

# State of Ohio Standard Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

|   |                       |   |                                  |                        |
|---|-----------------------|---|----------------------------------|------------------------|
| Name of facility<br><b>Thwaits Bar + Grill</b>  |                       | Check one<br><input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE | License number<br><b>87</b>      | Date<br><b>3/21/18</b> |
| Address<br><b>200 N. Covington Ave. Ansonia, OH 45303</b>   |                       | Category/Descriptive<br><b>C3S</b>  |                                  |                        |
| License holder<br><b>Ty Thwaits</b>   | Inspection time (min) | Travel time (min)   | Other                            |                        |
| Type of visit (check)<br><input checked="" type="checkbox"/> Standard <input type="checkbox"/> Follow up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 day<br><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

|   |
|---|
| <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 |

#### Food

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|--|
| <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 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 |

#### Equipment, Utensils, and Linens

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

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

#### Water, Plumbing, and Waste

|   |
|---|
| <input type="checkbox"/> 5.0 Water                                    |
| <input 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     |

#### 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              |

#### Poisonous or Toxic Materials

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|--|
| <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        |

#### 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             |

#### Administrative

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

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

2.4(A) Observed no one with the Level 2 Certification. Discussed that at least one person that has supervisory or management responsibility and the authority to direct and control food preparation and service shall obtain the level 2 certification in Food Safety. PIC stated he will be participating in the April 13th Class.

2.4(C) Observed no employee health policy. Discussed that a policy is needed to inform employees their responsibility to report, to the PIC information about their health as it relates to diseases that are transmissible through food.

4.5(A) Observed a build-up of debris on the sides of fryer and dust debris on surfaces. Discussed that non-food contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris. PIC stated fryer hood is due to be professionally cleaned.

4.8(E) Observed plates face up and utensils with food contact area faced up. Discussed that clean equipment and utensils shall be stored by either covering or inverting them.

|  |                               |                          |
|--|-------------------------------|--------------------------|
| Inspected by<br><i>Anthony Martini</i> | R.S./SIT #<br><b>110-4147</b> | Licensors<br><b>DC4D</b> |
| Received by<br><i>Ty Thwaits</i>       | Title                         | Phone                    |