Food Establishment Inspection Report

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Local Health Department Name and Address							No. of Bick Eactor /Intervention Violations O Date 12/30/							
Logan County Department of Public Health														-
109 3rd St, P.O. Box 508, Lincoln, IL 62656 Phone: (217) 735-2317						No. of Panast Bisk Easter/Intervention Violations						5:00		
Establishment License/Permit #						No. of Repeat Risk Factor/Intervention Violations 0 Time Out 5:45						PM		
Top of the 19th 317						Permit Holder Risk Category							- 1	
Street Address						Janell Woolard High/Class I								_
1020 1525th St						Purpose of Inspection								
City/State ZIP Code							Routine Inspection/30 Day Inspection							
Lincoln IL 62656														
		FOODBORNE IL	UBLIC HEALTH	INTERVENT	IONS									
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered i														
IN=in compliance OUT=not in compliance N/O=not observed N/A=not a									e important pract ibuting factors of	•				
Mark "X" in appropriate box for COS and/or R								1 ·	re control measu					
COS=corrected on-site during inspection R=repeat violation														_
Con	npliance Status			cos	R	R Compliance Status COS							R	
		Supervision			_				Protection from		ation			
1	In	Person in charge present, demonstra performs duties	tes knowledge, and				15	In	Food separated ar				_	
2	Out	Certified Food Protection Manager (C	(FPM)		X		16	In	Food-contact surfa					_
- 1	out	Employee Health		-		1	17	In	Proper disposition reconditioned and		reviously served	,		
		Management, food employee and co	nditional employee:	1	<u> </u>	Time/Temperature Control for Saf				r Safety			_	
3	In	knowledge, responsibilities and repo				18 N/O Proper cooking time and temperatures			•	Ĩ	Ť			
4	In	Proper use of restriction and exclusion	n			19 N/O Proper reheating procedures for hot ho				-				
5	In	Procedures for responding to vomitin	g and diarrheal events				20	N/O	Proper cooling tim		-			
		Good Hygienic Practices					21	In	Proper hot holding	•			-	
6	In	Proper eating, tasting, drinking, or to	bacco use				22	In	Proper cold holdin				-	
7	In	No discharge from eyes, nose, and m	outh				23	In	Proper date marki					
		Preventing Contamination by I	Hands				24	N/A	Time as a Public H			cords		
8	In	Hands clean and properly washed						**************************************		er Advisory				
9	N/O	No bare hand contact with RTE food					25	N/A	Consumer advisor		raw/undercooke	ed food	1	
_		alternative procedure properly allow		-					Highly Suscept				1	-
10	In	Adequate handwashing sinks properl	y supplied and accessibl	e	L		26	N/A	Pasteurized foods	used; prohibit	ed foods not offe	ered		
11	In	Approved Source		1	_		2	Foo	d/Color Additive	s and Toxic S	ubstances			
11	N/O	Food obtained from approved source		-	-		27	In	Food additives: ap	proved and pr	operly used			
12	In	Food received at proper temperature		-	-		28	In	Toxic substances p	roperly identi	fied, stored, and	used		
12		Food in good condition, safe, and una			\vdash			Coi	nformance with	Approved Pr	ocedures	÷		- 2
14	N/A Required records available: shellstock tags, parasite destruction						29	N/A	Compliance with v	ariance/specia	lized process/H/	ACCP		
			GOO	D RE	TAII	LP	RA	CTICES				÷		
-		Good Retail Practices are prevent				_			cals, and physical	obiects into	foods.			
N		nbered item is not in compliance	Mark "X" in appre						corrected on-site	-		peat vio	latio	n
				cos	R	COS							R	
		Safe Food and Water				Proper Use of Utensils								
30	Pasteurized eggs u	sed where required				43 In-use utensils: properly stored								
31	Water and ice from	n approved source				44	4	Utensils, equipment 8	& linens: properly st	ored, dried, &	handled			
32	2 Variance obtained for specialized processing methods					45 Single-use/single-service articles: properly stored and used					ised			
Food Temperature Control						46	5	Gloves used properly						
33	Proper cooling met	Proper cooling methods used; adequate equipment for temperature control							Utensils, Equipm	ent and Ven	ding			
34	Plant food properly cooked for hot holding					47	7	Food and non-food co and used	ontact surfaces clea	nable, properl	y designed, cons	tructed,		
35	Approved thawing	Approved thawing methods used				48	8	Warewashing facilities	s installed maintai	ned & used t	est strins	-+	-	-
36 Thermometers provided & accurate						49	-	Non-food contact sur			esconpo	-+	-	-
Food Identification							1:		Physical	Facilities		1	1	_
37 Food properly labeled; original container						50		Hot and cold water av				Î	1	-
Prevention of Food Contamination						51	-	Plumbing installed; pr				+		\neg
38	Insects, rodents, and animals not present					52	-					-		\neg
39	Contamination prevented during food preparation, storage and display					52 Sewage and waste water properly disposed 53 Toilet facilities: properly constructed, supplied, & cleaned								
40						54 Garbage & refuse properly disposed; facilities maintained					\rightarrow			
41 Wiping cloths: properly used and stored						55	-	Physical facilities insta						
42 Washing fruits and vegetables						56	-	Adequate ventilation			ed	\rightarrow		
							1		Employee				1	
						57	7	All food employees ha				T		
							в	Allergen training as re					-	-

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Establishm	nent: Top of the 19th		E	stablishmer	nt #: 317		
Water Sup	ply: 🛛 Public 🗌 Priv	ate Wa	aste Water System: 🔀 Public 🗌 Pri	vate			
Sanitizer T	ype: Chlorine		PPM: 100	Heat:			
			TEMPERATURE OBSERVATI	ONS			
	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	
,	All Temps in ∘F		meat on left side in double door				
			fridge	39			
Gra	avy in hot holding	175					
tomatoe	es in top of make table	38					
broccoli i	n bottom of make table	39					
Doug	gh in walk in cooler	39					
mayo i	n double door fridge						
	on right						
			OBSERVATIONS AND CORRECTIV	E ACTIONS	5		
ltem Number		Violat	ions cited in this report must be corrected	l within the t	ime frames below.		
2	The food establishme	nt is not une	der the operational supervision of a C	ertified Foo	d Service Sanitation Manager that i	s present	
	at appropriate times.	Provide an	adequate number of staff with appro	oved trainin	g. Reference section 750.540 of Foc	od Code.	
			To be corrected by next routi	ne inspecti	on.		
CEPM Ver	l ification (name, expiratio	on date ID#	<i>i</i>).				
			<i></i>				
	None Present						
HACCP To	pic: Discussed holding te	emperature	s and proper temperature checking.				
A	R mmon		Dec 30, 2022				

Person in Charge (Signature)

Inspector (Signature)

Date

Follow-up Date: N/A