## **Food Establishment Inspection Report**

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								1 age 1 of 2	
Local Health Department Name and Address	No. of Risk Factor/Intervention Violations		0	Date	06/07/2022				
Logan County Department of Public Health  109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (217) 735-2317				- 1	Time In	11:00 AM			
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (		No. of Repeat Risk Factor/Intervention Violations 0			ո Ի	T: O+	42.00 014		
Establishment	Permit #				<u> </u>	Time Out	12:00 PM		
Lincoln Land Catering			Permit Holder Risk Category						
Street Address			Nicholas Bay High/Class III						
21 S. Lake Rd		Purpose of Inspection							
City/State	1	ZIP Code	Routine Inspe	ection					
Lincoln IL		62634	noutine mape						
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.

		-corrected on-site during inspection - K-repeat violatio	''	
Co	mpliance Status		cos	R
		Supervision		
1	ln	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	In	Hands clean and properly washed		
9	ln	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	RET	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/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							
		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

		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-
34	Plant food properly cooked for hot holding		ŝ
35	Approved thawing methods used		
36	Thermometers provided & accurate	100	
	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		

## **Food Establishment Inspection Report**

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Establishr	ment: Lincoln Land Cateri	ng	Establishment #:							
Water Su	pply: 🛛 Public 🗌 Priv	vate Waste	Water System: 🛛 Public 🗌	Private						
Sanitizer <sup>-</sup>	Type: Chlorine		PPM: <u>100</u>		Heat:					
			TEMPERATURE OBSERVA	ATIONS		_				
	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp				
	All Temps in ∘F									
IZ . I . I.		26								
Ketchup in fridge middle shelf Relish in fridge door on right		36 40		<del>                                     </del>						
Kelisii	in mage addition right	40		<del> </del>						
		OBS	SERVATIONS AND CORRECT	IVE ACTIONS						
Item Number		Violations (	cited in this report must be correc	ted within the time	frames below.					
			No Violations were noted du	ring this inspectio	n					
CFPM Ve	rification (name, expiration	on date. ID#):								
INI!	cholas Bay present									
HACCP To	opic: Discussed proper ha	and washing pro	cedures in establishment							
	V-B		lun 7 2022							
	Person in Charge (Signature)		Jun 7, 2022  Date	<del></del>						
	Ohbo		Follow-up: Yes _[	☑ No (Check one)	Follow-up Date: N/A					
Increstor (S	ignatural									