Food Establishment Inspection Report

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Local Health Department Name and Address	No. of Risk Factor/Intervention Violations		0	Date	07/12/2022			
Logan County Department of Public Health			No. of Mak ractory intervention violations		- 1	Time In	1:45PM	
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (217) 735-2317						Time in	1:45PIVI	
Establishment	Permit #	No. of Repeat Risk Factor/Intervention Violations		0	Time Out	2:30PM		
Discount Tobacco 334			Permit Holder	Risk Ca	ategory	,		
Street Address			Duffy & Associates, Inc. Med			edium/Class II		
809 Woodlawn Rd.	Purpose of Inspection							
City/State	ZIP Code	Routine Inspection						
Lincoln, IL	62656	The time inspection						
FOODDODNE ILLNESS DISK FACTORS AND DURING HEALTH INTERVENTIONS								

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item

IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable

Mark "X" in appropriate box for COS and/or R

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

		Mark A in appropriate box for eos ana/or it		
	COS=	corrected on-site during inspection R=repeat violatio	n	
Со	Compliance Status			
,		Supervision		
1	In	Person in charge present, demonstrates knowledge, and performs duties		
2	In	Certified Food Protection Manager (CFPM)		
		Employee Health		
3	In	Management, food employee and conditional employee; knowledge, responsibilities and reporting		
4	In	Proper use of restriction and exclusion		
5	In	Procedures for responding to vomiting and diarrheal events		
		Good Hygienic Practices		
6	In	Proper eating, tasting, drinking, or tobacco use		
7	In	No discharge from eyes, nose, and mouth		
		Preventing Contamination by Hands		
8	N/O	Hands clean and properly washed		
9	N/O	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		
10	In	Adequate handwashing sinks properly supplied and accessible		
		Approved Source		
11	In	Food obtained from approved source		
12	N/O	Food received at proper temperature		
13	In	Food in good condition, safe, and unadulterated		
14	N/A	Required records available: shellstock tags, parasite destruction		
		GOOD	RFT	ΊΑ

Compliance Status								
Protection from Contamination								
15	In	Food separated and protected						
16	In	Food-contact surfaces; cleaned and sanitized						
17	In	Proper disposition of returned, previously served, reconditioned and unsafe food						
Time/Temperature Control for Safety								
18	N/O	Proper cooking time and temperatures						
19	N/A	Proper reheating procedures for hot holding						
20	N/A	Proper cooling time and temperature						
21	N/O	Proper hot holding temperatures						
22	In	Proper cold holding temperatures						
23	In	Proper date marking and disposition						
24	N/A	Time as a Public Health Control; procedures & records						
		Consumer Advisory						
25	N/A	Consumer advisory provided for raw/undercooked food						
		Highly Susceptible Populations						
26	N/A	Pasteurized foods used; prohibited foods not offered						
Food/Color Additives and Toxic Substances								
27	In	Food additives: approved and properly used						
28	In	Toxic substances properly identified, stored, and used						
Conformance with Approved Procedures								
29	N/A	Compliance with variance/specialized process/HACCP						

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation

_	_	1	200	_	
			cos	R	
Safe Food and Water					
30		Pasteurized eggs used where required			
31		Water and ice from approved source	/ ·		
32		Variance obtained for specialized processing methods			
		Food Temperature Control			
33		Proper cooling methods used; adequate equipment for temperature control		r=3	
34		Plant food properly cooked for hot holding			
35		Approved thawing methods used			
36		Thermometers provided & accurate	26 - 10	/:	
Food Identification					
37		Food properly labeled; original container			
Prevention of Food Contamination					
38		Insects, rodents, and animals not present			
39		Contamination prevented during food preparation, storage and display			
40		Personal cleanliness			
41		Wiping cloths: properly used and stored			
42		Washing fruits and vegetables			

		cos	R
	Proper Use of Utensils		
43	In-use utensils: properly stored		
44	Utensils, equipment & linens: properly stored, dried, & handled		
45	Single-use/single-service articles: properly stored and used		
46	Gloves used properly		
	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		
51	Plumbing installed; proper backflow devices		
52	Sewage and waste water properly disposed		
53	Toilet facilities: properly constructed, supplied, & cleaned		
54	Garbage & refuse properly disposed; facilities maintained		
55	Physical facilities installed, maintained, and clean		
56	Adequate ventilation and lighting; designated areas used		
	Employee Training		
57	All food employees have food handler training		
58	Allergen training as required		

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Establishn	ment: Discount Tobacco	1	Establishment #: 334						
Water Sup	oply: 🛛 Public 🗌 Pr	rivate Waste \	Water System: ⊠ Public □	Private					
Sanitizer 1	Гуре: <u>Chlorine</u>		PPM: 100	H	Heat:				
			TEMPERATURE OBSERV	ATIONS		_			
	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp			
	All Temps in ∘F								
All C	Cold Holding Units ≤	41							
		 							
		+ +							
		OBS	SERVATIONS AND CORREC	TIVE ACTIONS		·			
Item Number		Violations of	cited in this report must be corre	cted within the time f	rames below.				
			No Violations Noted Du	uring inspection					
CFPM Ve	rification (name, expira	tion date, ID#):							
	Robin Binkley								
	21571706 Exp: 04/10/2024								
	opic: Discussed hand w	ashing procedures	used in establishment						
Tirkeer Te	opic. Discussed nama w	usining procedures	docum establishment						
0.10	su blas		Jul 12, 2022						
Person in Charge (Signature)			Date						
	1								
X	(auz l= ·		Follow-up: Yes	No (Check one)	Follow-up Date: N/A				
Inspector (Si	ignature)		ronow-up res	M Mo (clieck oile)	rollow-up Date: MA				