

State of Ohio Food Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility WENDY'S-41-006	Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License Number 36	Date 12/02/2022
Address 550 EAST MAIN STREET	City/State/Zip Code POMEROY OH 45760		
License holder RAY BLACKBURN	Inspection Time 75	Travel Time 10	Category/Descriptive CLASS 4 <25,000 SQ. FT.
Type of inspection (check all that apply) <input checked="" type="checkbox"/> Standard <input checked="" type="checkbox"/> Critical Control Point (FSO) <input type="checkbox"/> Process Review (RFE) <input checked="" type="checkbox"/> Variance Review <input type="checkbox"/> Follow Up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 Day <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-licensing <input type="checkbox"/> Consultation		Follow-up date (if required) 12/12/2022	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		Compliance Status	
Supervision		Time/Temperature Controlled for Safety Food (TCS food)	
1	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	23	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O
Person in charge present, demonstrates knowledge, and performs duties		Proper date marking and disposition	
2	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	24	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O
Certified Food Protection Manager		Time as a public health control: procedures & records	
Employee Health		Consumer Advisory	
3	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	25	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
Management, food employees and conditional employees; knowledge, responsibilities and reporting		Consumer advisory provided for raw or undercooked foods	
4	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Highly Susceptible Populations	
Proper use of restriction and exclusion		26	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
5	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Pasteurized foods used; prohibited foods not offered	
Procedures for responding to vomiting and diarrheal events		Chemical	
Good Hygienic Practices		27	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
6	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O	Food additives: approved and properly used	
Proper eating, tasting, drinking, or tobacco use		28	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A
7	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	Toxic substances properly identified, stored, used	
No discharge from eyes, nose, and mouth		Conformance with Approved Procedures	
Preventing Contamination by Hands		29	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
8	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	Compliance with Reduced Oxygen Packaging, other specialized processes, and HACCP plan	
Hands clean and properly washed		30	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
9	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Special Requirements: Fresh Juice Production	
No bare hand contact with ready-to-eat foods or approved alternate method properly followed		31	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O
10	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Special Requirements: Heat Treatment Dispensing Freezers	
Adequate handwashing facilities supplied & accessible		32	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
Approved Source		Special Requirements: Custom Processing	
11	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	33	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
Food obtained from approved source		Special Requirements: Bulk Water Machine Criteria	
12	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	34	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
Food received at proper temperature		Special Requirements: Acidified White Rice Preparation Criteria	
13	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	35	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A
Food in good condition, safe, and unadulterated		Critical Control Point Inspection	
14	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O	36	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
Required records available: shellstock tags, parasite destruction		Process Review	
Protection from Contamination		37	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
15	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Variance	
Food separated and protected		<p>Risk Factors are food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness.</p> <p>Public health interventions are control measures to prevent foodborne illness or injury.</p>	
16	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Food-contact surfaces: cleaned and sanitized			
17	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT		
Proper disposition of returned, previously served, reconditioned, and unsafe food			
Time/Temperature Controlled for Safety Food (TCS food)			
18	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Proper cooking time and temperatures			
19	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O		
Proper reheating procedures for hot holding			
20	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O		
Proper cooling time and temperatures			
21	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Proper hot holding temperatures			
22	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A		
Proper cold holding temperatures			

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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		Utensils, Equipment and Vending	
38	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O	54	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT
	Pasteurized eggs used where required		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used
39	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	55	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A
	Water and ice from approved source		Warewashing facilities: installed, maintained, used; test strips
Food Temperature Control		56	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT
40	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		Nonfood-contact surfaces clean
	Proper cooling methods used; adequate equipment for temperature control	Physical Facilities	
41	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	57	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
	Plant food properly cooked for hot holding		Hot and cold water available; adequate pressure
42	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	58	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT
	Approved thawing methods used		Plumbing installed; proper backflow devices
43	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A		<input type="checkbox"/> N/A <input type="checkbox"/> N/O
	Thermometers provided and accurate	59	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
Food Identification			Sewage and waste water properly disposed
44	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	60	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A
	Food properly labeled; original container		Toilet facilities: properly constructed, supplied, cleaned
Prevention of Food Contamination		61	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A
45	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT		Garbage/refuse properly disposed; facilities maintained
	Insects, rodents, and animals not present/outer openings protected	62	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT
46	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT		Physical facilities installed, maintained, and clean; dogs in outdoor dining areas
	Contamination prevented during food preparation, storage & display		<input type="checkbox"/> N/A <input type="checkbox"/> N/O
47	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	63	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT
	Personal cleanliness		Adequate ventilation and lighting; designated areas used
48	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	64	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
	Wiping cloths: properly used and stored		Existing Equipment and Facilities
49	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O	Administrative	
	Washing fruits and vegetables	65	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
Proper Use of Utensils			901:3-4 OAC
50	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	66	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
	In-use utensils: properly stored		3701-21 OAC
51	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A		
	Utensils, equipment and linens: properly stored, dried, handled		
52	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A		
	Single-use/single-service articles: properly stored, used		
53	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> N/O		
	Slash-resistant, cloth, and latex glove use		

