Food Inspection Report
Authority: Chapters 3717 and 3715 Ohio Revised Code

State of Ohio

Name of facility: Circle Mart
Address: 100 E. Main St.
License holder: Excel Petroleum LLC
City/State/Zip Code: Greenville / 45331
License Number: 225
Date: 01/29/2020
Check one: □ FSO □ RFE

Type of inspection (check all that apply):
□ Standard □ Critical Control Point (FSC) □ Process Review (RFE) □ Variance Review □ Follow up
□ Foodborne □ 30 Day □ Complaint □ Pre-licensing □ Consultation

Follow up date (if required):
Water sample date/result (if required):

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS
Mark designated compliance status (IN, OUT, N/O, N/A) for each numbered item; IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

<table>
<thead>
<tr>
<th>Compliance Status</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Supervision</td>
<td>Time/temperature controlled for safety food (TCS food)</td>
</tr>
<tr>
<td>1 IN □ OUT □ N/A</td>
<td>Proper cooking time and temperatures</td>
</tr>
<tr>
<td>2 □ OUT □ N/A</td>
<td>Proper reheating procedures for hot holding</td>
</tr>
<tr>
<td>3 □ OUT □ N/A</td>
<td>Proper cooling time and temperatures</td>
</tr>
<tr>
<td>4 □ OUT □ N/A</td>
<td>Proper hot holding temperatures</td>
</tr>
<tr>
<td>5 □ OUT □ N/A</td>
<td>Proper cold holding temperatures</td>
</tr>
</tbody>
</table>

Risk factors are food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness.

Public health interventions are control measures to prevent foodborne illness or injury.
Circle Mart

Name of Facility: Circle Mart
Type of Inspection: Standard
Date: 01/29/2020

GREAT RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark designated compliance status (IN, OUT, N/O, N/A) for each numbered item: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Safe Food and Water

38 □ IN □ OUT □ N/A □ N/O Pasteurized eggs used where required
39 □ IN □ OUT □ N/A Water and ice from approved source

Food Temperature Control

40 □ IN □ OUT □ N/A □ N/O Proper cooling methods used; adequate equipment for temperature control
41 □ IN □ OUT □ N/A □ N/O Plant food properly cooked for hot holding
42 □ IN □ OUT □ N/A □ N/O Approved thawing methods used
43 □ IN □ OUT □ N/A □ N/O Thermometers provided and accurate

Food Identification

44 □ IN □ OUT □ N/A □ N/O Food properly labeled; original container

Prevention of Food Contamination

45 □ IN □ OUT □ N/A □ N/O Insects, rodents, and animals not present/exteriors open spaces protected
46 □ IN □ OUT □ N/A □ N/O Contamination prevented during food preparation, storage, and display
47 □ IN □ OUT □ N/A □ N/O Wiping cloths: properly used and stored
48 □ IN □ OUT □ N/A □ N/O Wiping fruits and vegetables

Proper Use of Utensils

49 □ IN □ OUT □ N/A □ N/O In-use utensils: properly stored
50 □ IN □ OUT □ N/A □ N/O Utensils, equipment, and linens: properly stored, dried, handled
51 □ IN □ OUT □ N/A □ N/O Single-use/single-service articles: properly stored, used
52 □ IN □ OUT □ N/A □ N/O Slash-resistant, cloth, and latex glove use

Observations and Corrective Actions

Mark "X" in appropriate box for COS and R: COS=corrected on-site during inspection R=repeat violation

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Code Section</th>
<th>Priority Level</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>56</td>
<td>1.5A4</td>
<td>NC</td>
<td>Observed frost ice build up in velvet ice cream case. Discussed non-food contact surfaces shall be cleaned as often as needed to maintain.</td>
</tr>
<tr>
<td>58</td>
<td>2.2A</td>
<td>NC</td>
<td>Observed box of single serve cups on floor in back storage. Discussed products shall be 6&quot; off floor to prevent contamination</td>
</tr>
<tr>
<td>56</td>
<td>1.5A3</td>
<td>NC</td>
<td>Observed spill in cabinet under pop/nikki drink machines. Discussed non-food contact surfaces shall be cleaned as often as needed to maintain.</td>
</tr>
</tbody>
</table>

Thank you for obtaining sanitization & test strips
Thank you for cleaning & maintaining cooler.

Person in Charge: [Signature]
Sanitarian: [Signature]
License: DCHD

PRIORITY LEVEL: C = CRITICAL  NC = NON-CRITICAL

HEA 5302B Ohio Department of Health (10/19)
AGR 1288 Ohio Department of Agriculture (10/19)