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

| Name of facility | | | | k one | RFE | | License Number | Date (C)-1), (S) - | | | | | |
|--|--|--|---|--|--|-------------------|---|------------------------------|--------------------------|--|--|--|--|
| Ad | ldress | The state of the s | City/State/Zip Code | | | | | | | | | | |
| | 10101 8 | J MIGNIT CILL | 12, Var (6, VC , OV 45368 | | | | | | | | | | |
| License holder | | | | | Trav | Travel Time | | Category/Descriptive | | | | | |
| Essential (commonta doi) - L | | | (| $-\epsilon(O)$ | | | 30 | | NC 22 | | | | |
| Type of Inspection (check all that apply) | | | | | | | Follow up date (if required | Water sample date/result | | | | | |
| | | Control Point (FSO) ☐ Process Review (RFE) ☐ Varia | ance Re | Review 🗆 Follow up | | | | | (if required) | | | | |
| ☐ Foodborne ☐ 30 Day ☐ Complaint ☐ Pre-licensing ☐ Consultation | | | | | | | | | | | | | |
| 2002 P | 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 Compliance Status | | | | | | | | | | | | | |
| | | Supervision | | Time/Temperature Controlled for Safety Food (TCS food) | | | | | | | | | |
| 1 | DÍN DOUT DN/A | Person in charge present, demonstrates knowledge, an | | 23 | ÚN □OU | | | | | | | | |
| | | periorms duties | | 23 | □N/A □ N/C | | Proper date marking and | uio | JOSHIO I | | | | |
| 2 | │□IN □OUT□N/A | Certified Food Protection Manager Employee Health | | 24 | | | Time as a public health control: procedures & records | | | | | | |
| | | Employee Health Management, food employees and conditional employees; | | | Consumer Advisory | | | | | | | | |
| : 3 | DIN DOUT DIN/A | UT D N/A knowledge, responsibilities and reporting | | | ☐IN ☐ OUT Consumer advisory provided for raw or undercooke | | | | | | | | |
| 4 | DIN DOUT DN/A | | -1- | 25 | √□N/A | 7.31.2 | | | | | | | |
| 5 | □IN □OUT □ N/A | Procedures for responding to vomiting and diarrheal ever Good Hygienic Hractices | nts | | □IN □ OU | <u>. П.</u> Т | Highly Susceptible Po | NATIONAL PROPERTY. | | | | | |
| 6 | DIN □OUT □ N/C | | CONTRACTOR OF THE PROPERTY OF | | IN/A | • | Pasteurized foods used; | proh | ibited foods not offered | | | | |
| 7 | | □ OUT □ N/O No discharge from eyes, nose, and mouth | | | | Chemical Chemical | | | | | | | |
| | A STATE OF THE STA | Preventing Contamination by Hands | | 27 | □ІИ □О∪ | Т | Food additives: approved and properly used | | | | | | |
| 8 | DIN DOUT DIN/C | Hands clean and properly washed | | | .□N/A | | | | | | | | |
| 9 | DIN DOUT | No bare hand contact with ready-to-eat foods or appro | ved 2 | 28 | □IN □ OU □N/A | Т | Toxic substances properly identified, stored, used | | | | | | |
| | □N/A □ N/O alternate method properly followed | | ļ | | | Co | onformance with Approve | d F | rocedures | | | | |
| 10 | ☐IN ☐ OUT ☐ N/A Adequate handwashing facilities supplied & accessil | | 9 | 29 | □IN □OU | T | Compliance with Reduced Oxygen Packaging, other | | | | | | |
| | | Approved Source | | | Specialized processes, and HACCP plan | | | | | | | | |
| 11 | DIN □OUT | Food obtained from approved source | | 30 | □IN □ OU □IN/A □ N/C | | Special Requirements: Fre | Juice Production | | | | | |
| 12 | □N/A □N/O | Food received at proper temperature | | | | | Special Requirements: He | reatment Dispensing Freezers | | | | | |
| 13 | OIN DOUT | Food in good condition, safe, and unadulterated | | | | | , | - Sportonia i roozoto | | | | | |
| 14 | □IN □OUT □N/A □N/O | Required records available: shellstock tags, parasite destruction | - | 32 | □IN □OU | | Special Requirements: Cu | n Processing | | | | | |
| | | Protection from Contamination | S.Los | 33 | DIN DOU | | Special Requirements: Bu | lk W | ater Machine Criteria | | | | |
| 15 | ∠□IN □OUT □N/A□N/O | Food separated and protected | } | - | DN/A □ N/C | | | | | | | | |
| 16 | □IN □OUT □N/A □N/O | Food-contact surfaces: cleaned and sanitized | | 34 | □IN □OU □N/A □N/C | | Special Requirements: Aci Criteria | idifie | d White Rice Preparation | | | | |
| 17 | □IN □OUT | Proper disposition of returned, previously served, reconditioned, and unsafe food | | 35 DIN DOUT | | T | Critical Control Point Inspection | | | | | | |
| | Time/Temp | erature Controlled for Safety Food (TCS food) | | | □IN □OU | Т | . D | | | | | | |
| 18 | □IN □ OUT | Proper cooking time and temperatures | · · · · · · · · · · · · · · · · · · · | 36 | □N/A | | Process Review | | | | | | |
| | □N/A □ N/O | | | 37 | □IN □OU | Т | Variance | | | | | | |
| 19 | □N/A □ N/O | Proper reheating procedures for hot holding | | | | | | | | | | | |
| 20 | DIN DOUT DN/A DN/O | Proper cooling time and temperatures | | Risk factors are food preparation practices and employee behaviors that are identified as the most significant contributing factors to | | | | | | | | | |
| 21 | □IN □ OUT □N/A □ N/O | Proper hot holding temperatures | | foodborne illness. Public health interventions are control measures to prevent foodborne | | | | | | | | | |
| 22 | DIN DOUT DN/A | Proper cold holding temperatures | | illness or injury. | | | | | | | | | |

