## **Food Establishment Inspection Report**

Page 1 of 2

Local Health Department Name and Address			No. of Risk Factor/Intervention Violations		0	Date	12/14/2022
Logan County Department of Public Health			,			Time In	3:00 PM
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (2	217) 735-2	2317				Tillie III	3.00 F IVI
Establishment	License/I	Permit #	No. of Repeat Risk Factor/Intervention Violatio	ons	0	Time Out	3:30 PM
American Legion Post #263 210			Permit Holder Risk Ca		Category		
Street Address			American Legion Post #263	ican Legion Post #263 Medium/Class II		is II	
1740 Fifth St.			Purpose of Inspection				
City/State	ZIP Code	Routine Inspection					
Lincoln, IL 62656							
Establishment American Legion Post #263 Street Address 1740 Fifth St. City/State	License/I 210	Permit #  ZIP Code		Risk Ca	· .	Time Out	

## 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

COS=corrected on-site during inspection R=repeat violation

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.

	COS-	-corrected on-site during inspection - <b>k</b> =repeat violatio	11			
Compliance Status CO						
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	N/O	Proper eating, tasting, drinking, or tobacco use				
7	N/O	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 RETAIL					

Co	mpliance Status		cos	R				
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/O	Proper reheating procedures for hot holding						
20	N/O	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						
ĺ		Highly Susceptible Populations						
26	N/A	Pasteurized foods used; prohibited foods not offered						
Food/Color Additives and Toxic Substances								
27	ln	Food additives: approved and properly used						
28	ln	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

	11	cos	R
	Safe Food and Water	20 32	
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		e-
34	Plant food properly cooked for hot holding		
35	Approved thawing methods used		
36	Thermometers provided & accurate		
	Food Identification		
37	Food properly labeled; original container		
- 55	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		Γ
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		Г
58	Allergen training as required		

## **Food Establishment Inspection Report**

Page 2 of  $^2$ 

Establishn	nent: American Legion Po	ost #263		Establis	hment #: 2	10	1 486 2 01
Water Sup	oply: 🛛 Public 🗌 Priv	vate Wast	e Water System: 🔀 P	ublic	_		
	ype: Chlorine		_	: 100	He	eat:	
			TEMPERATURE	OBSERVATIONS			
	Item/Location	Temp	Item/Location	on Tem	р	Item/Location	Temp
	All Temps in ∘F						
All C	Cold Holding Units ≤	41					
Musta	rd on bottom shelf in						
	walk in cooler	32					
Pickles	on top shelf in walk in						
	cooler	36					
Olives i	n prep fridge need bar						
	door	40					
		0	BSERVATIONS AND	CORRECTIVE ACT	IONS		
Item Number		Violation	ns cited in this report mus	t be corrected within	the time fra	imes below.	
Number							
			No Violations	Noted during inspe	ection		
CFPM Vei	rification (name, expirati	on date, ID#):					
Ri	ick Jones- On File						
HACCP To	opic: Discussed proper d	<u> </u> ate marking pr	ocedures in establishm	nent			
	5. 1 mm ch						
	pul Matin		Dec 14, 2022				
Person in Ch	arge (Signature)		Date				
-	AR.						
	Upm Car		Follow-up:	☐ Yes 🔀 No (Ch	eck one)	Follow-up Date: N/A	
Inspector (Si	gnature)						