

<b>Food Establishment Inspection Report</b>				Page ____ of ____	
As Governed by State Code Section <b>XXX.XXX</b>		Permit Holder		Status: <b>Pass</b>	
Do Good County				<b>Pass with Conditions</b>	
12344 Any Street, Our Town, State 11111		Risk Category		<b>Fail</b>	
Establishment		Address			
License/Permit #		City/State/Zip Code			
		Purpose of Inspection			

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS											
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item <b>IN</b> =in compliance <b>OUT</b> =not in compliance <b>N/O</b> =not observed <b>N/A</b> =not applicable  Mark "X" in appropriate box for COS and/or R <b>COS</b> =corrected on-site during inspection <b>R</b> =repeat violation				<b>Risk factors</b> are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury. Risk factors require immediate correction.							
Compliance Status			COS	R	Compliance Status			COS	R		
Supervision					Protection from Contamination						
1	IN	OUT			15	IN	OUT	N/A	N/O		
Person in charge present, demonstrates knowledge, and performs duties					Food separated and protected						
2	IN	OUT	N/A		16	IN	OUT	N/A			
Illinois Food Service Sanitation Manager Certification					Food-contact surfaces; cleaned and sanitized						
Employee Health					Time/Temperature Control for Safety						
3	IN	OUT			17	IN	OUT				
Management, food employee and conditional employee; knowledge, responsibilities and reporting					Proper disposition of returned, previously served, reconditioned and unsafe food						
4	IN	OUT			18	IN	OUT	N/A	N/O		
Proper use of restriction and exclusion					Proper cooking time and temperatures						
5	IN	OUT			19	IN	OUT	N/A	N/O		
Procedures for responding to vomiting and diarrheal events					Proper reheating procedures for hot holding						
Good Hygienic Practices					Consumer Advisory						
6	IN	OUT	N/O		20	IN	OUT	N/A	N/O		
Proper eating, tasting, drinking, or tobacco use					Proper cooling time and temperature						
7	IN	OUT	N/O		21	IN	OUT	N/A	N/O		
No discharge from eyes, nose, and mouth					Proper hot holding temperatures						
Preventing Contamination by Hands					Highly Susceptible Populations						
8	IN	OUT	N/O		22	IN	OUT	N/A	N/O		
Hands clean and properly washed					Proper cold holding temperatures						
9	IN	OUT	N/A	N/O	23	IN	OUT	N/A	N/O		
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed					Proper date marking and disposition						
10	IN	OUT			24	IN	OUT	N/A	N/O		
Adequate handwashing sinks properly supplied and accessible					Time as a Public Health Control; procedures & records						
Approved Source					Food/Color Additives and Toxic Substances						
11	IN	OUT			25	IN	OUT	N/A			
Food obtained from approved source					Consumer advisory provided for raw/undercooked food						
12	IN	OUT	N/A	N/O	26	IN	OUT	N/A			
Food received at proper temperature					Pasteurized foods used; prohibited foods not offered						
13	IN	OUT			27	IN	OUT	N/A			
Food in good condition, safe, and unadulterated					Food additives: approved and properly used						
14	IN	OUT	N/A	N/O	28	IN	OUT	N/A			
Required records available: shellstock tags, parasite destruction					Toxic substances properly identified, stored, and used						
Conformance with Approved Procedures					29	IN	OUT	N/A			
					Compliance with variance/specialized process/HACCP						

GOOD RETAIL PRACTICES									
Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. Mark "X" in box if numbered item is <b>not</b> in compliance    Mark "X" in appropriate box for COS and/or R <b>COS</b> =corrected on-site during inspection <b>R</b> =repeat violation									
Safe Food and Water			COS	R	Proper Use of Utensils			COS	R
30		Pasteurized eggs used where required			43		In-use utensils: properly stored		
31		Water and ice from approved source			44		Utensils, equipment & linens: properly stored, dried, & handled		
32		Variance obtained for specialized processing methods			45		Single-use/single-service articles: properly stored and used		
Food Temperature Control					Utensils, Equipment and Vending				
33		Proper cooling methods used; adequate equipment for temperature control			46		Gloves used properly		
34		Plant food properly cooked for hot holding			47		Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
35		Approved thawing methods used			48		Warewashing facilities: installed, maintained, & used; test strips		
36		Thermometers provided & accurate			49		Non-food contact surfaces clean		
Food Identification					Physical Facilities				
37		Food properly labeled; original container			50		Hot and cold water available; adequate pressure		
Prevention of Food Contamination					51		Plumbing installed; proper backflow devices		
38		Insects, rodents, and animals not present			52		Sewage and waste water properly disposed		
39		Contamination prevented during food preparation, storage and display			53		Toilet facilities: properly constructed, supplied, & cleaned		
40		Personal cleanliness			54		Garbage & refuse properly disposed; facilities maintained		
41		Wiping cloths: properly used and stored			55		Physical facilities installed, maintained, and clean		
42		Washing fruits and vegetables			56		Adequate ventilation and lighting; designated areas used		
Employee Training					57		All food employees have food handler training		

# Food Establishment Inspection Report

Establishment: \_\_\_\_\_ Establishment #: \_\_\_\_\_

Water Supply:.....  Public.....  Private Wastewater System:.....  Public.....  Private

Sanitizer Type: \_\_\_\_\_ PPM: \_\_\_\_\_ Heat: \_\_\_\_\_

TEMPERATURE OBSERVATIONS								
Item/Location		Temp	Item/Location		Temp	Item/Location		Temp

OBSERVATIONS AND CORRECTIVE ACTIONS	
Item Number	Violations cited in this report must be corrected within the time frames below.

**FSSMC Verification (name, expiration date, ID#):**

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**HACCP Topic:** \_\_\_\_\_

ILLINOIS UNIFORM GRADING SYSTEM				
Count of Violation(s)		Repeat Violations		
		0-5	6-10	11+
FBI Risk Factors	0-3	Pass	Pass with Conditions	Fail
	4-5	Pass with Conditions	Pass with Conditions	Fail
	6+	Fail	Fail	Fail

Number of Risk Factor/Intervention Violations	
Number of Repeat Violations	
Pass    Pass with Conditions    Fail    (Circle one)	

<b>Person in Charge (Signature)</b> _____	<b>Date:</b> _____
<b>Inspector (Signature)</b> _____	<b>Follow-up: YES NO (Circle one)</b> _____ <b>Follow-Up Date:</b> _____

