

State of Ohio

Standard Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility Northtowne Sunoco	Check one <input checked="" type="checkbox"/> FSO <input checked="" type="checkbox"/> RFE	License number 2070	Date 1.22.18
Address 1201 Russ Rd Greenville	Category/Descriptive C35		
License holder Northtowne Sunoco, LLC	Inspection time (min)	Travel time (min)	Other
Type of visit (check) <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Complaint	<input type="checkbox"/> Follow up <input type="checkbox"/> Prelicensing	<input type="checkbox"/> Foodborne <input type="checkbox"/> Consultation	<input type="checkbox"/> 30 day <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

<input type="checkbox"/>	2.1	Employee health
<input type="checkbox"/>	2.2	Personal cleanliness
<input type="checkbox"/>	2.3	Hygienic practices
<input checked="" type="checkbox"/>	2.4	Supervision

<input type="checkbox"/>	4.4	Maintenance and operation
<input type="checkbox"/>	4.5	Cleaning of equipment and utensils
<input checked="" type="checkbox"/>	4.6	Sanitizing of equipment and utensils
<input type="checkbox"/>	4.7	Laundrying
<input type="checkbox"/>	4.8	Protection of clean items

Poisonous or Toxic Materials

<input type="checkbox"/>	7.0	Labeling and identification
<input type="checkbox"/>	7.1	Operational supplies and applications
<input type="checkbox"/>	7.2	Storage and display separation

Food

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

Water, Plumbing, and Waste

<input type="checkbox"/>	5.0	Water
<input checked="" type="checkbox"/>	5.1	Plumbing system
<input type="checkbox"/>	5.2	Mobile water tanks
<input type="checkbox"/>	5.3	Sewage, other liquid waste and rainwater
<input type="checkbox"/>	5.4	Refuse, recyclables, and returnables

Special Requirements

<input type="checkbox"/>	8.0	Fresh juice production
<input type="checkbox"/>	8.1	Heat treatment dispensing freezers
<input type="checkbox"/>	8.2	Custom processing
<input type="checkbox"/>	8.3	Bulk water machine criteria
<input type="checkbox"/>	8.4	Acidified white rice preparation criteria
<input type="checkbox"/>	9.0	Facility layout and equipment specifications
<input type="checkbox"/>	20	Existing facilities and equipment

Equipment, Utensils, and Linens

<input type="checkbox"/>	4.0	Materials for construction and repair
<input type="checkbox"/>	4.1	Design and construction
<input checked="" type="checkbox"/>	4.2	Numbers and capacities
<input type="checkbox"/>	4.3	Location and installation

Physical Facilities

<input type="checkbox"/>	6.0	Materials for construction and repair
<input type="checkbox"/>	6.1	Design, construction, and installation
<input type="checkbox"/>	6.2	Numbers and capacities
<input type="checkbox"/>	6.3	Location and placement
<input type="checkbox"/>	6.4	Maintenance and operation

Administrative

<input type="checkbox"/>	901:3-4 OAC
<input type="checkbox"/>	3701-21 OAC

Violation(s)/Comment(s)

2.4C) PIC stated signed employee health policies are at main office. Discussed to keep a copy of the signed policy at the facility.

3.5C) No labeling on donut case to correspond with donut information ingredient list. Discussed bulk food that is available for consumer - self dispensing shall be prominently labeled w/ the manufacturers label that was provided with the food. Repeat.

Inspected by <i>Laura Schreterman</i>	R.S./SIT # 164029	Licenser DCHO
Received by <i>Madela Walker</i>	Title	Phone

State of Ohio
Continuation Report

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Name of Facility Northtowne Sunoco	Type of visit Standard	Date 1-22-18
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Violation(s)/Comment(s)

4.2I) No test strips at time of inspection. Discussed ~~with~~ a test kit that accurately measures the concentration in ppm of sanitizing solution shall be provided.

4.6A) PIC stated food prep tables are wiped with water and soapy water throughout the day. Discussed equipment food contact surfaces shall be sanitized every 4 hours if not more often.

5.10) Observed pizza crumbs in handsink. PIC stated they fall inside sink when pizzas are sliced. Recommended using the other side of 2 bay sink for handwashing and moving cutting board over to cover the sink closest to the pizza oven. Discussed a handwashing sink may not be used for purposes other than handwashing. Critical. Corrected at time of inspection.

Inspected by Suzanne Schusterma	R.S./SIT # 16-4029	Licenser DCHO
Received by Mirabella Adkins	Title	Phone