State of Ohio

# Food Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

| Name of facility | Check one | License Number | Date |
|---|---|---|---|
| Woodcrest Lanes | ☑ FSO ☐ RFE | 196 | 1/16/25 |
| **Address** | **City/State/Zip Code** | | |
| 100 N Grandview Ave | Union City OH 45390 | | |
| **License holder** | **Inspection Time** | **Travel Time** | **Category/Descriptive** |
| UC Boys DBA Woodcrest Lanes | 45 | 30 | C45 |

**Type of Inspection (check all that apply)**
☑ Standard ☑ Critical Control Point (FSO) ☐ 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

| | Compliance Status | |
|---|---|---|
| | **Supervision** | |
| 1 | ☑IN ☐OUT ☐N/A | Person in charge present, demonstrates knowledge, and performs duties |
| 2 | ☑IN ☐OUT ☐N/A | Certified Food Protection Manager |
| | **Employee Health** | |
| 3 | ☑IN ☐OUT ☐N/A | Management, food employees and conditional employees; knowledge, responsibilities and reporting |
| 4 | ☑IN ☐OUT ☐N/A | Proper use of restriction and exclusion |
| 5 | ☐IN ☐OUT ☐N/A | Procedures for responding to vomiting and diarrheal events |
| | **Good Hygienic Practices** | |
| 6 | ☐IN ☐OUT ☑N/O | Proper eating, tasting, drinking, or tobacco use |
| 7 | ☐IN ☐OUT ☐N/O | No discharge from eyes, nose, and mouth |
| | **Preventing Contamination by Hands** | |
| 8 | ☑IN ☐OUT ☐N/O | Hands clean and properly washed |
| 9 | ☑IN ☐OUT ☐N/A ☐N/O | No bare hand contact with ready-to-eat foods or approved alternate method properly followed |
| 10 | ☐IN ☑OUT ☐N/A | Adequate handwashing facilities supplied & accessible |
| | **Approved Source** | |
| 11 | ☑IN ☐OUT | Food obtained from approved source |
| 12 | ☐IN ☐OUT ☑N/A ☑N/O | Food received at proper temperature |
| 13 | ☐IN ☐OUT | Food in good condition, safe, and unadulterated |
| 14 | ☐IN ☐OUT ☐N/A ☐N/O | Required records available: shellstock tags, parasite destruction |
| | **Protection from Contamination** | |
| 15 | ☑IN ☐OUT ☐N/A ☐N/O | Food separated and protected |
| 16 | ☐IN ☐OUT ☐N/A ☐N/O | Food-contact surfaces: cleaned and sanitized |
| 17 | ☑IN ☐OUT | Proper disposition of returned, previously served, reconditioned, and unsafe food |
| | **Time/Temperature Controlled for Safety Food (TCS food)** | |
| 18 | ☑IN ☐OUT ☐N/A ☐N/O | Proper cooking time and temperatures |
| 19 | ☑IN ☐OUT ☐N/A ☐N/O | Proper reheating procedures for hot holding |
| 20 | ☑IN ☐OUT ☐N/A ☐N/O | Proper cooling time and temperatures |
| 21 | ☑IN ☐OUT ☐N/A ☐N/O | Proper hot holding temperatures |
| 22 | ☑IN ☐OUT ☐N/A | Proper cold holding temperatures |

| | Compliance Status | |
|---|---|---|
| | **Time/Temperature Controlled for Safety Food (TCS food)** | |
| 23 | ☑IN ☐OUT ☐N/A ☐N/O | Proper date marking and disposition |
| 24 | ☐IN ☐OUT ☑N/A ☐N/O | Time as a public health control: procedures & records |
| | **Consumer Advisory** | |
| 25 | ☐IN ☐OUT ☑N/A | Consumer advisory provided for raw or undercooked foods |
| | **Highly Susceptible Populations** | |
| 26 | ☐IN ☐OUT ☑N/A | Pasteurized foods used; prohibited foods not offered |
| | **Chemical** | |
| 27 | ☐IN ☐OUT ☐N/A | Food additives: approved and properly used |
| 28 | ☑IN ☐OUT ☐N/A | Toxic substances properly identified, stored, used |
| | **Conformance with Approved Procedures** | |
| 29 | ☐IN ☐OUT ☐N/A | Compliance with Reduced Oxygen Packaging, other specialized processes, and HACCP plan |
| 30 | ☐IN ☐OUT ☑N/A ☐N/O | Special Requirements: Fresh Juice Production |
| 31 | ☐IN ☐OUT ☑N/A ☐N/O | Special Requirements: Heat Treatment Dispensing Freezers |
| 32 | ☐IN ☐OUT ☑N/A ☐N/O | Special Requirements: Custom Processing |
| 33 | ☐IN ☐OUT ☑N/A ☐N/O | Special Requirements: Bulk Water Machine Criteria |
| 34 | ☐IN ☐OUT ☑N/A ☐N/O | Special Requirements: Acidified White Rice Preparation Criteria |
| 35 | ☐IN ☑OUT ☐N/A | Critical Control Point Inspection |
| 36 | ☐IN ☐OUT ☑N/A | Process Review |
| 37 | ☐IN ☐OUT ☑N/A | Variance |

