

## The Town of Cross Roads Retail Food Establishment Inspection Report

Date: <i>5-5-23</i>	Time in: <i>1314</i>	Time out: <i>1347</i>	License/Permit #	Est. Type: <i>Brest</i>	Risk Category: <i>Low</i>	Page <i>1</i> of <i>3</i>		
Purpose of Inspection:			<input checked="" type="checkbox"/> 1-Compliance	<input checked="" type="checkbox"/> 2-Routine	<input type="checkbox"/> 3-Field Investigation	<input type="checkbox"/> 4-Visit	<input type="checkbox"/> 5-Other	<b>Total Score</b>
Establishment Name: <i>Salad and Go</i>				Contact/Owner Name:		* Number of Repeat Violations: <i>0</i>	<b>100</b>	
Physical Address: <i>111-50 Hwy 380</i>			City/County: <i>Town of Cross Roads</i>		Zip Code:	Phone:		
Follow-up: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>								

Compliance Status: **OUT** = not in compliance **IN** = in compliance **NO** = not observed **NA** = not applicable **COS** = corrected on site **R** = repeat violation  
Mark the appropriate points in the **OUT** box for each numbered item. Mark a checkmark in appropriate box for **IN, NO, NA, COS**. Mark an asterisk '\*' in appropriate box for **R**.

Priority Items (3 Points) violations Require Immediate Corrective Action not to exceed 3 days

Compliance Status						Compliance Status					
OUT	IN	NO	NA	COS	R	OUT	IN	NO	NA	COS	R
<b>Time and Temperature for Food Safety</b> (F = degrees Fahrenheit)						<b>Employee Health</b>					
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Proper cooling time and temperature						12. Management, food employees and conditional employees, knowledge, responsibilities, and reporting					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Proper Cold Holding temperature (41°F/ 45°F)						13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Preventing Contamination by Hands</b>					
3. Proper Hot Holding temperature (135°F)						14. Hands cleaned and properly washed/ Gloves used properly					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Proper cooking time and temperature						15. No bare hand contact with ready to eat foods or approved alternate method properly followed (APPROVED Y,N)					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Highly Susceptible Populations</b>					
5. Proper reheating procedure for hot holding (165°F in 2 Hours)						16. Pasteurized foods used, prohibited food not offered. Pasteurized eggs used when required					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Chemicals</b>					
6. Time as a Public Health Control; procedures & records						17. Food additives; approved and properly stored. Washing Fruits & Vegetables					
<b>Approved Source</b>						<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction						18. Toxic substances properly identified, stored and used					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Water/ Plumbing</b>					
8. Food Received at proper temperature						19. Water from approved source; Plumbing installed; proper backflow device					
<b>Protection from Contamination</b>						<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Food Separated & protected, prevented during food preparation, storage, display, and tasting						20. Approved Sewage/Wastewater Disposal System, proper disposal					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Priority Foundation Items (2 Points) violations Require Corrective Action within 10 days</b>					
10. Food contact surfaces and Returnables <i>Cleaned</i> and Sanitized at <i>400</i> ppm/temperature						<b>Demonstration of Knowledge/ Personnel</b>					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Proper disposition of returned, previously served or reconditioned						21. Person in charge present, demonstration of knowledge, and perform duties/ Certified Food Manager (CFM)					
<b>Safe Water, Recordkeeping and Food Package Labeling</b>						22. Food Handler/ no unauthorized persons/ personnel					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Food Temperature Control/ Identification</b>					
23. Hot and Cold Water available; adequate pressure, safe						27. Proper cooling method used; <u>Equipment Adequate to Maintain Product Temperature</u>					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Required records available (shellshock tags, parasite destruction); Packaged Food labeled						28. Proper Date Marking and disposition					
<b>Conformance with Approved Procedures</b>						<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Compliance with Variance, Specialized Process, and HACCP plan; Variance obtained for specialized processing methods; manufacturer instructions						29. Thermometers provided, accurate, and calibrated; <u>Chemical/ Thermal test strips</u>					
<b>Consumer Advisory</b>						<b>Permit Requirement, Prerequisite for Operation</b>					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30. <b>Food Establishment Permit</b> (Current & Valid)					
26. Posting of Consumer Advisories; raw or undercooked foods (Disclosure/Reminder/Buffer Plate/ Allergen label)						<b>Utensils, Equipment, and Vending</b>					
<b>Core Items (1 Point) Violations Require Corrective Action Not to Exceed 90 Days or Next Inspection , Whichever Comes First</b>						31. Adequate handwashing facilities; Accessible and properly supplied, used					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. No Evidence of Insect contamination, rodent/other animals						<b>Food Identification</b>					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Personal Cleanliness/eating, drinking or tobacco use						41. Original container labeling (Bulk Food)					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Physical Facilities</b>					
36. Wiping Cloths, properly used and stored						42. Non-Food Contact surfaces clean					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. Environmental contamination						43. Adequate ventilation and lighting; designated areas used					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Approved thawing method						44. Garbage and Refuse properly disposed; facilities maintained					
<b>Proper Use of Utensils</b>						<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	45. Physical facilities installed, maintained, and clean					
39. Utensils, equipment, & linens; properly used, stored, dried, & handled/ In use utensils; properly used						<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	46. Toilet Facilities; properly constructed, supplied, and clean					
40. Single-service & single-use articles; properly stored and used						<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Received by:</b>						<b>Print:</b> <i>Jacob Klingsheim</i>			<b>Title:</b> Person In Charge/ Owner		
<b>Inspected by:</b> <i>John Glover Sr. S.</i>						<b>Print:</b> <i>John Glover</i>			<b>Business Email:</b>		

