Food Establishment Inspection Report

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Local Health Department Name and Address	No. of Risk Factor/Intervention Violations			0	Date	12/22/2022			
Logan County Department of Public Health				, , , , , , , , , , , , , , , , , , , ,		0	Time In	9:35AM	
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (217) 735-2317				No. of Donast Disk Foster/Interception Violetiese			Time iii	J.55/111	
Establishment	/Permit #	No. of Repeat Risk Factor/Intervention Violations			0	Time Out	10:00AM		
The Lucky Dog		Permit Holder Risk		Risk Category					
Street Address			Holly Maestas Low/Class III						
401 Limit St				nspection					
City/State ZIP Code			- Routine Inspection						
Lincoln, IL 62656			Troutine map						
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS									
Circle designated as wellower status (INLOLIT N	/O. N./A\-	for each numbered	itom						

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.

		-corrected on-site during inspection - n-repeat violatio	cos				
Co	Compliance Status						
Supervision							
1	ln	Person in charge present, demonstrates knowledge, and performs duties					
2	N/A	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	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	ln	Required records available: shellstock tags, parasite destruction					
7		GOOD	RFT	Δ			

Compliance 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/A	Proper cooking time and temperatures						
19	N/A	Proper reheating procedures for hot holding						
20	N/A	Proper cooling time and temperature						
21	N/A	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

		11 (1)
	Safe Food and Water	1/2/
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	9 10
34	Plant food properly cooked for hot holding	
35	Approved thawing methods used	
36	Thermometers provided & accurate	:(0):
	Food Identification	
37	Food properly labeled; original container	12 (12
- 13	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	

R			cos	R						
101		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								
1	48	Warewashing facilities: installed, maintained, & used; test strips								
	49	Non-food contact surfaces clean		ľ						
		Physical Facilities								
	50	Hot and cold water available; adequate pressure								
l	51	Plumbing installed; proper backflow devices								
l	52	Sewage and waste water properly disposed								
l	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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Establishm	ont: The Lucky Dog			Establishment #:	401	1 486 2
	nent: The Lucky Dog		_	401		
Water Sup	pply: 🕅 Public 🗌 Pri	ivate Waste	Water System: X Public	∐ Private		
Sanitizer T	ype: Chlorine		PPM: <u>100</u>	I	Heat:	
			TEMPERATURE OBSER	RVATIONS		
	Item/Location		Item/Location	Temp	Item/Location	Temp
	All Temps in ∘F					
All C	old Holding Units ≤	41				
Pickles	, storage room fridge					
	(bottom shelf)	39				
			SERVATIONS AND CORD	CTIVE ACTIONS		
Item			SERVATIONS AND CORRI		frames helow	
Number		Violations	cited in this report must be co	rrected within the time	Trailles below.	
			No Violations Noted	During Inspection		
CFPM Ver	ı ification (name, expirat	ion date, ID#):				
	N/A					
HACCP To	pic: Discussed sanitizer	solution used a	nd test strip usage for estab	lishment.		
	0 0					
Bu	and Stiles		Dec 22, 2022			
Person in Cha	arge (Signature)		Date			
Q	(201)					
			Follow-up: Ye	s 🔀 No (Check one)	Follow-up Date: N/A	
Inspector (Sig	ghalture)					IOCI 17-356 ⟨Ø͡द्री