## Food Establishment Inspection Report

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Local Health Department Name and Address							No. of Pick Easter/Intervention Violations 0 Date 09/13,								
Logan County Department of Public Health							No. of Risk Factor/Intervention Violations 0 Time In 10:1							-	
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (217) 735-2317					No	No. of Banast Bick Easter/Intervention Violations						11:15		-	
Establishment License/Permit # Deep Roots Cafe and Bakery 213					Per	ermit Holder Risk Category						11.15		-	
Street Address						Fay Boerma High/Class I									
127 S Kickapoo St						Purpose of Inspection									
City/State ZIP Code						Routine Inspection									
Lincoln, IL 62656						Routine Inspection									
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS															
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered															
IN=in compliance OUT=not in compliance N/O=not observed N/A=not a							pplicable Risk factors are important practices or procedures identified as the prevalent contributing factors of foodborne illness or injury. Public I								
Mark "X" in appropriate box for COS and/or R								interventions are control measures to prevent foodborne illness or injur							
COS=corrected on-site during inspection R=repeat violation Compliance Status COS														_	
· · · · · · · · · · · · · · · · · · ·							Compliance Status						cos	R	
- 11		Supervision	tes been lades and	- <u></u>	_			· · · · · · · · · · · · · · · · · · ·	Protection fro		ition	Ť	- 1	_	
1	In	Person in charge present, demonstra performs duties	tes knowledge, and				15 16	In	Food separated a Food-contact surf		nd conitized		_	_	
2	In	Certified Food Protection Manager (C	CFPM)			1		In	Proper disposition					_	
		Employee Health					17	In	reconditioned and			,			
3	In	Management, food employee and co				Time/Temperature Control for Safety					r Safety				
-	In	knowledge, responsibilities and repo		+	$\vdash$		18	N/O	Proper cooking ti	me and temper	atures				
4 5	In	Proper use of restriction and exclusion Procedures for responding to vomiting		-			19	N/O	Proper reheating	procedures for	hot holding		_		
5		Good Hygienic Practices		-	<u> </u>		20	N/O	Proper cooling tir						
6	In	Proper eating, tasting, drinking, or to	bacco use	1	<u> </u>	11	21	In	Proper hot holdin					_	
7	In	No discharge from eyes, nose, and m					22	In	Proper cold holdi					_	
1		Preventing Contamination by		3			23 24	In N/A	Proper date mark			cords			
8	In	Hands clean and properly washed		1			24	11/74	Time as a Public H	er Advisory	procedures & re			-	
9	In	No bare hand contact with RTE food					25	N/A	Consumer adviso	-	raw/undercook	ed food	1	-	
_		alternative procedure properly allow		-					Highly Suscep		-		1	-	
10	In	Adequate handwashing sinks properl Approved Source	y supplied and accessible	2	L		26	N/A	Pasteurized foods			ered			
11	In	Food obtained from approved source	•	1				Food	d/Color Additive	es and Toxic S	ubstances				
12	N/O	Food received at proper temperature					27	In	Food additives: a	pproved and pr	operly used	2.0			
13	In	Food in good condition, safe, and una			$\vdash$		28	In	Toxic substances	properly identi	fied, stored, and	used			
14	N/A	Required records available: shellstoc			$\vdash$	1		Со	nformance with	Approved Pr	ocedures				
14	destruction						29	N/A	Compliance with	variance/specia	lized process/H	ACCP			
								CTICES							
•••		Good Retail Practices are prevent								-					
Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate COS R														_	
		Safe Food and Water				Proper Use of Utensils							03		
30	Pasteurized eggs u		10	T		43 In-use utensils: properly stored							Ť	-	
31		Pasteurized eggs used where required Water and ice from approved source				44	_	Utensils, equipment 8		tored, dried, &	handled		_		
32		Variance obtained for specialized processing methods				45         Single-use/single-service articles: properly stored and used									
Food Temperature Control						46	5	Gloves used properly							
33									Utensils, Equipn	nent and Ven	ding				
34	Plant food properly cooked for hot holding					47	7	Food and non-food co and used	ntact surfaces clea	anable, properly	/ designed, cons	tructed,			
35	Approved thawing methods used					48	8	Warewashing facilities	s: installed. mainta	ained. & used: t	est strips	-	-	-	
36 Thermometers provided & accurate					_	49	-	Non-food contact sur	,				- 1		
Food Identification							Physical Facilities							_	
37						50	5	Hot and cold water av	ailable; adequate	pressure		Ĩ			
20	Prevention of Food Contamination					51	1	Plumbing installed; pr	oper backflow dev	vices					
38 39	Insects, rodents, and animals not present Contamination prevented during food preparation, storage and display				_	52	2	Sewage and waste wa	ter properly dispo	sed					
40	Personal cleanliness				-	53	3	Toilet facilities: prope	rly constructed, su	pplied, & clean	ed				
40	Wiping cloths: properly used and stored				-	54 Garbage & refuse properly disposed; facilities maintained									
42 Washing fruits and vegetables						55 56	-	Physical facilities insta					_		
								Adequate ventilation			d				
						57	7	All food ampleuras		e Training		- 1	- 1	_	
							/ B	All food employees ha Allergen training as re		annig				$\dashv$	
								Chief Berr training as re	yuncu				-		

## Food Establishment Inspection Report

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Establishn	nent: Deep Roots Cafe ar	nd Bakery		Establishment #: 213									
Water Sup	oply: 🛛 Public 🗌 Priv	vate Wa	aste Water System: 🔀 Public 🗌	Private									
Sanitizer T	ype: Chlorine		PPM: 100		Heat:								
			TEMPERATURE OBSERVA	TIONS									
	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp							
All Temps in °F													
All Cold Holding Units ≤ 41			ham in top of make table on		Cake in middle shelf in display	1							
			right side in make table	39	case in front of establishment	40							
Milk	on top shelf in right		Broccoli salad in bottom										
side i	n double door fridge	38	portion of make table on right	38									
Blueberries on right side middle			turkey in bottom portion of										
shelf in double door fridge 39			make table on left side	39									
Egg salad in top of make table			Soup in steam table in kitchen b	ру									
on left side 38		door	150										
	1		<b>OBSERVATIONS AND CORRECT</b>	IVE ACTIONS	5								
ltem Number		Violati	ions cited in this report must be correc	ted within the t	ime frames below.								
	No Violations noted during this inspection.												
CFPM Ve	rification (name, expirati	on date, ID#	ŧ):										
Fay Boerma 21508991 Tim prese Exp: 10/23/2023			n present- on file										
HACCP To	ppic: Discussed proper id	lentification	and storage of toxic materials in es	stablishment									
A.	i a, h		Sep 13, 2022	Sep 13, 2022									
Person in Ch	arge (Signature)		Date										
ر ا													

Senner

Follow-up Date: N/A

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