

plastic water

State of Ohio  
Standard Inspection Report  
Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility <i>Am Vets #95 - Recreational Building</i>		Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License number <i>52</i>	Date <i>11/9/2018</i>
Address <i>206 West Ohio Ave, Mount Vernon</i>		Category/Descriptive <i>C35</i>		
License holder <i>Commander</i>		Inspection time (min) <i>30</i>	Travel time (min) <i>15</i>	Other
Type of visit (check) <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Follow up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 day <input type="checkbox"/> Complaint <input type="checkbox"/> Prelicensing <input type="checkbox"/> Consultation <input type="checkbox"/> Other specify		Follow-up date (if required)		Sample date/result (if required)

3717-1 OAC Violation Checked

**Management and Personnel**

<input type="checkbox"/>	2.1 Employee health
<input type="checkbox"/>	2.2 Personal cleanliness
<input type="checkbox"/>	2.3 Hygienic practices
<input type="checkbox"/>	2.4 Supervision

<input type="checkbox"/>	4.4 Maintenance and operation
<input type="checkbox"/>	4.5 Cleaning of equipment and utensils
<input checked="" type="checkbox"/>	4.6 Sanitizing of equipment and utensils
<input type="checkbox"/>	4.7 Laundering
<input type="checkbox"/>	4.8 Protection of clean items

**Poisonous or Toxic Materials**

<input type="checkbox"/>	7.0 Labeling and identification
<input type="checkbox"/>	7.1 Operational supplies and applications
<input type="checkbox"/>	7.2 Storage and display separation

**Food**

<input type="checkbox"/>	3.0 Safe, unadulterated and honestly presented
<input type="checkbox"/>	3.1 Sources, specifications and original containers
<input type="checkbox"/>	3.2 Protection from contamination after receiving
<input type="checkbox"/>	3.3 Destruction of organisms
<input type="checkbox"/>	3.4 Limitation of growth of organisms
<input type="checkbox"/>	3.5 Identity, presentation, on premises labeling
<input checked="" type="checkbox"/>	3.6 Discarding or reconditioning unsafe, adulterated
<input type="checkbox"/>	3.7 Special requirements for highly susceptible populations

**Water, Plumbing, and Waste**

<input type="checkbox"/>	5.0 Water
<input type="checkbox"/>	5.1 Plumbing system
<input type="checkbox"/>	5.2 Mobile water tanks
<input type="checkbox"/>	5.3 Sewage, other liquid waste and rainwater
<input type="checkbox"/>	5.4 Refuse, recyclables, and returnables

**Special Requirements**

<input type="checkbox"/>	8.0 Fresh juice production
<input type="checkbox"/>	8.1 Heat treatment dispensing freezers
<input type="checkbox"/>	8.2 Custom processing
<input type="checkbox"/>	8.3 Bulk water machine criteria
<input type="checkbox"/>	8.4 Acidified white rice preparation criteria
<input type="checkbox"/>	9.0 Facility layout and equipment specifications
<input type="checkbox"/>	20 Existing facilities and equipment

**Equipment, Utensils, and Linens**

<input type="checkbox"/>	4.0 Materials for construction and repair
<input type="checkbox"/>	4.1 Design and construction
<input type="checkbox"/>	4.2 Numbers and capacities
<input type="checkbox"/>	4.3 Location and installation

**Physical Facilities**

<input type="checkbox"/>	6.0 Materials for construction and repair
<input checked="" type="checkbox"/>	6.1 Design, construction, and installation
<input type="checkbox"/>	6.2 Numbers and capacities
<input type="checkbox"/>	6.3 Location and placement
<input checked="" type="checkbox"/>	6.4 Maintenance and operation

**Administrative**

<input type="checkbox"/>	901-3-4 OAC
<input type="checkbox"/>	3701-21 OAC

Refrigeration Temp - 38°F

**Violation(s)/Comment(s)** \* Operator not open at time of inspection.  
 A Level II supervisor is now present that is Ohio Dept. of Health approved. Training completed October 2017.  
 - Hand sink functional and fully stocked  
 - Quat. Amm. Sanitizer/ test kit present.  
 \* 3.6 - Ice present in Scotsman Ice machine not safe due to debris on ice. Dispose of all ice inside Ice Machine.  
 \* 4.6 - Properly Clean and Sanitize the inside of the Scotsman Ice machine.  
 6.1 - Remove Carpet runner from kitchen. Only rubber mats high pol used.

Inspected by <i>Xenia J. Huber, RS</i>	R.S./SIT # <i>2084</i>	Licensors <i>Knox County HD</i>
Received by <i>[Signature]</i>	Title	Phone

State of Ohio  
**Continuation Report**

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility <i>Am Vets #95</i>	Type of visit <i>Standard</i>	Date <i>1/9/2018</i>
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**Violation(s)/Comment(s)**

*6.4- Not all items at least 6" off the floor in front area under the counter. Do not let items accumulate that will hinder proper cleaning.*

*Correct criticals immediately. Remaining violations before next routine inspection.*

Inspected by <i>Lernie Helleur PS</i>	R.S./SIT # <i>2084</i>	Licenser <i>Fnox Gustaf HP</i>
Received by <i>[Signature]</i>	Title	Phone