

Food Establishment Inspection Report –Town of Your Town, Health Department – 123-456-7890

Establishment:		Seating Y / N	Date:	Page 1 of ____
Address:			Time in:	Time out:
Telephone:	Permit No.:		Number of Violated Provisions Related to Foodborne Illness Risk Factors and Interventions (Items 1 through 29):	
Owner:	Email:			
Person-in-charge:			Number of Repeat Violations Related to Foodborne Illness Risk Factors and Interventions (Items 1 through 29):	
Inspector:				
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS				
IN = in compliance OUT= out of compliance N/A = not applicable N/O = not observed COS = corrected on-site during inspection R = repeat violation				

Compliance Status		IN	OUT	N/A	N/O	COS	R
Supervision							
1	Person-in-charge present, demonstrates knowledge, and performs duties ^(Pf)						
2	Certified Food Protection Manager ^(C)						
Employee Health							
3	Management, food employee and conditional employee; knowledge, responsibilities and reporting ^(Pf)						
4	Proper use of restriction and exclusion ^(P)						
5	Procedures for responding to vomiting and diarrheal events ^(Pf)						
Good Hygienic Practices							
6	Proper eating, tasting ^(P) , drinking, or tobacco use ^(C)						
7	No discharge from eyes, nose, and mouth ^(C)						
Preventing Contamination by Hands							
8	Hands clean & properly washed ^{(P) (Pf)}						
9	No bare hand contact with ready-to-eat food ^(P)						
10	Adequate handwashing sinks properly supplied and accessible ^{(Pf) (C)}						
Approved Source							
11	Food obtained from approved source ^{(P) (Pf)}						
12	Food received at proper temperature ^{(P) (Pf)}						
13	Food received in good condition, safe, & unadulterated ^{(P) (Pf)}						
14	Required records available ^(Pf) : shellstock tags, parasite destruction ^(P)						

Compliance Status		IN	OUT	N/A	N/O	COS	R
Protection from Contamination							
15	Food separated and protected ^{(P) (C)}						
16	Food-contact surfaces; cleaned & sanitized ^{(P) (Pf) (C)}						
17	Proper disposition of returned, previously served, reconditioned & unsafe food ^(P)						
Time/Temperature Control for Safety							
18	Proper cooking time & temperatures ^{(P) (Pf) (C)}						
19	Proper reheating procedures for hot holding ^(P)						
20	Proper cooling time and temperature ^(P)						
21	Proper hot holding temperature ^(P)						
22	Proper cold holding temperature ^(P)						
23	Proper date marking ^(Pf) and disposition ^(P)						
24	Time as a Public Health Control ^{(P) (Pf) (C)}						
Consumer Advisory							
25	Consumer advisory provided for raw / undercooked food ^(Pf)						
Highly Susceptible Populations							
26	Pasteurized foods used; prohibited foods not offered ^{(P) (C)}						
Food/Color Additives and Toxic Substances							
27	Food additives: approved & properly used ^(P)						
28	Toxic substances properly identified ^(Pf) , stored ^(P) & used ^(Pf)						
Conformance with Approved Procedures							
29	Compliance with variance ^(Pf) / specialized process ^(Pf) / HACCP Plan ^{(Pf) (C)}						

Official Order for Correction: Based on an inspection today, the items marked "OUT" indicated violations of 105 CMR 590.000 and applicable sections of the 2013 FDA Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If you are subject to a notice of suspension, revocation, or non-renewal pursuant to 105 CMR 590.000 you may request a hearing before the board of health in accordance with 105 CMR 590.015(B).

Date of Reinspection:	Discussion with Person-in-Charge:
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Signature of Person-in-Charge:	Date:
Signature of Inspector:	Date: