EHS-106-Rev. 11/05

INSPECTION REPORT **FOOD SERVICE ESTABLISHMENTS**

STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

ROUTINE INSPECTION ☐ PREOPERATIONAL

REINSPECTION
OTHER

	410 Capitol Avenue, MS#11FDP, Hartford, C1 06134
NAME OF ESTABLISHMENT JOhn Winthop Elan.	Schul
ADDRESS 85 ECKART Strat	
OWNER OF MICH NUTTONIEL	
Based on an inspection this day, the items marked below	identify the violations in operation or facilities whi

ESTABLISHMENT CLASS	
TOWN R.T.	1
INSPECTION DATE and TIME // 9	18e 10:05Am

ich must be corrected by the date specified below.

(99)	URCES OF FOOD	
1	Approved source, wholesome, nonadulterated	4
	450	Ļ,
2	Original container, properly labeled	1
ΕO	OD PROTECTION	
3	Potentially hazardous food meets temperature requirements during storage,	4
	preparation, display, service, and	
	transportation	
4	Adequate facilities to maintain product	2
	temperature, thermometers provided	
5	Potentially hazardous food properly thawed	2
6	Unwrapped or potentially hazardous food	4
	not re-served	
7	Food protected during storage, preparation,	
	display, service & transportation	0
8	Food containers stored off floor	2
9	Handling of food minimized	2
10	Food dispensing utensils properly stored	1
	Manager Control of the Control of th	
11	Toxic items properly stored, labeled, used	4
	RSONNEL	4
		4
PEI	RSONNEL	
PEI	RSONNEL Personnel with infection restricted	
PEI 12 CLI 13	Personnel with infection restricted EANLINESS OF PERSONNEL Handwashing facilities provided, personnel hands washed, clean	4
PEI 12 CLI 13	Personnel with infection restricted EANLINESS OF PERSONNEL Handwashing facilities provided, personnel hands washed, clean Clean outer clothes, effective hair restraints	4
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	maintained, installed, located				
17	17 Nonfood-contact surfaces designed, constructed, maintained, installed, located				1
18	Single service articles, storage, dispensing				2
19	No reuse of single service article				10.00
20	Dishwashing facilities approved design, adequately constructed, maintained, installed, located				2
DEMERIT SCORE					
4		3/_	2	1/	
TOTAL RATING Date Corrections Due					
10	ALAL.	IVATING	Jaco Corre	/	
		1111	MEXI IN	MISIM	1

Control of	UIPMENT & UTENSILS: CLEANLINES	SS
21	Preflushed, scraped, soaked and racked	
22	Wash water clean, proper temperature	1
23	Accurate thermometers provided, dish basket, if used	
24	Sanitization rinse (hot water - chemical)	2
25	Clean wiping cloths	1
26	Food-contact surfaces of utens is &	2
	equipment clean	
27	Nonfood-contact surfaces of utensits & equipment clean	1
28	Equipment/utensils, storage, handling	1
W/	ATER SUPPLY	
29	Water source adequate, safe	4
30	Hot and cold water under pressure,	2
	provided as required	
SE	WAGE DISPOSAL	
31	Sewage disposal approved	4
32	Proper disposal of waste water	1
PL	UMBING Location, installation, maintenance	1
34	No cross connection, back siphonage, backflow	
34	no cross connection, back sipilorage, backlow	4
то	ILET FACILITIES	
TO 35	ILET FACILITIES Adequate, convenient, accessible, designed, installed	4
-	Adequate, convenient, accessible, designed,	4
35	Adequate, convenient, accessible, designed, installed	
35 36 37	Adequate, convenient, accessible, designed, installed To let rooms enclosed with self-closing door	
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FLOORS, WALLS & CEILINGS 44 Floors: floor covering installed, constructed as required, good repair, clean 45 Floors, graded, drained as required 46 Floor, wall juncture covered 47 Mats removable, good repair, clean 48 Exterior walking, driving surfaces, good repair, clean 49 Walls, ceilings attached, equipment properly constructed, good repair, clean. Wall & ceiling surfaces as required. 50 Dustless cleaning methods used, cleaning equipment properly stored LIGHTING & VENTILATION 51 Adequate lighting provided as required 52 Room free of steam, smoke odors 53 Room & equipment hoods, ducts, vented as required DRESSING ROOMS & LOCKERS 54 Rooms adequate, clean, adequate lockers provided, facilities clean HOUSEKEEPING 55 Establishment and premises free of litter, no insect/rodent harborage, no unnecessary articles 56 Complete separation from living/sleeping quarters and laundry 57 Clean/soiled linens stored properly 58 No live birds, turtles, or other animals (except guide dogs) SMOKING PROHIBITED 59 Smoking prohibited, signs posted at each entrance QUALIFIED FOOD OPERATOR 60 Qualified Food Operator	72	Presence of insects/rodents
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62 Written documentation of training program

RISK	FACTOR	VIOL	ATIONS	IN RED
141014			S. P. S. STATE AND	

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	Signature of Person in charge / / / /	
	WAR MITTER	
	X MICH TO THE COLL	
	SIGNED (Inspector)	