State of Ohio

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

| Na | ame of facility | 1 5700 1.60 | Check one | | | License Number | Date 7//////////////////////////////////// | | | | |
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| two of the state of the same | | | | al. O III al | | | | | | | |
| | 5210 . | PT RT 49 | 100 | City/State/Zip Code Green on 14 0H 45 331 | | | | | | | |
| License holder Ins | | | | spection Time Tra | | vel Time | Category/Descriptive | | | | |
| | EBF | cal Stans LL | | $I \cap I$ | | 10 | 035 | | | | |
| Ty | pe of Inspection (che | ck all that apply) | <i>\D</i> | (p) | | Follow up date (if required | Water sample date/result | | | | |
| | | Control Point (FSO) ☐ Process Review (RFE) ☐ Varia | nce Revie | w 🗆 Follow | w up | Todanoc | (if required) | | | | |
| | ☐ Foodborne ☐ 30 Day ☐ Complaint ☐ Pre-licensing ☐ Consultation | | | | | | | | | | |
| | | FAAABARUE UUUFAA DIOIZEAATA | | | Transmin a | | | | | | |
| N 100 | | FOODBORNE ILLNESS RISK FACTOR | | ****** | | | 그 그 18. 성도 20. 시간에 많은 경통 20. 시간에 위한다. 보고 시간 라이트 시간 등 등을 때문에 하는 그렇게 했다. | | | | |
| IV | iark designated compl | ance status (IN, OUT, N/O, N/A) for each numbered it | em: IN≕in | compliance | e OUT= | not in compliance N/O=no | t observed N/A=not applicable | | | | |
| | | Compliance Status | | Compliance Status | | | | | | | |
| | | Supervision | | Time/Temperature Controlled for Safety Food (TCS food) | | | | | | | |
| 1 | ✓□N □OUT □ N/A | Person in charge present, demonstrates knowledge, ar performs duties | nd 2 | 3 | | Proper date marking and disposition | | | | | |
| 2 | .□IN-□OUT □ N/A | Certified Food Protection Manager | | | | Time as a public health control: procedures & records | | | | | |
| | = Employee Health | | | JEIN/A LI N/O | | | | | | | |
| 3 | .⊒IN □OUT □ N/A | Management, food employees and conditional employee knowledge, responsibilities and reporting | ' f | | OUT | Consumer Advisor | The state of the s | | | | |
| 4 | ,ØIN □OUT □ N/A | Proper use of restriction and exclusion | 25 |) DIN/A | | Consumer advisory provid | ded for raw or undercooked foods | | | | |
| 5 | DIÑ □OUT □ N/A | Procedures for responding to vomiting and diarrheal ever | its | | | Highly Susceptible Po | pulations | | | | |
| • | O/NªE/TUO II II II | Good Hygienic Practices | 26 | | OUT | Pasteurized foods used; p | prohibited foods not offered | | | | |
| 6 | | | | NVA تعلم | | | | | | | |
| , | <u> </u> | reventing Contamination by Hands | | 17 (J. 2003) (MAC. | | Chemical | | | | | |
| 8 | □IN □ OUT □ N/C | | 2 | | OUT | Food additives: approved | and properly used | | | | |
| 9 | ֻ⊒1Ñ □ OUT □N/A □ N/O | No bare hand contact with ready-to-eat foods or approvalternate method properly followed | red 2 | | Militari na menerala | Toxic substances properly | | | | | |
| | □IN ØÖUT □ N/A | Adamsta basel (ablas 6 199 | | Conformance with Approved Procedures | | | | | | | |
| 10 | | Approved Source | 29 | 29 ☐ IN ☐ OUT Compliance with Reduced Oxygen Packaging, other specialized processes, and HACCP plan | | | | | | | |
| 11 | .⊠¹Ñ □ OUT | Food obtained from approved source | | п и п | OUT | | | | | | |
| 12 | □ IN □ OUT □N/A □•N/O | Food received at proper temperature | 30 | | N/O | Special Requirements: Fre | sh Juice Production | | | | |
| 13 | | Food in good condition, safe, and unadulterated | 3 | | | Special Requirements: Heat Treatment Dispensing Free | | | | | |
| 14 | □ IN □ OUT □ N/A □ N/O | Required records available: shellstock tags, parasite destruction | 32 | | | Special Requirements: Cu | stom Processing | | | | |
| 120 120 140 | | Protection from Contamination | | П И П | | On a stall Down | | | | | |
| 15 | , ☑ IN ☐ OUT ☐ N/A ☐ N/O | Food separated and protected | 33 | ₩N/A L | | Special Requirements: Bul | | | | | |
| 16 | | Food-contact surfaces: cleaned and sanitized | 34 | , DN/A D | | Special Requirements: Aci Criteria | dified White Rice Preparation | | | | |
| 17 | _⊡-IN □ OUT | Proper disposition of returned, previously served, reconditioned, and unsafe food | 35 | | OUT | Critical Control Point Inspe | ction | | | | |
| | Time/Tempe | rature Controlled for Safety. Food (TCS food) | | | OUT | Б. Б. | _ | | | | |
| 18 | □IN □ OUT □N/A , □*Ñ/O | Proper cooking time and temperatures | 36 | العالم) A | | Process Review | | | | | |
| 19 | □ IN □ OUT □N/A □-N/O | Proper reheating procedures for hot holding | 37 | □ IN □ ,ØÑ/A | OUT | Variance | | | | | |
| 20 | □IN □ OUT □N/A □*N/O | Proper cooling time and temperatures | F | Risk factors are food preparation practices and employee behaviors | | | | | | | |
| 21 | □ IN □ OUT □N/A ,⊡*N/O | Proper hot holding temperatures | fo | that are identified as the most significant contributing factors to foodborne illness. | | | | | | | |
| 22 | O″N □ OUT □N/A | Proper cold holding temperatures | | Public health interventions are control measures to prevent foodborne illness or injury. | | | | | | | |