**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.

# State of Ohio
# Food Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

| Name of Facility | Type of Inspection | Date |
|---|---|---|
| Woodcrest Lanes | Standard/CCP | 1/16/25 |

## GOOD 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 | Thermometers provided and accurate |
| **Food Identification** | | |
| 44 | ☑ IN ☐ OUT | Food properly labeled; original container |
| **Prevention of Food Contamination** | | |
| 45 | ☑ IN ☐ OUT | Insects, rodents, and animals not present/outer openings protected |
| 46 | ☑ IN ☐ OUT | Contamination prevented during food preparation, storage & display |
| 47 | ☑ IN ☐ OUT ☐ N/A | Personal cleanliness |
| 48 | ☑ IN ☐ OUT ☐ N/A ☐ N/O | Wiping cloths: properly used and stored |
| 49 | ☐ IN ☐ OUT ☐ N/A ☑ N/O | Washing fruits and vegetables |
| **Proper Use of Utensils** | | |
| 50 | ☑ IN ☐ OUT ☐ N/A ☐ N/O | In-use utensils: properly stored |
| 51 | ☑ IN ☐ OUT ☐ N/A | Utensils, equipment and linens: properly stored, dried, handled |
| 52 | ☑ IN ☐ OUT ☐ N/A | Single-use/single-service articles: properly stored, used |
| 53 | ☑ IN ☐ OUT ☐ N/A ☐ N/O | Slash-resistant, cloth, and latex glove use |

| | | |
|---|---|---|
| **Utensils, Equipment and Vending** | | |
| 54 | ☐ IN ☑ OUT | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used |
| 55 | ☑ IN ☐ OUT ☐ N/A | Warewashing facilities: installed, maintained, used; test strips |
| 56 | ☑ IN ☐ OUT | Nonfood-contact surfaces clean |
| **Physical Facilities** | | |
| 57 | ☑ IN ☐ OUT ☐ N/A | Hot and cold water available; adequate pressure |
| 58 | ☑ IN ☐ OUT ☐ N/A ☐ N/O | Plumbing installed; proper backflow devices |
| 59 | ☑ IN ☐ OUT ☐ N/A | Sewage and waste water properly disposed |
| 60 | ☑ IN ☐ OUT ☐ N/A | Toilet facilities: properly constructed, supplied, cleaned |
| 61 | ☑ IN ☐ OUT ☐ N/A | Garbage/refuse properly disposed; facilities maintained |
| 62 | ☑ IN ☐ OUT ☐ N/A ☐ N/O | Physical facilities installed, maintained, and clean; dogs in outdoor dining areas |
| 63 | ☑ IN ☐ OUT | Adequate ventilation and lighting; designated areas used |
| 64 | ☑ IN ☐ OUT ☐ N/A | Existing Equipment and Facilities |
| **Administrative** | | |
| 65 | ☐ IN ☐ OUT ☑ N/A | 901:3-4 OAC |
| 66 | ☑ IN ☐ OUT ☐ N/A | 3701-21 OAC |

## Observations and Corrective Actions

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

| Item No. | Code Section | Priority Level | Comment | COS | R |
|---|---|---|---|---|---|
| 10/35 | 5.1 O | C | Observed pitcher of water in hand sink by grill. PIC removed during inspection | ☑ | ☐ |
| 54 | 4.4A | NC | Observed seal broken on pizza prep unit. PIC stated their service guy was contacted and has not been out to replace it yet. | ☐ | ☐ |
| | | | Critical Control Point Inspection | ☐ | ☐ |
| | | | III Preventing Contamination by Hands | ☐ | ☐ |
| 10/35 | 5.1 O | C | Observed pitcher of water in hand sink by grill. PIC removed during inspection | ☑ | ☐ |

| Person in Charge | Date: |
|---|---|
| [signature] | 1-16-2025 |
| **Environmental Health Specialist** | **Licensor:** |
| Matty Epp | DCHD |

PRIORITY LEVEL: C= CRITICAL NC= NON-CRITICAL



HEA 5302B Ohio Department of Health (8/22)
AGR 1268 Ohio Department of Agriculture (8/22)