

# State of Ohio Standard Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility <b>Chillz Frozen Yogurt LLC</b>		Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License number <b>205</b>	Date <b>12-14-2017</b>
Address <b>331 S. Broadway</b>		Category/Descriptive <b>Commercial Class 3</b>		
License holder <b>Tonia R. Penny</b>		Inspection time (min)	Travel time (min)	Other
Type of visit (check) <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Follow up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 day <input type="checkbox"/> Complaint <input type="checkbox"/> Prelicensing <input type="checkbox"/> Consultation <input type="checkbox"/> Other <i>specify</i>		Follow-up date (if required)		Sample date/result (if required)

### 3717-1 OAC Violation Checked

#### Management and Personnel

2.1	Employee health
2.2	Personal cleanliness
2.3	Hygienic practices
2.4	Supervision

4.4	Maintenance and operation
4.5	Cleaning of equipment and utensils
4.6	Sanitizing of equipment and utensils
4.7	Laundering
4.8	Protection of clean items

#### Poisonous or Toxic Materials

7.0	Labeling and identification
7.1	Operational supplies and applications
7.2	Storage and display separation

#### Food

3.0	Safe, unadulterated and honestly presented
3.1	Sources, specifications and original containers
3.2	Protection from contamination after receiving
3.3	Destruction of organisms
3.4	Limitation of growth of organisms
3.5	Identity, presentation, on premises labeling
3.6	Discarding or reconditioning unsafe, adulterated
3.7	Special requirements for highly susceptible populations

#### Water, Plumbing, and Waste

5.0	Water
5.1	Plumbing system
5.2	Mobile water tanks
5.3	Sewage, other liquid waste and rainwater
5.4	Refuse, recyclables, and returnables

#### Special Requirements

8.0	Fresh juice production
8.1	Heat treatment dispensing freezers
8.2	Custom processing
8.3	Bulk water machine criteria
8.4	Acidified white rice preparation criteria
9.0	Facility layout and equipment specifications
20	Existing facilities and equipment

#### Equipment, Utensils, and Linens

4.0	Materials for construction and repair
4.1	Design and construction
4.2	Numbers and capacities
4.3	Location and installation

#### Physical Facilities

6.0	Materials for construction and repair
6.1	Design, construction, and installation
6.2	Numbers and capacities
6.3	Location and placement
6.4	Maintenance and operation

#### Administrative

901:3-4 OAC
3701-21 OAC

### Violation(s)/Comment(s)

**5.4 (H)** Observed no covered receptacle in the womens restroom. Discussed a toilet room used by females shall be provided with a covered receptacle for sanitary napkins.

Inspected by <b>Grace Winkoven</b>	R.S./SIT # <b>174254</b>	Licensors <b>Darke County Health Dept.</b>
Received by <b>Tonia R. Penny</b>	Title <b>Owner</b>	Phone <b>937-459-4590</b>