

# Food Establishment Inspection Report

Local Health Department Name and Address Woodford County Health Department 1831 S. Main Street, Eureka, IL 61530		No. of Risk Factor/Intervention Violations	3	Date	11/06/2018
		No. of Repeat Risk Factor/Intervention Violations	0	Time In	12:15 PM
Establishment	License/Permit #	Permit Holder	Risk Category		
Main Street Mercantile	18 112	ADZ Enterprises LLC	II		
Street Address		Purpose of Inspection			
114 Main Street		Routine Inspection			
City/State	ZIP Code				
Congerville, IL	61729				

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle 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  
 Mark "X" in appropriate box for COS and/or R  
**COS**=corrected on-site during inspection    **R**=repeat violation

**Risk factors** 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.

Compliance Status		COS	R	Compliance Status		COS	R
<b>Supervision</b>				<b>Protection from Contamination</b>			
1	In	Person in charge present, demonstrates knowledge, and performs duties		15	In	Food separated and protected	
2	In	Certified Food Protection Manager (CFPM)		16	In	Food-contact surfaces; cleaned and sanitized	
<b>Employee Health</b>				<b>Time/Temperature Control for Safety</b>			
3	Out	Management, food employee and conditional employee; knowledge, responsibilities and reporting	X	17	In	Proper disposition of returned, previously served, reconditioned and unsafe food	
4	In	Proper use of restriction and exclusion		18	In	Proper cooking time and temperatures	
5	Out	Procedures for responding to vomiting and diarrheal events	X	19	N/O	Proper reheating procedures for hot holding	
<b>Good Hygienic Practices</b>				20	N/O	Proper cooling time and temperature	
6	In	Proper eating, tasting, drinking, or tobacco use		21	In	Proper hot holding temperatures	
7	In	No discharge from eyes, nose, and mouth		22	In	Proper cold holding temperatures	
<b>Preventing Contamination by Hands</b>				23	In	Proper date marking and disposition	
8	In	Hands clean and properly washed		24	N/A	Time as a Public Health Control; procedures & records	
9	In	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		<b>Consumer Advisory</b>			
10	Out	Adequate handwashing sinks properly supplied and accessible	X	25	N/A	Consumer advisory provided for raw/undercooked food	
<b>Approved Source</b>				<b>Highly Susceptible Populations</b>			
11	In	Food obtained from approved source		26	N/A	Pasteurized foods used; prohibited foods not offered	
12	N/O	Food received at proper temperature		<b>Food/Color Additives and Toxic Substances</b>			
13	In	Food in good condition, safe, and unadulterated		27	In	Food additives: approved and properly used	
14	N/A	Required records available: shellstock tags, parasite destruction		28	In	Toxic substances properly identified, stored, and used	
				<b>Conformance with Approved Procedures</b>			
				29	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 not in compliance    Mark "X" in appropriate box for COS and/or R    **COS**=corrected on-site during inspection    **R**=repeat violation

Compliance Status		COS	R	Compliance Status		COS	R
<b>Safe Food and Water</b>				<b>Proper Use of Utensils</b>			
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	
<b>Food Temperature Control</b>				46		Gloves used properly	
33		Proper cooling methods used; adequate equipment for temperature control		<b>Utensils, Equipment and Vending</b>			
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	
<b>Food Identification</b>				<b>Physical Facilities</b>			
37	X	Food properly labeled; original container		50		Hot and cold water available; adequate pressure	
<b>Prevention of Food Contamination</b>				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	
				<b>Employee Training</b>			
				57		All food employees have food handler training	
				58		Allergen training as required	

# Food Establishment Inspection Report

Establishment: Main Street Mercantile

Establishment #: 18 112

Water Supply:  Public  Private

Waste Water System:  Public  Private

Sanitizer Type: Quaternary ammonium

PPM: 200

Heat: N/A

### TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Sloppy Joe/plate	168	Shredded cheese/pizza prep	41	Crema cheese frosting/WIC	35
Chili/stove	178	Sausage crumbles/pizza prep	38	Milk/WIC	34
Fried chicken/plate	172	Sliced ham/pizza prep	39	Sour cream/WIC	36
Cheeseburger/plate	168	Pulled pork/RIC food prep	41	Cut mixed greens/RIC food prep	40
		Peeled hard-boiled eggs/RIC prep	39	Vanilla ice milk/soft serve unit	34
		Chicken salad/RIC food prep	40		
		Cut lettuce/RIC food prep	39		
		Roast beef/RIC food prep	40		
		Sliced tomatoes/RIC food prep	41		

### OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
3	2-102.11 (Pf) Observed person-in-charge PIC did not demonstrate knowledge of responsibilities for preventing the transmission of foodborne disease and exclusion or restriction of food employees. Employee health Food Code requirements and sample employee health template (Form 1-B) discussed with person-in-charge during inspection.
5	2-501.11 (Pf) Observed food establishment does not have procedures for food employees to follow when responding to discharging of vomitus or fecal matter. Procedures for responding to vomit/diarrheal event provided during inspection.
10	6-301.14 (C) Observed sign or poster that notifies food employees to wash their hands is not provided at all handwashing sinks used by food employees in kitchen and restrooms. Hand washing signs provided during inspection.
37	3-602.11 (C) Observed by cashier pre-packaged in advance of retail sale bags of assorted candy items without name and address of packager noted on bags. Pre-packaged in advance of retail sale items must be labeled with: 1) common name of food, 2) ingredients, 3) net quantities, 4) name and address of packager, and 5) food allergens. Please correct this violation within 90 days or at least by next routine inspection.
37	3-302.12 (C) Observed in kitchen on shelf above center food prep table shake-style container of dry food substance without name identifying contents on container. Dry food substance was seasoning, according to male person-in-charge.

CFPM Verification (name, expiration date, ID#): David Zobrist

David Zobrist 21197707 - NRFSP Exp. 2/2021	Janel Wettstein 21197710 - NRFSP Exp. 2/2021	Miriam Rocke 01646753 - IL FSSMC Exp. 6/2019
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HACCP Topic: TCS food cooking temperatures, employee health requirements

David Zobrist  
 Person in Charge (Signature)

Nov 6, 2018  
 Date

Paul Wilber Wain (EL)  
 Inspector (Signature)

Follow-up:  Yes  No (Check one)

Follow-up Date: \_\_\_\_\_