HEA 5302A Ohio Department of Health (10/19) AGR 1268 Ohio Department of Agriculture (10/19)

State of Ohio

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

| Name of Facility EB Fool Stop LLC | Type of Inspection Tandard 1/16/ | 29 | 7 |
|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|------------|---------------------|
| GOOD RETAIL PI | PACTICES | | |
| Good Retail Practices are preventative measures to control the introduc | | | |
| Mark designated compliance status (IN, OUT, N/O, N/A) for each numbered item: IN=i | | | able |
| Safe Food and Water | Utensils, Equipment and Vending | | |
| 38 IN OUT IN/A IN/O Pasteurized eggs used where required | Food and nonfood-contact surfaces cleans designed, constructed, and used | ıble, pro | perly |
| 39 ☐ IN ☐ OUT ☐ N/A Water and ice from approved source | 55 DIN OUT DN/A Warewashing facilities: installed, maintained | d, used; | test |
| Food Temperature Control | strips 56. ☐ IN ☐ OUT Nonfood-contact surfaces clean | | |
| 40 ☐ IN ☐ OUT ☐ N/A ☐ N/O Proper cooling methods used; adequate equipment for temperature control | Physical Facilities | | |
| 41 IN OUT IN/A-IT N/O Plant food properly cooked for hot holding | 57. ☐ IN ☐ OUT ☐N/A Hot and cold water available; adequate pr | essure | |
| 42 IN I OUT IN/A-I N/O Approved thawing methods used | 58 ☐ IN ☐OUT Plumbing installed; proper backflow device | es | |
| 43 IN OUT OUT N/A Thermometers provided and accurate | □N/A □ N/O | | |
| Food Identification | 59 □ IN □ OUT □N/A Sewage and waste water properly disposed | | |
| 44- TIN OUT Food properly labeled; original container | 60- □ IN □ OUT □N/A Tollet facilities: properly constructed, supplied | l, cleane | id |
| Prevention of Food Contamination | 61 FIN OUT N/A Garbage/refuse properly disposed; facilities n | naintaine | d |
| 45 ☑ IN ☐ OUT Insects, rodents, and animals not present/outer | 62 IN IN OUT Physical facilities installed, maintained, and of | lean; do | gs in |
| openings protected 46 □ IN-☐ OUT contamination prevented during food preparation, | □N/A □ N/O outdoor dining areas | | |
| storage & display | 63 TIN II OUT Adequate ventilation and lighting; designated | areas u | sed |
| 47 '□ IN □ OUT □ N/A Personal cleanliness 48 -□ IN □ OUT □ N/A □ N/O Wiping cloths: properly used and stored | 64,⊲⊡″IN ☐ OUT ☐N/A Existing Equipment and Facilities | | • |
| 49 IN OUT IN/A NO Washing fruits and vegetables | Administrative | | |
| Proper Use of Utensils | | | |
| 50 1 IN OUT ON/A N/O In-use utensils: properly stored | 65 1 IN OUT ON/A 901:3-4 OAC | | |
| 51 , IN I OUT IN/A Utensils, equipment and linens: properly stored, dried, handled | 66 □ IN □ OU, □ M/A 3701-21 OAC | | |
| 52 , E IN DOUT DN/A Single-use/single-service articles: properly stored, used | | | |
| 53 IN OUT IN/A-II N/O Slash-resistant, cloth, and latex glove use | | | Appropriate Control |
| Observations and Col Mark "X" in appropriate box for COS and R: COS=correct Item No. Code Section Priority Level Comment | | | |
| 46 8.2 Q AC Observed food on t | Loor in walk in fronte | cos | R |
| (1)) | 1007 11 12 1110 111 11110 11 | | |
| (2) 6.4B NC Observed did build | up on flour of begrase | | |
| walk in under shell | | | |
| also dirty | | | |
| | | | |
| 10 628 NC Observed no suap a | I trant hand was 4 ins | | |
| Sink in USub Wea | 4 | | |
| 12 211 111 111 11 1 1 1 1 1 | | | |
| 13 316 NC Observed dented e | uns of mashrooms in subarra | | |
| 46 324 NC Observed dust bu: | It up on condent. | | |
| | n sub area walkin | ╫ | |
| Contex. | 11 3 0 0 ayra Warren | <u>-</u> - | |
| 20//19/ | | | |
| Person in Charge - Bull act fix | Date: | | <u></u> |
| Sanitarian Martin Land | Licensor: | | |
| PRIORITY LEVEL: C= CRITICAL NC = NON-CRITICAL | Page of 3 | | |
| HEA 5302B Ohio Department of Health (10/19) AGR 1268 Ohio Department of Agriculture (10/19) | | | |

State of Ohio Continuation Report Authority: Chapters 3717 and 3715 Ohio Revised Code

| Name of | Facility | p. Th | 111 | | Standard | Date | 11 |
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| | | | | Corrective Actions (con | | Jan 1987 14 | |
| Item No. | Code Section | | Comment | COS=corrected on-site during inspec | | 60 | os R |
| 51 | 401 | 1/6 | Observed no | TOST STOOL of | as There | | |
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| Person in | Charge: / A | $\sqrt{2}$ | 6D 1 | · w | Date: | / / | <u>- 1 U</u> |
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PRIORITY LEVEL: C = CRITICAL NC = NON-CRITICAL

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