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
	Comment/ Obs		LICENSE NEEDS TO BE DISPLAYED AT TIME OF INSPECTION.	<input type="checkbox"/>	<input type="checkbox"/>
1	3717-1-02.4(C)(11)	C	Person in charge: duties - ensure employees are properly sanitizing equipment and utensils. OBSERVED PIC WAS NOT ENSURING OTHER EMPLOYEES ARE USING SOILED RINSE BAY OF THE 3-COMPARTMENT SINK. FOOD DEBRIS WAS FOUND IN THE SANITIZING SOLUTION FROM SPRAYING SOILED FOOD STORAGE CONTAINERS IN THE RINSE BAY. RINSE BAY SHOULD BE CLEANED AND SANITIZED AFTER USING RINSE BAY TO REMOVE FOOD BEFORE WASHING.	<input type="checkbox"/>	<input type="checkbox"/>
5	3717-1-02.4(C)(17)	NC	Management and personnel: supervision. OBSERVED NO VOMIT KIT AT TIME OF INSPECTION.	<input type="checkbox"/>	<input type="checkbox"/>
10	3717-1-05.1(O)	C	Using a handwashing sink - operation and maintenance. OBSERVED PITCHER USED FOR FOOD OPERATION WAS SITTING IN THE EDGE OF THE HANDWASHING SINK. PITCHER WAS MOVED AT TIME OF INSPECTION.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15	3717-1-03.2(C)	C	Packaged and unpackaged food - preventing contamination by separation, packaging, and segregation. OBSERVED BOX OF FRENCH TOAST STICKS WERE OPEN AND EXPOSED IN WALK-IN FREEZER. PIC SECURED ITEMS AT TIME OF INSPECTION.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16	3717-1-04.5(A)(1)	C	Cleanliness of equipment food-contact surfaces and utensils.	<input type="checkbox"/>	<input type="checkbox"/>

Person in Charge	Date 12/02/2022
Sanitarian ELIZABETH TEAFORD RS/SIT# EHSIT22-4939	Licensors: Meigs County Health Department

PRIORITY LEVEL: C=CRITICAL NC = NON-CRITICAL

As per HEA 5302B The Baldwin Group, Inc. (11/19)

As per AGR 1268 The Baldwin Group, Inc. (11/19)

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

Name of Facility WENDY'S-41-006		Type of Inspection sta ccp var	Date 12/02/2022		
Observations and Corrective Actions (continued)					
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
			<p>OBSERVED MULTIPLE 'CLEAN' FOOD STORAGE PANS AND SPATULAS STORED WITH FOOD DEBRIS STILL LEFT ON THEM.</p> <p>OBSERVED 'CLEAN' TOMATO SLICER WITH FOOD DEBRIS BUILD-UP ON THE BOTTOM. PIC PLACED ALL SOILED UTENSILS AND EQUIPMENT TO SIDE WITH OTHER DIRTY DISHES TO BE WASHED AT TIME OF INSPECTION.</p> <p>OBSERVED POP DISPENSER NOZZLES WITH MOLD-LIKE SUBSTANCE AND SYRUP BUILD-UP. NEED TO BE CLEANED AND SANITIZED EVERY NIGHT.</p> <p>OBSERVED MOLD-LIKE SUBSTANCE IN CORNER OF ICE MAKER. NEEDS TO BE BETTER CLEANED.</p>		
21	3717-1-03.4(F)(1)(a)	C	<p>Time/temperature controlled for safety food - hot holding.</p> <p>OBSERVED NACHO CHEESE BEING HOT HOLDING AT 120F. NEEDS TO BE HELD AT 135F OR ABOVE. PIC DISCARDED THE NACHO CHEESE BECAUSE THEY WERE UNSURE HOW LONG IT HAD BEEN BELOW 135F.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22	3717-1-03.4(F)(1)(b)	C	<p>Time/temperature controlled for safety food - cold holding.</p> <p>OBSERVED SALADS BEING COLD HELD AT 48.3F IN COOLER BY DRIVE-THRU WINDOW. PIC PUT THE SALADS BACK IN THE WALK-IN COOLER UNTIL COOLER WAS TURNED DOWN TO 41F OR BELOW.</p> <p>OBSERVED SOUR CREAM PACKETS BEING COLD HELD AT 49.8F AND 49.3F. PIC DISCARDED THE PACKETS AND GOT LIDS TO COVER ALL ITEMS TO ENSURE ITEMS WERE STAYING COOL.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24	3717-1-03.4(I)(3)	C	<p>Time as a public health control - six hour time limit</p> <p>OBSERVED CHEESE ON PREP TABLE THAT DID NOT HAVE A TIME STAMP WITH DISCARD TIME. PIC ADDED TIME STAMP AT TIME OF INSPECTION.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
28	3717-1-07.1(P)	NC	<p>Personal care items - storage.</p> <p>OBSERVED PERSONAL ITEMS BEING STORED ON SHELF NEXT TO PACKAGES OF DRINK CUPS.</p>	<input type="checkbox"/>	<input type="checkbox"/>
31	3717-1-08.1(C)	C	<p>Heat treatment dispensing freezers: maintenance.</p> <p>OBSERVED THAT PIC WAS NOT DISCARDING ICE CREAM MIXTURES EVERY 14 DAYS. PIC STATED THEY CLEAN THE ICE CREAM MACHINE EVERY 14 DAYS BUT MIXTURE WAS NOT DISCARDED AT THE 14 DAY MARK.</p> <p>3717-1-08.1.C: The operator of a food service operation or retail food establishment using a heat treatment dispensing freezer shall do all of the following: 3717-1-08.1.C.1: Disassemble, clean, and sanitize the heat treatment dispensing freezer at least every fourteen days, except for those parts specified by the manufacturer such as hopper covers, design caps, door spouts, and bottoms of draw valves that shall be cleaned and sanitized daily,... ...3717-1-08.1.C.4: Discard all product remaining in the freezer whenever the heat treatment dispensing freezer is disassembled for cleaning...</p>	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-VI.0015		<p>TCS Food: TCS foods were not being held at the proper temperature.</p> <p>OBSERVED NACHO CHEESE HOT HOLDING BELOW 135F AND SOUR CREAM PACKETS AND SALADS COLD HOLDING ABOVE 41F. TCS FOODS BEING HOT AND COLD HELD NEED TO BE FREQUENTLY CHECKED FOR TEMPERATURES TO ENSURE THEY ARE BEING HELD WITHIN THE APPROPRIATE</p>	<input type="checkbox"/>	<input type="checkbox"/>

Person in Charge		Date 12/02/2022
Sanitarian ELIZABETH TEAFORD	RS/SIT# EHSIT22-4939	Licensor: Meigs County Health Department

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As per HEA 5351 The Baldwin Group, Inc. (11/19)

As per AGR 1268 The Baldwin Group, Inc. (11/19)

State of Ohio Continuation Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility WENDY'S-41-006			Type of Inspection sta ccp var	Date 12/02/2022	
Observations and Corrective Actions (continued)					
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
			TEMPERATURE RANGES: 135F AND ABOVE FOR HOT HOLDING AND 41F AND BELOW FOR COLD HOLDING. BACTERIA WILL RAPIDLY MULTIPLY ON TCS FOODS WHEN HELD ABOVE 41F AND BELOW 135F, INCREASING THE RISK OF A FOODBORNE ILLNESS.		
35	CCP-VI.0018		TCS Food: Observed hot foods being held at 135 F or above; cold foods being held at 41 F or below. OBSERVED FOODS BEING STORED AT THE FOLLOWING TEMPERATURES... HOT HOLDING: COOKING CHILI 190F, CHILI IN FRONT 165F, FRENCH FRIES 140.3F, CHICKEN PATTY 152F, BAKED POTATO 185F COLD HOLDING: HALF & HALF 41.8F, PEPPERMINT ICE CREAM MIXTURE 37F, SLICED TOMATOES 41.3F, RAW HAMBURGER (TOP) 41.6F, (BOTTOM) 38.8F	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-III.0008		Preventing Contamination by Hands: The hand washing sink(s) were not accessible for convenient use by employees. PITCHER USED FOR FOOD SERVICE/PREPERATION WAS ON HANDWASHING SINK AND BLOCKING IT FROM BEING USED. HANDWASHING SINKS SHOULD ALWAYS BE ACCESSIBLE FOR EMPLOYEES TO USE TO ENSURE THEIR HANDS ARE PROPERLY WASHED WHILE HANDLING FOOD.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35	CCP-VII.0001		Protection from Contamination: Observed food that was not properly protected from contamination by separation, packaging, and segregation. OBSERVED FRENCH TOAST STICKS NOT PROPERLY PROTECTED FROM PREMISES. ALL FOOD NEEDS TO BE COVERED WHEN STORED TO PREVENT CONTAMINATION TO FOOD ITEMS.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-VII.0002		Protection from Contamination: Equipment food-contact surfaces or utensils are dirty. OBSERVED MULTIPLE PIECES OF EQUIPMENT AND UTENSILS WITH FOOD CONTACT SURFACES THAT WERE SOILED STORED WITH CLEAN ITEMS. ALL FOOD CONTACT SURFACES SHOULD BE CLEAN TO THE SIGHT AND TOUCH.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-IV.0002		Demonstration of Knowledge: The person in charge was unable to demonstrate proper knowledge of food safety and prevention. PIC WAS NOT KNOWLEDGABLE ABOUT WHEN TO CLEAN AND SANITIZE THE 3-COMPARTMENT SINK BETWEEN DIFFERENT USES. SINK BAYS SHOULD BE WASHED AND SANITIZED BEFORE USE AND THROUGHOUT THE DAT AT A FREQUENCY NECESSARY TO PREVENT RECONTAMINATION OF EQUIPMENT AND UTENSILS. RINSE BAY HAD SOILED CONTAINERS THAT WERE BEING PRE-RINSED BEFORE PUTTING THROUGH WASH CYCLE, BUT FOOD DEBRIS WERE SPRAYED INTO SANITIZING SOLUTION THAT WAS NOT BEING CHANGED DUE TO FLOATING DEBRIS.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-VI.0002		TCS Food: Observed improper use of time as a public health control for up to four hours. OBSERVED 2 CONTAINERS OF CHEESE WITHOUT TIME STAMP TO INDICATE WHEN TO DISCARD OF THE CHEESE AFTER THE ALLOWANCE TIME. IF USING TIME AS A PUBLIC HEALTH CONTROL INSTEAD OF TEMPERATURE, ITEMS NEED TO HAVE A TIME STAMP.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
46	3717-1-03.2(Q)	NC	Food storage - preventing contamination from the premises. OBSERVED SWEETNER BEING STORED DIRECTLY ON FLOOR BY TRASH. PIC DISCARDED OF THE TRASH AT THE TIME OF INSPECTION AND PUT THE SWEETNER ON SHELF.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
48	3717-1-04(F)	NC	Sponges - use limitation. 3717-1-04.0.F: Sponges - use limitation. Sponges may not be used in contact with cleaned and sanitized or	<input type="checkbox"/>	<input type="checkbox"/>
Person in Charge				Date 12/02/2022	
Sanitarian ELIZABETH TEAFORD RS/SIT# EHSIT22-4939			Licensor: Meigs County Health Department		

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As per HEA 5351 The Baldwin Group, Inc. (11/19)

