



Date of Inspection: 6/5/15

Facility Name: CHESTER OLD TOWN CAFE Phone Number: _____ PR ID # 120
 Facility Site Address: 150 MAIN City: CHESTER Zip: 96020
 Permit #: 15-136004 Exp Date: 7/29/15 Permit Holder: HEATH & CHRIS CHASE
 Type of Inspection: Pre-Open

See reverse side for the code sections and general requirements that correspond to each violation listed below

In = In compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site MAJ = Major violation OUT = Out of Compliance

In	N/O-N/A		COS	MAJ	OUT
DEMONSTRATION OF KNOWLEDGE					
		1. Demonstration of knowledge; food safety certification			
		Food Safety Cert Name: <u>64</u> Exp. Date: <u>7/29/15</u>			
EMPLOYEE HEALTH & HYGIENIC PRACTICES					
X		2. Communicable disease; reporting, restrictions & exclusions			
X		3. No discharge from eyes, nose, and mouth			
X		4. Proper eating, tasting, drinking or tobacco use			
PREVENTING CONTAMINATION BY HANDS					
X		5. Hands clean and properly washed; gloves used properly			
X		6. Adequate handwashing facilities supplied & accessible			
TIME AND TEMPERATURE RELATIONSHIPS					
X		7. Proper hot and cold holding temperatures			
	X	8. Time as a public health control; procedures & records			
X		9. Proper cooling methods			
X		10. Proper cooking time & temperatures			
X		11. Proper reheating procedures for hot holding			
PROTECTION FROM CONTAMINATION					
X		12. Returned and re-service of food			
X		13. Food in good condition, safe and unadulterated			
X		14. Food contact surfaces: clean and sanitized			
FOOD FROM APPROVED SOURCES					
X		15. Food obtained from approved source			
X		16. Compliance with shell stock tags, condition, display			
X		17. Compliance with Gulf Oyster Regulations			
CONFORMANCE WITH APPROVED PROCEDURES					
X		18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan			
CONSUMER ADVISORY					
X		19. Consumer advisory provided for raw or undercooked foods			
Highly Susceptible Populations					
X		20. Licensed health care facilities/ public & private schools; prohibited foods not offered			
WATER/HOT WATER					
X		21. Hot and cold water available			
		Temp <u>120°F</u>			
LIQUID WASTE DISPOSAL					
X		22. Sewage and wastewater properly disposed			
VERMIN					
X		23. No rodents, insects, birds, or animals			

SUPERVISION		OUT	PHYSICAL FACILITIES		OUT
24. Person in charge present and performs duties			39. Thermometers provided and accurate		
PERSONAL CLEANLINESS			40. Wiping cloths: properly used and stored		
25. Personal cleanliness and hair restraints			PERMANENT FOOD FACILITIES		
GENERAL FOOD SAFETY REQUIREMENTS			41. Plumbing: proper backflow devices		
26. Approved thawing methods used, frozen food			42. Garbage and refuse properly disposed; facilities maintained		
27. Food separated and protected		X	43. Toilet facilities: properly constructed, supplied, cleaned		
28. Washing fruits and vegetables			44. Premises: personal/cleaning items: vermin-proofing		
29. Toxic substances properly identified, stored, used			SIGNS/ REQUIREMENTS		
FOOD STORAGE/ DISPLAY/ SERVICE			45. Floor, walls and ceilings: built, maintained, and clean		
30. Food storage: food storage containers identified			46. No unapproved private homes/ living or sleeping quarters		
31. Consumer self-service			COMPLIANCE & ENFORCEMENT		
32. Food properly labeled & honestly presented			47. Signs posted; last inspection report available		
EQUIPMENT/ UTENSILS/ LINENS			48. Plan Review		
33. Nonfood contact surfaces clean			49. Permits Available		
34. Warewashing facilities: installed, maintained, used; test strips			50. Impoundment		
35. Equipment/ Utensils approved; installed; clean; good repair; capacity			51. Permit Suspension		
36. Equipment, utensils and linens: storage and use					
37. Vending machines					
38. Adequate ventilation and lighting; designated areas, use					

Received by (Print) CHRIS CHASE Title _____
 Received by (Signature) [Signature]
 Specialist (Print) PAT SAUNDERS Specialist (Signature) [Signature] Re-inspection Date: _____

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CHESTER OLD TOWN CAFE

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OBSERVATIONS AND CORRECTIVE ACTIONS

1. TEMPORARY PERMIT POSTED EXPIRES 7/29/15, PROVIDE E.H. COPY OF FOOD SAFETY CERTIFICATION BY THIS DATE. NEW PERMIT DUE TO NEW OWNERS

27. STORE PRODUCE ABOVE & AWAY FROM THAWING RAW MEAT IN REFRIGERATION UNITS. BOX OF TORTILLES ON LOWEST SHELF w/ THAWING MEATS. C.O.S

- FACILITY APPROVED FOR OPERATION w/ NEW OWNERS / OPERATORS.

Received by (Print)

CHRISTI CHASE

Title

Received by (Signature)



Specialist (Print)

RAT SANDERS

Specialist (Signature)



Re-inspection Date: