date											
φ () ,													

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