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

State of Ohio

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

| Nan | ne of Facility | | | | Type of Ins | spection | Date | - ' ' '. | | |
|----------------|--|--|-------------------------|--|---|---|--|--|---|--|
| | <u>. 99 K. P</u> | lact commenting | ((,, | | SIC | <u> </u> | 1071 | <u> </u> |) | |
| [S-22-02] | | | | | | | | | | |
| | A CONTRACTOR OF THE PROPERTY O | GOOD RETAIL | Transition discountries | Control of the second of the s | | | | Particular. | | |
| M: | | ces are preventative measures to control the intrestatus (IN, OUT, N/O, N/A) for each numbered item: | | | | | | | _1_1_ | |
| HOTOL ALV | | Safe Food and Water | | ompliance 001- | Mag Welstern London Auford | , Equipment and Ven | Charles State and South Property and | . арриса | able | |
| 38 | □ IN □ OUT □N/A □ N/O | Pasteurized eggs used where required | 54 | □ IN □ OUT | Food | and nonfood-contact ned, constructed, and | surfaces cleana | able, pro | perly | |
| 39 | □ IN □ OUT □ N/A | Water and ice from approved source | | | Marc | ewashing facilities: insta | | d. used: | test | |
| | Fo | od Temperature Control | 55 | | strips | 3 | | | | |
| 40 | | Proper cooling methods used; adequate equipment for temperature control | 56 | 56. □ IN □ OUT | | Nonfood-contact surfaces clean Physical Facilities | | | | |
| 41 | □ IN □ OUT □N/A □ N/O | Plant food properly cooked for hot holding | 57, | | IN/A Hot a | and cold water availab | le; adequate pr | essure | PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS | |
| 42 | ☐ IN ☐ OUT ☐N/A ☐ N/O | Approved thawing methods used | 58 | .□ IN □OUT | Plumbing installed; proper backflow devices | | | | | |
| 43 IN OUT ON/A | | Thermometers provided and accurate | 7 | □N/A □ N/O | ļ | | | | | |
| | | Food Identification | 59 | □1Ñ □ OUT □ | IN/A Sewa | age and waste water pro | perly disposed | | | |
| 44 | □ IN □ OUT | Food properly labeled; original container | 60 | ☑IN □ OUT □ | JN/A Toilet | /A Toilet facilities: properly constructed, supplied, cleaned | | | | |
| n manie | Preven | tion of Food Contamination | 61 | □ÍN □ OUT □ | IN/A Garb | age/refuse properly disp | osed; facilities m | naintaine | ∍d | |
| 45 | ☐ IN □ OUT | Insects, rodents, and animals not present/outer openings protected | 62 | ☑ IN □ OUT | | ical facilities installed, n | naintained, and c | :lean; do | gs in | |
| 46 | □ OUT | Contamination prevented during food preparation, storage & display | 1 | □N/A □ N/O | Julius | | ······································ | | | |
| 47 | , OUT □N/A | Personal cleanliness | 63 | .□ IN □ OUT | Adeq | uate ventilation and ligh | iting; designated | areas u | ised | |
| 48 | | Wiping cloths: properly used and stored Washing fruits and vegetables | 64 | □ IN □ OUT □ | JN/A Existi | ng Equipment and Facilit | ies | | | |
| 40 | | Proper Use of Utensils | | | | Administrative | | | | |
| 50 | | In-use utensils: properly stored | 65 | □IN □ OUTÆ |]Ñ/A 901:3 | 3-4 OAC | | | | |
| 51 | ☐ IN ☐ OUT ☐N/A | Utensils, equipment and linens: properly stored, dried, handled | 66 | | 1N/A 3701 | -21 OAC | | | | |
| 52 | | Single-use/single-service articles: properly stored, used | ┩ ┝ | ļ,———— | | | | | | |
| 53 | □,IÑ □ OUT □N/A □ N/O | Slash-resistant, cloth, and latex glove use | 1 | | | | | | | |
| | | Observations and (| | | | | 1.00 | a Salarini | | |
| ltem | No. Code Section Priori | Mark "X" in appropriate box for COS and R: COS=cor ty Level Comment | rected | on-site during linsp | ection R ⇒re | peat-violation | ring 1 | 4-11-11 | | |
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| Pers | on in Charge | | | | | Date: | | Т | Г., | |
| | | onda Muller | | | | · - | | | | |
| Envi | ronmental Health Specialist | Com AND | | Licensor: | | | | 30 | | |
| PRI | ORITY LEVEL: C= (| CRITICAL NC= NON-CRITICAL | | | | Page | 7 of | ,/ | | |

PRIORITY LEVEL: C= CRITICAL HEA 5302B Ohio Department of Health (8/22) AGR 1268 Ohio Department of Agriculture (8/22) Page____of___