## **Food Establishment Inspection Report**

													Pa	ge 1	of
Local Health Department Name and Address						No	o, of R	isk	Factor/Intervention	n Violations	0	Date	06/2	0/201	9
Woodford County Health Department   1831 S. Main Street, Eureka, IL 61530						-		of Risk Factor/Intervention Violations			U	Time In	10:	25 AN	
Establishment License/Perm			ie #		No	of Repeat Rick Easter/Intervention Violations				35 AN					
Canteen Vending Machines License/Permit #			III W		Pe	Permit Holder Risk Category					22 /114	_			
Street Address					Compass Group North America										
600	E. Peoria Street - C	NH Goodfield				Pu	rpose	of	Inspection						_
City	City/State ZIP Code					Routine Inspection									
Goo	dfield, IL		6174	12		I KO	uune	IIIS	spection						
	***************************************	FOODBORNE I	LLNESS RIS	K FACT	OR	S A	ND	PL	JBLIC HEALTH	INTERVENT	IONS				
	Circle designat	ted compliance status (IN, OUT, N	<del>"</del>												
1	N≃in compliance		D=not observed					2	Risk factors are	e important prac	tices or proce	edures identif	ied as t	he m	st
		Mark "X" in appropriate box f	-							ributing factors o re control measi					
<u> </u>		corrected on-site during inspecti	on R≔repeat	violation			<del>,</del>		"itel vertions a	re control meast	nes to prever	it toodbottle	mness c	JI HIJU	ıy.
Com	pliance Status				cos	R	C	om	pliance Status					cos	R
		Supervision	94-14-24		٠					Protection fro	m Contamina	ition			
1	ln	Person in charge present, demonstra performs duties	ates knowledge, a	nd			15		N/A	Food separated a	nd protected	·			
2	N/A	Certified Food Protection Manager (	CEPM)		_		16	1	N/A	Food-contact suri					
<del></del>		Employee Health	,				17	/	ln	Proper disposition reconditioned and		reviously serve	d,		
LT		Management, food employee and co	onditional emolov	ree:	_		┧┢	1.	т	ime/Temperatu		r Safatu		<u> </u>	<u>L</u>
3	In	knowledge, responsibilities and repo	orting				18	3	N/A	Proper cooking ti	<del></del>	inde .	· · · · ·	<del></del>	<u> </u>
4	ln	Proper use of restriction and exclusi-	on				19		N/A	Proper reheating	· · · · · · · ·			├-	-
.5	łn	Procedures for responding to vomiti	ng and diarrheal o	events			20	-	N/A	Proper cooling tin				<del> </del>	-
<u> </u>		Good Hygienic Practices	5	T-100-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-			21	-	N/A	Proper hot holdin	· · · · · · · · · · · · · · · · · · ·				H
6	N/O	Proper eating, tasting, drinking, or to	obacco use				22		ln	Proper cold holdi	<del> </del>	····		<del> </del>	-
7	ln .	No discharge from eyes, nose, and n	- trius	i	]		23	1	ln	Proper date mark	<del></del>			1	
		Preventing Contamination by	Hands				24	十	N/A	Time as a Public H			ecords	<del> </del>	┢
8	N/O	Hands clean and properly washed			_				<del></del>		er Advisory			1	
9	N/A	No bare hand contact with RTE food alternative procedure properly allow		d			25	П	N/A	Consumer advisor		raw/undercook	ed food	Γ	Г
10	ln	Adequate handwashing sinks proper		rossible	$\dashv$		1 🗀	*		Highly Suscep	ible Populat	ions		<del>!</del>	
		Approved Source	ry supplied und be	cc33ible			26	T	În	Pasteurized foods	used; prohibiti	ed foods not off	ered		
11	łn	Food obtained from approved source			$\neg$	-			Food	d/Color Additive	s and Toxic S	ubstances			
12	N/O	Food received at proper temperature					27		N/A	Food additives: an	proved and pri	operly used		1	
13	ln	Food in good condition, safe, and un			$\dashv$		28		ln	Toxic substances	roperly identif	ied, stored, and	used		
14	N/A	Required records available: shellstoo			$\dashv$				Cor	nformance with	Approved Pro	ocedures			
	1075	destruction			_		29		N/A	Compliance with v	ariance/specia	lized process/H	ACCP		L
	·			OOD R					and the second of the second o						
		Good Retail Practices are prevent	tative measures	to contro	l th	e ad	dition	of	pathogens, chemic	cals, and physica	objects into	foods.			
Ma	ark "X" in box if nur	nbered item is not in compliance	Mark "X" in		-	—	for CC	OS a	and/or R COS=c	corrected on-site	during inspe	ction R=re	epeat vi	olatic	n
		2.0 - 1 155		cos	R		<u> </u>		······································	····				cos	R
201	Ta	Safe Food and Water		<del></del>	<b></b>	4		-1		Proper Use	of Utensils				
30 31	· · · · · · · · · · · · · · · · · · ·	sed where required	<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>		╂	_	43	+	In-use utensils: proper						
32	Water and ice from				┼-	-	44	-	Utensils, equipment &						
32	variance obtained	for specialized processing methods  Food Temperature Control	<u> </u>	<u></u>		-	45	→	Single-use/single-servi	ice articles: proper	y stored and us	sed			
33	Proper engling met	hods used; adequate equipment for t	***********	en!	<del></del>	***	46		Gloves used properly	In a Plant		**			
34		cooked for hot holding	emperature contr	roi	╁	-	-	16		Jtensils, Equipm					
35	Approved thawing	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del> </del> -	╀	-	47		Food and non-food co and used	mact surraces clea	nabie, property	designed, cons	tructed,		
36	Thermometers pro	······································	111111111111111111111111111111111111111		╀	-	48	Ī	Warewashing facilities	: installed, maintai	ned, & used; te	st strips			
301	Themometers pro	Food Identification			1_	-	49	ľ	Non-food contact surfa	aces clean					
37	Food properly labe	led; original container		1	Т	-				Physical	acilities				
'L	Trood property labe	Prevention of Food Contamina	tion	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	-	50	Ŀ	Hot and cold water ava	ailable; adequate p	ressure				
38	Insects, rodents ar	id animals not present			Т	┨.	51.	F	Plumbing installed; pro	oper backflow devi	ces				
39		vented during food preparation, stora	ge and display		╁	- :	52	S	Sewage and waste wat	ter properly dispos	ed				
40	Personal cleanlines	<del></del>	a- and alphay		+-	-	53	1	Toilet facilities: proper	rly constructed, sup	plied, & cleane	d			
41	<del></del>	perly used and stored			+-	+	54	10	Garbage & refuse prop	perly disposed; faci	ities malntaine	d			
42	Washing fruits and			<del>                                     </del>	$\vdash$		55	F	hysical facilities instal	lled, maintained, a	nd clean				_
					-	┙,	56		Adequate ventilation a			d			
						Ì		_		Employee					<u> </u>
							57		All food employees have		ining				
							52	1 /	Margan training ac roc	autirad			i i	. !	