## Corrective Actions to Ensure Safe Food

### Item No.

- 1 Cooling**
  - TCS\* food cooled from 135° F to 70° F more than 2 hours OR 135° F to 41° F (45° F) More than 6 hours; OR prepared food cooled to 41° F (45° F) more than 4 hours:  
*Action: Voluntary destruction, rapid reheating of cooked foods if less than 4 hours*
  
- 2 Cold Hold**
  - TCS food held above 41° F (45° F) more than 4 hours:  
*Action: Voluntary destruction*
  
  - TCS food held above 41° F (45° F) less than 4 hours:  
*Action: Rapid cool (e.g. ice bath)*
  
- 3 Hot Hold**
  - TCS food held below 135° F more than 4 hours:  
*Action: Voluntary destruction*
  
  - TCS food held below 135° F less than 4 hours:  
*Action: Rapid reheats to 165° F or more*
  
- 4 Cooking**
  - TCS food undercooked:  
*Action: Re-cook to proper temperature*
  
- 5 Rapid Reheating**
  - TCS food improperly reheated:  
*Action: Reheat rapidly to 165° F*
  
- 7 Approved Source/Sound Condition**
  - Foods from unapproved sources/unsound condition:  
*Action: Voluntary destruction*
  
- 9 Cross-Contamination of Raw/Cooked Foods**
  - Ready-To-Eat food contaminated by raw TCS food:  
*Action: Voluntary destruction of ready-to-eat foods*
  
- 14 Handwashing**
  - Food employees observed not washing hands:  
*Action: Instruct employees to wash hands as specified in the Rules.*
  
- 15 Proper Handling of Ready-to-Eat Foods**
  - Employee did not properly wash and sanitize hands before touching ready-to-eat food with Bare hands:  
*Action: Voluntary destruction*
  
- 19, 23 Water Supply**
  - Facility does not have water for washing hands, preparing food, or cleaning equipment/utensils:  
*Action: Voluntary suspension of food preparation*

\* Time/Temperature Control for Safety (TCS)


The Town of Cross Roads Retail Food Establishment Inspection Report

Establishment Name: <i>Salad and Go</i>	Physical Address: <i>11150 Hwy 380</i>	City/State: <i>Town of Crossroads</i>	License/Permit #	Page <u>2</u> of <u>3</u>
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TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
<i>TCS food (Walk in Make tables)</i>	<i>41-45</i>				
<i>TCS food (Steamer)</i>	<i>150F</i>				

**OBSERVATIONS AND CORRECTIVE ACTIONS**

Item Number	AN INSPECTION OF YOUR ESTABLISHMENT HAS BEEN MADE. YOUR ATTENTION IS DIRECTED TO THE CONDITIONS OBSERVED AND NOTED BELOW:

Received by: (signature) 	Print: <i>Jacob Klingshelm</i>	Title: Person In Charge/ Owner
Inspected by: (signature) <i>John D. L...</i>	Print: <i>John Glover</i>	Samples: Y <u>N</u> # collected <u>2</u>