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Item No.	Code Section	Priority Level	Comment	COS	R
			in-use food-contact surfaces. OBSERVED WET SPONGE STORED ON TOP OF CUTTING BOARD BEING STORED IN CLEAN STORAGE.		
52	3717-1-04.8(E)(1)	NC	Single-service and single-use articles - storage OBSERVED DRINK CARRIERS STORED DIRECTLY ON THE FLOOR OF THE BACK DRY STORAGE AREA. OBSERVED CHILI CONTAINERS BEING STORED ON FLOOR BY FIRST DRIVE-THRU WINDOW.	<input type="checkbox"/>	<input type="checkbox"/>
54	3717-1-04.1(C)	C	Food-contact surfaces - cleanability OBSERVED A TREND OF MULTIPLE BROKEN/CHIPPED/PITTED UTENSILS, STORAGE CONTANERS AND CUTTING BOARDS WITH HEAVING SCORING THROUGHOUT THE FACILITY AT TIME OF INSPECTION. PIC DISCARDED OF ALL ITEMS THAT WERE POINTED OUT AT TIME OF INSPECTION.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
54	3717-1-04.4(B)	NC	Cutting surfaces. OBSERVED DEBRIS ON CUTTING BOARD IN CLEAN STORAGE. PIC PUT CUTTING BOARD WITH DIRTY DISHES TO BE WASHED AT TIME OF INSPECTION. OBSERVED CUTTING BOARD THAT IS HOLDING FOOD DEBRIS DUE TO HEAVING SCORING. PIC DISCARDED THE CUTTING BOARD AT TIME OF INSPECTION.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
54	3717-1-04.4(A)(2)	NC	Equipment components kept intact, tight, and adjusted OBSERVED DAMAGED GASKETS ON FREEZER IN KITCHEN AREA.	<input type="checkbox"/>	<input type="checkbox"/>
54	3717-1-04.1(H)	NC	Nonfood-contact surfaces - cleanability OBSERVED TAPE COVERING BROKEN CUP HOLDERS BY DRIVE-THRU WINDOW. TAPE IS NOT CLEANABLE AND SHOULD NOT BE ON SURFACES IN A FOOD OPERATION.	<input type="checkbox"/>	<input type="checkbox"/>
55	3717-1-04.4(D)	NC	Warewashing equipment - cleaning frequency. OBSERVED FOOD DEBRIS IN SANITIZING SOLUTION. SINKS NEED TO BE CLEANED THROUGHOUT THE DAY AT A FREQUENCY THAT PREVENTS RECONTAMINATION OF CLEAN UTENSILS AND EQUIPMENT.	<input type="checkbox"/>	<input type="checkbox"/>
56	3717-1-04.5(A)(2)	NC	Cleanliness of food-contact surfaces of cooking equipment and pans. OBSERVED STICKER RESIDUE LEFT OF SIDE OF CLEAN FOOD STORAGE CONTAINER.	<input type="checkbox"/>	<input type="checkbox"/>
56	3717-1-04.5(D)	NC	Nonfood-contact surfaces - cleaning frequency. OBSERVED BUILD-UP ON SPRAY NOZZLE OF PREP SINK WHERE VEGGIES WAS WASHED. OBSERVED BUILD-UP OF DUST ON FAN IN WALK-IN FREEZER. OBSERVED BUILD-UP OF FOOD DEBRIS IN BOTTOM OF FREEZER IN KITCHEN AREA. OBSERVED DEBRIS BUILD-UP UNDER COOLER IN LINE 2.	<input type="checkbox"/>	<input type="checkbox"/>
58	3717-1-05.1(S)	NC	Plumbing system - maintained in good repair. OBSERVED WATER LEAK FROM SOAP AND SANITIZER DISPENSER ABOVE THE 3-COMPARTMENT SINK. OBSERVED WATER LEAK FROM PREP SINK	<input type="checkbox"/>	<input type="checkbox"/>
58	3717-1-05.1(P)	C	Plumbing system - Prohibiting a cross connection	<input type="checkbox"/>	<input type="checkbox"/>

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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
			OBSERVED DISPENSER LINE HANGING DOWN INTO UTILITY SINK. HOSE NEEDS TO BE SHORTENED TO ENSURE THERE IS NO CROSS CONNECTION OF CLEAN WATER AND WASTE WATER.		
60	3717-1-06.4(H)	NC	Cleaning of Plumbing Fixtures	<input type="checkbox"/>	<input type="checkbox"/>
			OBSERVED HANDWASHING SINK IN MEN'S ROOM WITH DEBRIS BUILD-UP.		
61	3717-1-05.4(F)(1)	NC	Outside receptacles - tight fitting lids	<input type="checkbox"/>	<input type="checkbox"/>
			OBSERVED THE DUMPSTER HAD BROKEN LIDS THAT WERE NOT TIGHT FITTING ON THE RECEPTACLE.		
62	3717-1-06.4(B)	NC	Cleaning - frequency and restrictions.	<input type="checkbox"/>	<input type="checkbox"/>
			OBSERVED DEBRIS BUILD-UP UNDER STORAGE RACKS THROUGHOUT FACILITY. FLOOR NEEDS CLEANED UNDER SHELVING AND WHEELED EQUIPMENT.		
62	3717-1-06.4(F)	NC	Drying mops.	<input type="checkbox"/>	<input type="checkbox"/>
			OBSERVED MOPS THAT HAD NOT BEEN WRUNG OUT BEING STORED ON FLOOR BY UTILITY SINK LEAVING WATER ON THE FACILITY FLOOR.		

Person in Charge 		Date 12/02/2022
Sanitarian ELIZABETH TEAFORD	RS/SIT# EHSIT22-4939	Licensors: Meigs County Health Department

PRIORITY LEVEL: C=CRITICAL NC = NON-CRITICAL
 As per HEA 5351 The Baldwin Group, Inc. (11/19)
 As per AGR 1268 The Baldwin Group, Inc. (11/19)