Food Establishment Inspection Report

Page 1 of 2

Local Health Department Name and Address						No. of Risk Factor/Intervention Violations 0 Date 08/1							/2022	2	
Logan County Department of Public Health													DO PM		
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (217) 735-2317 Establishment License/Permit #					- No	No. of Report Pick Easter/Intervention Violations) PM	-	
Establishment License/Permit # Pizza Man 325					Pe	Permit Holder Risk Category								-	
Street Address						Jerry Tschantz High/Class I									
120 E. Cooke St.						Purpose of Inspection									
City/State ZIP Code						Routine Inspection									
Mt. Pulaski, IL 62548															
	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 th prevalent contributing factors of foodborne illness or injury. Public								
Mark "X" in appropriate box for COS and/or R								interventions are control measures to prevent foodborne illness or inju							
COS=corrected on-site during inspection R=repeat violation														_	
COS COS						R Compliance Status COS								R	
-		Supervision	tee luceulades and	1	_				Protection fro		ation	1		_	
1	In	Person in charge present, demonstra performs duties	tes knowledge, and				15 16	In	Food separated a		and conitized			_	
2	In	Certified Food Protection Manager (C	FPM)			1		In	Proper disposition			- H		-	
		Employee Health					17	In	reconditioned and		incolously served	u,			
3	In	Management, food employee and co				1	Time/Temperature Control for S				r Safety				
_		knowledge, responsibilities and report	÷	-	\vdash		18	N/O	Proper cooking tir	me and temper	atures				
4	In	Proper use of restriction and exclusio		+	-		19	N/O	Proper reheating	procedures for	hot holding				
5	In	Procedures for responding to vomitin	ig and diarrheal events				20	N/O	Proper cooling tin	ne and tempera	ature				
6		Good Hygienic Practices		1	-		21	In	Proper hot holdin	g temperature	S				
6	In	Proper eating, tasting, drinking, or to		+	-		22	In	Proper cold holdin	ng temperature	25				
7	In	No discharge from eyes, nose, and m		4			23	In	Proper date mark	ing and disposi	tion				
		Preventing Contamination by I	Hands	1	1		24	N/A	Time as a Public H	lealth Control;	procedures & re	ecords			
8	In	Hands clean and properly washed No bare hand contact with RTE food	ar a pro approved	+			_		Consum	er Advisory					
9	In	alternative procedure properly allow					25	N/A	Consumer advisor	ry provided for	raw/undercook	ed food			
10	In	Adequate handwashing sinks properl							Highly Suscep	tible Populat	ions				
		Approved Source					26	N/A	Pasteurized foods			fered			
11	In	Food obtained from approved source	!	1			_		d/Color Additive						
12	N/O	Food received at proper temperature	1				27	In	Food additives: ap						
13	In	Food in good condition, safe, and una	dulterated				28	In	Toxic substances			used		_	
14	N/A	Required records available: shellstock	tags, parasite				20		nformance with			ACCD		_	
destruction								29 N/A Compliance with variance/specialized process/HACCP AIL PRACTICES						_	
						_								_	
		Good Retail Practices are prevent													
IV		nbered item is not in compliance	Mark "X" in appro		_		rtus	and/or R COS=0	corrected on-site	uuring inspe	CUON R=re	epeat vi	cos	-	
		Safe Food and Water				Proper Use of Utensils									
30	Pasteurized eggs up		Ť	T	-	43 In-use utensils: properly stored								-	
31		Pasteurized eggs used where required Water and ice from approved source			-	44 Utensils, equipment & linens: properly stored, dried, & handled									
32		Variance obtained for specialized processing methods				45 Single-use/single-service articles: properly stored and used									
Food Temperature Control						46 Gloves used properly									
33 Proper cooling methods used; adequate equipment for temperature control							-d		Utensils, Equipm	ent and Ven	ding				
34	Plant food properly cooked for hot holding					47	,	Food and non-food co	intact surfaces clea	nable, properl	y designed, cons	structed,	1		
35	Approved thawing methods used						-	and used							
36 Thermometers provided & accurate						48	-	Warewashing facilitie		ined, & used; t	est strips				
Food Identification						49	1	Non-food contact sur							
37 Food properly labeled; original container							T.			Facilities				_	
	Prevention of Food Contamination					50 Hot and cold water available; adequate pressure 51 Plumbing installed; proper backflow devices									
38	Insects, rodents, and animals not present					-	-							_	
39	Contamination prevented during food preparation, storage and display					52 Sewage and waste water properly disposed						_	-		
40						53 Toilet facilities: properly constructed, supplied, & cleaned 54 Garbage & refuse properly disposed; facilities maintained						_	-		
41 Wiping cloths: properly used and stored						55	_								
42 Washing fruits and vegetables						55 Physical facilities installed, maintained, and clean 56 Adequate ventilation and lighting; designated areas used						_			
							1			e Training				_	
						57	7	All food employees ha				1	1		
						58	-	Allergen training as re		-			-	\neg	

Food Establishment Inspection Report

				ŀ	Page 2 of -									
Establishment: Pizza Man		E	Establishment #: 325											
Water Supply: 🛛 Public 🗌 F	rivate Was	ste Water System: 🔀 Public 🗌 Pri	ivate											
Sanitizer Type: Chlorine		PPM: 100		Heat:										
		TEMPERATURE OBSERVATI	IONS											
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp									
All Temps in ∘F		Pepperoni in top of make table		Marina sauce in hot holding										
All Cold Holding Units ≤	41	in pizza topping table	39	in food prep area	140									
		Olives in top of make table												
Ham middle shelf of walk in		in pizza topping table	40											
cooler on left	35	Shredded Cheese in salad toppin												
Shredded cheese on middle she	elf	table	38											
in walk in cooler	40	Ranch on left side of make table												
		on bottom	38											
		OBSERVATIONS AND CORRECTIV	E ACTIONS	•	Ż									
ltem Number	Violatio	ons cited in this report must be corrected	d within the t	ime frames below.										
	No Violations noted during inspection													
CFPM Verification (name, expire	ation date, ID#)):												
Griff present- on file														
HACCP Topic: Discussed storage	e and labeling c	of toxic materials in food establishme	ent											
		Aug 10, 2022												
Person in Charge (Signature)		Date												
MahBur		Follow-up: 🗌 Yes 🔀	No (Check or	ne) Follow-up Date: N/A										

Inspector (Signature)

Page 2 of 2