



Date of Inspection: 7/13/15

Facility Name: Dollar General - Chester Phone Number 616-8951 PR ID # 121  
 Facility Site Address: 376 Main City: Chester Zip 96020  
 Permit #: 15-135990 Exp Date: 6/13/16 Permit Holder: Daniel Anderson Type of Inspection: Routine

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
<b>DEMONSTRATION OF KNOWLEDGE</b>				
	<input checked="" type="checkbox"/>			
1. Demonstration of knowledge: food safety certification				
Food Safety Cert Name: <u>Non-Pass - Pnc Packages</u> Exp. Date				
<b>EMPLOYEE HEALTH &amp; HYGIENIC PRACTICES</b>				
<input checked="" type="checkbox"/>				
2. Communicable disease; reporting, restrictions & exclusions				
<input checked="" type="checkbox"/>				
3. No discharge from eyes, nose, and mouth				
<input checked="" type="checkbox"/>				
4. Proper eating, tasting, drinking or tobacco use				
<b>PREVENTING CONTAMINATION BY HANDS</b>				
<input checked="" type="checkbox"/>				
5. Hands clean and properly washed; gloves used properly				
<input checked="" type="checkbox"/>				
6. Adequate handwashing facilities supplied & accessible				
<b>TIME AND TEMPERATURE RELATIONSHIPS</b>				
<input checked="" type="checkbox"/>				
7. Proper hot and cold holding temperatures				
	<input checked="" type="checkbox"/>			
8. Time as a public health control; procedures & records				
	<input checked="" type="checkbox"/>			
9. Proper cooling methods				
	<input checked="" type="checkbox"/>			
10. Proper cooking time & temperatures				
	<input checked="" type="checkbox"/>			
11. Proper reheating procedures for hot holding				
<b>PROTECTION FROM CONTAMINATION</b>				
<input checked="" type="checkbox"/>				
12. Returned and re-service of food				
<input checked="" type="checkbox"/>				
13. Food in good condition, safe and unadulterated				
<input checked="" type="checkbox"/>				
14. Food contact surfaces: clean and sanitized				

  

In	N/O-N/A	COS	MAJ	OUT
<b>FOOD FROM APPROVED SOURCES</b>				
<input checked="" type="checkbox"/>				
15. Food obtained from approved source				
	<input checked="" type="checkbox"/>			
16. Compliance with shell stock tags, condition, display				
	<input checked="" type="checkbox"/>			
17. Compliance with Gulf Oyster Regulations				
<b>CONFORMANCE WITH APPROVED PROCEDURES</b>				
	<input checked="" type="checkbox"/>			
18. Compliance with variance, specialized process, reduced oxygen packaging, & HACCP Plan				
<b>CONSUMER ADVISORY</b>				
	<input checked="" type="checkbox"/>			
19. Consumer advisory provided for raw or undercooked foods				
<b>Highly Susceptible Populations</b>				
	<input checked="" type="checkbox"/>			
20. Licensed health care facilities/ public & private schools; prohibited foods not offered				
<b>WATER/HOT WATER</b>				
<input checked="" type="checkbox"/>				
21. Hot and cold water available Temp <u>120°F</u>				
<b>LIQUID WASTE DISPOSAL</b>				
<input checked="" type="checkbox"/>				
22. Sewage and wastewater properly disposed				
<b>VERMIN</b>				
<input checked="" type="checkbox"/>				
23. No rodents, insects, birds, or animals				

SUPERVISION		OUT
24. Person in charge present and performs duties		
PERSONAL CLEANLINESS		
25. Personal cleanliness and hair restraints		
GENERAL FOOD SAFETY REQUIREMENTS		
26. Approved thawing methods used; frozen food		
27. Food separated and protected		
28. Washing fruits and vegetables		
29. Toxic substances properly identified, stored, used		
FOOD STORAGE/ DISPLAY/ SERVICE		
30. Food storage; food storage containers identified		
31. Consumer self-service		
32. Food properly labeled & honestly presented		
EQUIPMENT/ UTENSILS/ LINENS		
33. Nonfood contact surfaces clean		
34. Warewashing facilities; installed, maintained, used; test strips		
35. Equipment/ Utensils approved; installed; clean; good repair; capacity		<input checked="" type="checkbox"/>
36. Equipment, utensils and linens: storage and use		
37. Vending machines		
38. Adequate ventilation and lighting; designated areas; use		

  

PHYSICAL FACILITIES		OUT
39. Thermometers provided and accurate		
40. Wiping cloths: properly used and stored		
PERMANENT FOOD FACILITIES		
41. Plumbing: proper backflow devices		
42. Garbage and refuse properly disposed; facilities maintained		
43. Toilet facilities: properly constructed, supplied, cleaned		
44. Premises: personal/cleaning items; vermin-proofing		
SIGN/ REQUIREMENTS		
47. Signs posted; last inspection report available		
COMPLIANCE & ENFORCEMENT		
48. Plan Review		
49. Permits Available		
50. Impoundment		
51. Permit Suspension		

Received by (Print) Emily Moya Title SM  
 Received by (Signature) Emily S. Moya  
 Specialist (Print) Pat Sawoski Specialist (Signature) [Signature] Re-inspection Date:

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OBSERVATIONS AND CORRECTIVE ACTIONS

35. CLEAN INSIDE OF REFRIGERATION UNITS ON A ROUTINE BASIS. DAILY  
UNITS IN BACK STORAGE AREA NEED ATTENTION.

Received by (Print) Emily Moya

Title SM

Received by (Signature) [Signature]

Specialist (Print) PAT SANDERS

Specialist (Signature) [Signature]

Re-inspection Date: