## State of Ohio Standard Inspection Report

| Author   | ity: Chapte                   | ers 3/1/ and            | 3/15 Onio       | o Kevis                      | sed Code                     |                                  |  |  |
|--|-------------------------------|-------------------------|-----------------|------------------------------|------------------------------|----------------------------------|--|--|
| Name of facility   |                               |                         | Check one       |                              | License number               |                                  | Date                                   |  |
| Tolly's Gastmoub   |                               |                         | FSO [           | RFE                          | 178                          | مند                              | 12-5-16                                |  |
| Address  |                               |                         | <u></u>         |                              | Category/Des                 | ategory/Descriptive              |  |  |
| 1044 Harana Ano  | Than                          | 011111                  |                 |                              | 120                          | <u>_</u>                         |  |  |
| License holder   | C/I Cer                       | 711/6                   | nspection time  | - (min)                      | سامر<br>Travel time (m       | )<br>nin)                        | Other                                  |  |
| A delli and Ala a land   | / 1                           | ,                       | nspection time  | 3 (171113)                   | naver ume (n                 | шц                               | Ottler                                 |  |
| William Lingtell   | ou !                          |                         |                 |                              |                              |                                  |  |  |
| Type of visit (check)  ☐ Standard ☐ Follow up ☐ Foodborne ☐ 30 day |                               |                         | [1              | Follow-up date (if required) |                              | Sample date/result (if required) |  |  |
| Complaint Prelicensing Consu                                       |                               | Other <i>specify</i>    |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  | <del>1</del>                           |  |
| 3717-1 OAC Violation Checked                                       |                               |                         |                 |                              |                              |                                  |  |  |
| Management and Personnel   | - Indian                      |                         |                 |                              | Poisonous or Toxic Materials |                                  |  |  |
| 2.1 Employee health  |                               | tenance and operation   |                 |                              |                              | 7.0 Labeling and identification  |  |  |
| 2.2 Personal cleanliness   |                               | ning of equipment an    |                 |                              | 7.1                          |                                  | plies and applications                 |  |
| 2.3 Hygienic practices   | <u> </u>                      | tizing of equipment a   | na utensiis<br> |                              | 1.2                          | Storage and dis                  | play separation                        |  |
| 2.4 Supervision  |                               | dering                  |                 |                              | Special Requirements         |                                  |  |  |
| Food   | 4.8 Prote                     | ction of clean items    |                 |                              | 8.0                          | 8.0 Fresh juice production       |  |  |
| 3.0 Safe, unadulterated and honestly presented                     | Water, Plumbi                 | ing, and Waste          |                 |                              | 8.1                          | Heat treatment                   | dispensing freezers                    |  |
| 3.1 Sources, specifications and original containers                | 5.0 Wate                      | er:                     |                 |                              | 8.2                          | Custom process                   | ing.                                   |  |
| 3.2 Protection from contamination after receiving                  | 5.1 Plumb                     | bing system             |                 |                              | 8.3                          | Bulk water mac                   | hine criteria                          |  |
| 3.3 Destruction of organisms                                       | 5.2 Mobi                      | le water tanks          |                 |                              | 8.4                          | Acidified white                  | rice preparation criteria              |  |
| 3.4 Limitation of growth of organisms                              | 5.3 Sewa                      | age, other liquid was   | e and rainwater |                              | 9.0                          | Facility layout a                | nd equipment specifications            |  |
| 3.5 Identity, presentation, on premises labeling                   | 5.4 Refus                     | se, recyclables, and r  | eturnables      |                              | 20                           | Existing facilitie               | s and equipment                        |  |
| 3.6 Discarding or reconditioning unsafe, adulterated               | Physical Facil                | lities                  |                 |                              | Administrative               |                                  |  |  |
| 3.7 ¿Special requirements for highly susceptible populations       |                               | erials for construction | and repair      |                              | 901:3-4 OAC                  |                                  |  |  |
| Equipment, Utensils, and Linens                                    |                               | gn, construction, and   |                 |                              |                              | 01-21 OAC                        |  |  |
| 4.0 Materials for construction and repair                          |                               | bers and capacities     | motation .      |                              | - 1 37                       | UI-ZI UNU                        |  |  |
| 4.1 Design and construction  | 6.3 Location and placement    |                         |                 |                              | -                            |                                  |  |  |
| 4.2 Numbers and capacities   | 6.4 Maintenance and operation |                         |                 | <del>.</del>                 |                              |                                  |  |  |
| 4.3 Location and installation                                      |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
| Violation(s)/Comment(s)  |                               |                         |                 |                              |                              |                                  |  |  |
| Drevious Viole   | ation                         | 75 AA                   | VIPIL           | od.                          | F-111                        | 11/11                            | Inde                                   |  |
|  | NITUII                        | - 0                     | 116616          | . C1.                        | 100                          | 11/21                            | 10CA-5                                 |  |
| Claner.  |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  | ······································ |  |
|  |                               |                         |                 |                              |                              |                                  | · · · · · · · · · · · · · · · · · · ·  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
| ***************************************                            |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
|  |                               |                         |                 |                              |                              |                                  |  |  |
| Inspected by a A   | TF                            | R.S./\$IT#7 ,-          | Li              | censor/i                     | 101.1                        | 1/0                              | (10) 1 (A)                             |  |
| Inspected by auxe  | ľ                             | 145/                    | 5/0 [           |                              | 1/1/                         | 14 1                             | () T(V)                                |  |
| Received by  | T T                           | <u>ー</u> ノーノー<br>Fitle  | 4               |                              | NI                           | Phor                             | ne /                                   |  |
| 1  | (2)                           |                         |                 |                              |                              | 101                              | · <del>-</del>                         |  |
| HEA 5302 2/12 Ohio Department of Health                            | Dietribution                  | Top copy—Opera          | tor Bottom -    | ony Las                      | al haalth dans               | ertment                          | <del>/</del>                           |  |
| AGR 1268 2/12 Ohio Department of Agriculture                       | ווסווטטווטוו:                 | TOP COPY—Opera          | ιοι, ΔυιιΟΠΙ C  | ∿ԻԿ⊏00                       | arrieatur depi               | ai di licill                     | pgof                                   |  |

## **State of Ohio** Standard Inspection Report Authority: Chapters 3717 and 3715 Ohio Revised Code WTLorgfe //ow J4e yahoo. Com

| Auth   | ority: Chapters 3717 a                                   | nd 3715 Ohio Rev                         | ised Code   |   | /                                |  |
|--|--|--|---|---|----------------------------------|--|
| Name of facility   |  | Check one                                | License numb  | per   | Date                             |  |
| TOITY'S GASTROPUB<br>644 Wagner Greenvil                           |  | FSO RFE                                  | Category/Desc   | arintina.                                       | 12016                            |  |
| 1044 11) aaner (   | STEENVILL  | P  | Category/Desc   | cubrise   |                                  |  |
| License holder   | 2116 67 10 111   | Inspection time (min)                    | Travel time (m  | nin)  | Other                            |  |
| 1 William 1000   | fellow)  |  |   |   |                                  |  |
| Type of visit (check)  |  |  | Follow-up date (if required) Sample date/result (if r |   | Sample date/result (if required) |  |
| ☐ Standard ☐ Follow up ☐ Food ☐ Complaint ☐ Prelicensing ☐ Con     | dborne ☐ 30 day<br>sultation ☐ Other <i>speci</i>        | ifv                                      |   |   |                                  |  |
|  |  | 79                                       | L   |   | ALCO TO                          |  |
| 3717-1 OAC Violation Checked<br>Management and Personnel           |  |  | Poisona   | us or Toxic Ma                                  | toriale                          |  |
| 2.1 Employee health  | 4.4 Maintenance and ope                                  | 4.4 Maintenance and operation            |   |   | entification                     |  |
| 2.2 Personal cleanliness   | 4.5 Cleaning of equipmen                                 |  | 7.1   |   | plies and applications           |  |
| 2.3 Hygienic practices   | 4.6 Sanitizing of equipme                                | nt and utensils                          | 7.2   | 7.2 Storage and display separation              |                                  |  |
| 2.4 Supervision  | 4.7 Laundering   |  | Special Requirements                                  |   |                                  |  |
| Food   | 4.8 Protection of clean ite                              | ems                                      | 8.0 Fresh juice production                            |   |                                  |  |
| 3.0 Safe, unadulterated and honestly presented                     | Water, Plumbing, and Waste                               | )  |   | 8.1 Heat treatment dispensing freezers          |                                  |  |
| 3.1 Sources, specifications and original containers                | 5.0 Water  |  | 8.2   |   |                                  |  |
| 3.2 Protection from contamination after receiving                  | 5.1 Plumbing system                                      |  |   | .3 Bulk water machine criteria                  |                                  |  |
| 3.3 Destruction of organisms 3.4 Limitation of growth of organisms | 5.2 Mobile water tanks                                   |  |   |   | rice preparation criteria        |  |
| 3.5 Identity, presentation, on premises labeling                   | 5.3 Sewage, other liquid                                 |  |   | .0 Facility layout and equipment specifications |                                  |  |
| 3.6 Discarding or reconditioning unsafe, adulterated               | 5.4   Refuse, recyclables, a                             | 5.4 Refuse, recyclables, and returnables |   |   | s and equipment                  |  |
| 3.7 Special requirements for highly susceptible populations        | Physical Facilities                                      |  | Administrative  |   |                                  |  |
| Equipment, Utensils, and Linens                                    | 6.0 Materials for construc                               |  |   | 1:3-4 OAC                                       |                                  |  |
| 4.0 Materials for construction and repair                          | 6.1 Design, construction,                                |  | 370   | D1-21 OAC                                       |                                  |  |
| 4.1 Design and construction  |  | 6.2 Numbers and capacities               |   |   | y- •                             |  |
| 4.2 Numbers and capacities   | 6.3 Location and placement 6.4 Maintenance and operation |  |   |   |                                  |  |
| 4.3 Location and installation                                      | o. i Waintonanoo ana opo                                 | *  |   |   |                                  |  |
|  | <u>,</u>   |  |   |   | -                                |  |
|  |  |  |   |   |                                  |  |
| Violation(s)/Comment(s)  | Or I dias f  |  |   |   |                                  |  |
| (5.10)()PHVIA  | a Knit   | e ana                                    | SDU   | <u> </u>  | 1/1                              |  |
| the handwas  | hina sii   | ok in                                    | 11)a1   | T 57  | tatt                             |  |
| alfa and   | 1)19/1/656   | od all                                   | ha  | ndh   | 105/11/16                        |  |
| STAKE SHALL DOT WE IKEN FOR AND ATTACK                             |  |  |   |   |                                  |  |
| DIARDOSE, TOO  | n han  | dulach                                   | 1870  |   |                                  |  |
| (4.5) Observed   | a build  | Un of                                    | arci  | CP //   | dobus                            |  |
| In Side (1)  | OTHEN UK   | ider h                                   | book  | +hi   | MHEN                             |  |
| Station, collin  | 20 10 1  | 100KINO                                  | All   | a. 1  | )15(115Sex                       |  |
| areas shall  | The Kel  | I Tree                                   | (V)   | an  | accumulat                        |  |
| Of debns. Pic.   | Stuted   | Theil 10                                 | 15#   | Cam   | e out of                         |  |
| Inspected by   | R.S./SIT# (  | Licensør                                 |   |   |                                  |  |
| migan Baix   | eu 145   | BRO L                                    | arke  |   | 0 110                            |  |
| Received by G  | Title Ole  | <b>∕</b> 1                               |   | Phon  | e                                |  |
| HEA 5302 2/12 Onto Department of Health                            | Distribution: Top copy—Op                                | erator, Bottom copy-Lo                   | cal health depa                                       | rtment  | 1.2                              |  |
| AGR 1268 2/12 Ohio Department of Agriculture                       |  |  |   |   | pg of                            |  |

## State of Ohio Continuation Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

| Name of Facility   | C action out   |                            | Type of visit<br>51 andard | Date     |
|--|--|----------------------------|----------------------------|----------|
| 101145   | Gastropub  |                            | DIGITATION                 | 10 d 1   |
| Violation(s)/Comment(s)  |  |                            |                            |          |
| Note:  |  |                            |                            |          |
| - Dei  | ivery at 7   | ime on                     | inspecti                   | ON]      |
| - EXC  | ample docu   | ements                     | given.                     | ,        |
| -A-  | OKUY 15 CU   | aNing ,                    | HOUCH SUI                  | nday     |
| - Bal  | KHOW Will  | læ insta                   | illed Mor                  | day.     |
|  |  |                            |                            |          |
|  |  |                            |                            |          |
|  |  |                            |                            |          |
|  |  |                            |                            |          |
|  |  |                            |                            |          |
|  |  |                            |                            |          |
|  |  |                            |                            |          |
|  |  |                            | -                          |          |
|  |  |                            |                            |          |
|  |  |                            |                            |          |
|  | y "  |                            |                            |          |
|  |  |                            |                            |          |
|  |  |                            |                            | <u> </u> |
| ·  |  |                            |                            | i.       |
|  |  |                            |                            | E.E.     |
|  |  |                            |                            |          |
| Inspected by ()  | R.S./S/T   | Licensor                   | Scioto A                   |          |
| 1/1/1/1/4  | Title Title  | SISO CICETISON             | MYKE CO                    | 1 +10    |
| Received by  |  | Len                        | Phone                      |          |
| HEA 5351 2/12 Ohio Department<br>AGR 1268 Cont. 2/12 Ohio Depart | of Health Distribution: Top copy<br>tment of Agriculture | —Operator, Bottom copy—Loc | cal health department · na | Oot O    |