## **Food Establishment Inspection Report**

Establishr	nent: Canteen Vendin	g Machines		Establishma	P :nt #; 19 178	age 2 of						
	oply:   Public	-	ste Water System: 🛛 Public 🗍		19 1/8							
Sanitizer <sup>*</sup>	Type: Quaternary amr	nonium	PPM: 200		Heat: N/A							
			TEMPERATURE OBSERVA	TIONS								
	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp						
	Washington .		Deli bagel/Micromarket Ave C	40	Micromarket Avenue C/break rm	40						
			Breakfast burrito/vending pain	t 39	vending/paint line	39						
			Bean burrito/vending welding	38	vending/welding lunch deck	39						
			Chicken sandwich/fabrication	39	vending/fabrication lunch deck	35						
	- Company of the Comp	····	OBSERVATIONS AND CORRECTI	VE ACTION:	S							
Item Number	Violations cited in this report must be corrected within the time frames below.											
	No violations observed at time of inspection											
	The following TCS food vending machines were inspected: Micromarket Avenue C #1246 (break room), vending machine #72016											
	(paint line), vending machine #71092 (welding lunch deck), and vending machine #072028 (fabrication lunch deck).											
	Please note if any changes are planned in the future for this establishment (menu, equipment, location, etc.), please contact											
	WCHD prior to changes occurring to ensure compliance.											
	on quarterly newsletter											
WCHD provides free food safety in-services to establishments & their staff												
			ood Handler certification is required for all food employees who do not already have CFPM									
		l, food equipment or utensils, or food-	contact									
surfaces. Food handler certification is required 30 days from the hire date of food employees.												
		······································										
			entinentines	J	Mark							
			10-11-11-11-11-11-11-11-11-11-11-11-11-1	+								
	<del>, , , , , , , , , , , , , , , , , , , </del>	· · · · · · · · · · · · · · · · · · ·				<del> </del>						
CEDN4 Vor	ification /name avair	tion dota ID41	- D( DII									
CITEINI VEI	lfication (name, expira	ation date, ib#)	: brad Powell									
						777788						
HACCP To	pic: TCS food cold-hol	ding temperatu	re requirements									
30	P_00		Jun 20, 2019									
Person in Cha	rge (Signature)		Date									
	Paul William W	quo (EL)	Follow-up: 🔲 Yes 🔀	No (Check on	ie) Follow-up Date:							

## **Food Establishment Inspection Report**

Page 3 of 3

**Establishment: Canteen Vending Machines** Establishment #: 19 178

	OBSERVATIONS AND CORRECTIVE ACTIONS				
item Number	Violations cited in this report must be corrected within the time frames below.				
	Ensure compliance with Smoke-Free IL Act - public places and places of employment must be completely smoke-free inside and				
	within 15 feet from entrances, exits, windows that open and ventilation intakes; signage posted at entrances & exits;				
	no vaping or e-cigarette use in food & drink prep area, dishwashing area, and storage area; no smoking within building structure.				
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<del>, ,, </del>					
	C CC				
Person in Cha	Jun 20, 2019				
Person in Charge (Signature)  Date					
	Follow-up: Yes No (Check one) Follow-up Date:				
Inspector (Sig	nature)				