

# State of Ohio Food Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility FAN'S PIZZA LLC	Check one <input type="radio"/> FSO <input checked="" type="radio"/> RFE	License Number 55	Date 09/25/2019
Address 112 N. WESTMINSTER ST.	City/Zip Code WAYNESFIELD 45896		
License holder NELDA TREGLIA	Inspection Time 80	Travel Time 20	Category/Descriptive COMMERCIAL CLASS 3 <25,000 SQ. FT.
Type of inspection (check all that apply) <input checked="" type="radio"/> Standard <input type="radio"/> Critical Control Point (FSO) <input type="radio"/> Process Review (RFE) <input type="radio"/> Variance Review <input type="radio"/> Follow Up <input type="radio"/> Foodborne <input type="radio"/> 30 Day <input type="radio"/> Complaint <input type="radio"/> Pre-licensing <input type="radio"/> 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		Compliance Status	
<b>Supervision</b>		<b>Time/Temperature Controlled for Safety Food (TCS food)</b>	
1	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	23	<input type="radio"/> IN <input checked="" type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O Proper date marking and disposition
2	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	24	<input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O Time as a public health control: procedures & records
<b>Employee Health</b>		<b>Consumer Advisory</b>	
3	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	25	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A Consumer advisory provided for raw or undercooked foods
4	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	<b>Highly Susceptible Populations</b>	
5	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	26	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A Pasteurized foods used; prohibited foods not offered
<b>Good Hygienic Practices</b>		<b>Chemical</b>	
6	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/O	27	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A Food additives: approved and properly used
7	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O	28	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A Toxic substances properly identified, stored, used
<b>Preventing Contamination by Hands</b>		<b>Conformance with Approved Procedures</b>	
8	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/O	29	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A Compliance with Reduced Oxygen Packaging, other specialized processes, and HACCP plan
9	<input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	30	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O Special Requirements: Fresh Juice Production
10	<input type="radio"/> IN <input checked="" type="radio"/> OUT <input type="radio"/> N/A	31	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O Special Requirements: Heat Treatment Dispensing Freezers
<b>Approved Source</b>		32	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O Special Requirements: Custom Processing
11	<input checked="" type="radio"/> IN <input type="radio"/> OUT	33	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O Special Requirements: Bulk Water Machine Criteria
12	<input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	34	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O Special Requirements: Acidified White Rice Preparation Criteria
13	<input checked="" type="radio"/> IN <input type="radio"/> OUT	35	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A Critical Control Point Inspection
14	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O	36	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A Process Review
<b>Protection from Contamination</b>		37	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A Variance
15	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	<p><b>Risk Factors</b> are food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness.</p> <p><b>Public health interventions</b> are control measures to prevent foodborne illness or injury.</p>	
16	<input type="radio"/> IN <input checked="" type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
17	<input checked="" type="radio"/> IN <input type="radio"/> OUT		
<b>Time/Temperature Controlled for Safety Food (TCS food)</b>			
18	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O		
19	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O		
20	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O		
21	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O		
22	<input type="radio"/> IN <input checked="" type="radio"/> OUT <input type="radio"/> N/A		

# State of Ohio Food Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

<b>Name of Facility</b> FAN'S PIZZA LLC	<b>Type of Inspection</b> sta	<b>Date</b> 09/25/2019
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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 checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Pasteurized eggs used where required		
39	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Water and ice from approved source	54 <input type="radio"/> IN <input checked="" type="radio"/> OUT Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	
Food Temperature Control		Physical Facilities		
40	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O	Proper cooling methods used; adequate equipment for temperature control	55 <input type="radio"/> IN <input checked="" type="radio"/> OUT <input type="radio"/> N/A Warewashing facilities: installed, maintained, used; test strips	
41	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O	Plant food properly cooked for hot holding	56 <input type="radio"/> IN <input checked="" type="radio"/> OUT Nonfood-contact surfaces clean	
42	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O	Approved thawing methods used	57 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A Hot and cold water available; adequate pressure	
43	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Thermometers provided and accurate	58 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A Plumbing installed; proper backflow devices	
Food Identification		Administrative		
44	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Food properly labeled; original container	59 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A Sewage and waste water properly disposed	
Prevention of Food Contamination		60 <input type="radio"/> IN <input checked="" type="radio"/> OUT <input type="radio"/> N/A Toilet facilities: properly constructed, supplied, cleaned	61 <input type="radio"/> IN <input checked="" type="radio"/> OUT <input type="radio"/> N/A Garbage/refuse properly disposed; facilities maintained	
45	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Insects, rodents, and animals not present/outer openings protected	62 <input type="radio"/> IN <input checked="" type="radio"/> OUT Physical facilities installed, maintained, and clean	
46	<input type="radio"/> IN <input checked="" type="radio"/> OUT	Contamination prevented during food preparation, storage & display	63 <input type="radio"/> IN <input checked="" type="radio"/> OUT Adequate ventilation and lighting; designated areas used	
47	<input checked="" type="radio"/> IN <input type="radio"/> OUT	Personal cleanliness	64 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A Existing Equipment and Facilities	
48	<input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	Wiping cloths: properly used and stored	Administrative	
49	<input type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input checked="" type="radio"/> N/O	Washing fruits and vegetables	65 <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A 901:3-4 OAC	66 <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A 3701-21 OAC
Proper Use of Utensils		50 <input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A <input type="radio"/> N/O In-use utensils: properly stored		
51	<input checked="" type="radio"/> IN <input type="radio"/> OUT <input type="radio"/> N/A	Utensils, equipment and linens: properly stored, dried, handled		
52	<input type="radio"/> IN <input checked="" type="radio"/> OUT <input type="radio"/> N/A	Single-use/single-service articles: properly stored, used		
53	<input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A <input type="radio"/> N/O	Slash-resistant and cloth 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
10	3717-1-05.1(C)(1)	NC	Handwashing sink - required water temperature  Hot water at the handwash sink in the kitchen and both restrooms were not reaching the required minimum 100 degree F temperature.	<input type="radio"/>	<input type="radio"/>
16	3717-1-04.5(A)(1)	C	Cleanliness of equipment food-contact surfaces and utensils.  Observed buildup on the can opener blade.	<input type="radio"/>	<input type="radio"/>
22	3717-1-03.4(F)(1)(b)	C	Time/temperature controlled for safety food - cold holding.  Observed ready to eat pizza sausage and ham dices in the pizza prep table at 48 degrees. At the time the observation was made the lid to the prep table was open and the containers were overfilled with product.	<input type="radio"/>	<input type="radio"/>
23	3717-1-03.4(G)	C	Ready-to-eat, time/temperature controlled for safety food - date marking.  Observed the following items in the walk-in cool without date marks. three bags of cut lettuce, two packages of ham slices, pizza sausage, ham dices and a container of sweet baby rays garlic/parmesan sauce. The following undated items were found in the food prep table next to the three compartment sink. two bags of taco meat, dried tomatoes and boiled eggs. THE EMPLOYEE WAS ABLE TO IDENTIFY THE DATES MOST ITEMS HAD BEEN OPENED AND PROPERLY MARKED THOSE PRODUCTS AND DISCARDED THE ITEMS THE DATE WAS UNKNOWN.	<input type="radio"/>	<input checked="" type="radio"/>
44	3717-1-03.2(D)	NC	Food Storage Containers - Identified with Common Name of Food  Individual cups of salsa, sour cream in the pizza prep table were not identified with the common name of the food. When removed from the original container the common name of the food must be placed on the individual containers or on the outside of the container the individual items are stored in.	<input type="radio"/>	<input type="radio"/>
46	3717-1-03.2(Q)	NC	Food storage - preventing contamination from the premises.  Observed beverages in cardboard packaging being stored on the floor in the walk-in cooler. Second notice.	<input type="radio"/>	<input type="radio"/>

<b>Person in Charge</b> AARON LONGSWORTH      RS/SIT#	<b>Date</b> 09/25/2019
<b>Sanitarian</b> AARON LONGSWORTH      RS/SIT#	<b>Licensors:</b> Auglaize County Health Department

PRIORITY LEVEL:    C= CRITICAL    NC = NON-CRITICAL

As per HEA 5302B The Baldwin Group, Inc. (7/18)

As per AGR 1268 The Baldwin Group, Inc. (7/18)

# State of Ohio Continuation Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility FAN'S PIZZA LLC		Type of Inspection sta	Date 09/25/2019		
<b>Observations and Corrective Actions (continued)</b>					
Mark "X" in appropriate box for COS and R: <b>COS</b> = corrected on-site during inspection <b>R</b> = repeat violation					
Item No.	Code Section	Priority Level	Comment	COS	R
52	3717-1-04.4(S)	NC	Single-service articles and single-use articles - use limitation.  Reusing bottom cardboard of beverage packages to store items such as individual containers of sauces in the pizza prep cooler. Cardboard is a single use item and cannot be used for this purpose. Recommended the use of plastic containers.	<input type="radio"/>	<input type="radio"/>
54	3717-1-04.1(GG)	NC	Equipment compartments - drainage.  Observed a water leak from the ceiling in the walk-in cooler. Possibly from plugged drain line for the condenser.	<input type="radio"/>	<input type="radio"/>
54	3717-1-04.1(KK)	NC	Food equipment - certification and classification.  Homestyle freezer being used in the kitchen. All equipment must be of commercial type and approved by a recognized certification agency such as the National Sanitation Foundation (NSF).	<input type="radio"/>	<input type="radio"/>
55	3717-1-04.4(I)	C	Manual warewashing equipment - wash solution temperature.  Hot water is not reaching the minimum 110 degree F requirement.	<input type="radio"/>	<input type="radio"/>
56	3717-1-04.5(D)	NC	Nonfood-contact surfaces - cleaning frequency.  Buildup inside the freezer in the drive-through area, on the walk-in-cooler condenser unit, walk-in ceiling, kitchen area floor, cabinets and the ceiling tiles.	<input type="radio"/>	<input checked="" type="radio"/>
60	3717-1-05.4(H)	NC	Toilet room receptacle - covered.  Uncovered receptacle in the men's restroom.	<input type="radio"/>	<input type="radio"/>
61	3717-1-05.4(N)	NC	Covering receptacles.  Dumpster lid open.	<input type="radio"/>	<input checked="" type="radio"/>
62	3717-1-06(A)(1)	NC	Indoor areas - surface characteristics  Wall behind three compartment sink is starting to Deteriorate and no longer non-absorbent.	<input type="radio"/>	<input type="radio"/>
63	3717-1-04.2(D)	NC	Ventilation hood systems - adequacy.  Ventilation above the conveyor oven is not adequate causing grease buildup on the ceiling and walls in the kitchen area.	<input type="radio"/>	<input type="radio"/>

Person in Charge		Date 09/25/2019
Sanitarian AARON LONGSWORTH	RS/SIT#	Licensor: Auglaize County Health Department

PRIORITY LEVEL: C= CRITICAL NC = NON-CRITICAL

As per HEA 5351 The Baldwin Group, Inc. (7/18)

As per AGR 1268 The Baldwin Group, Inc. (7/18)