

State of Ohio

Standard Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility <i>Weaver's Farm & Furniture</i>	Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License number <i>444</i>	Date <i>12/6/2017</i>
Address <i>29217 Mickey Rd, Deleville</i>	Category/Descriptive <i>C35</i>		
License holder <i>Raymond Weaver</i>	Inspection time (min) <i>75</i>	Travel time (min) <i>20</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) <i>7/6/17 - 2.0</i> <i>Acceptable</i>

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 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 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 checked="" 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 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 type="checkbox"/> 6.4 Maintenance and operation

Administrative

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

Violations/Comment(s)

Level II OPH Certified person present

- Handsink functional and fully stocked*
- observed disposable gloves in use upon arrival*
- metal stem probe thermometer present*
- Three compartment sink properly set up with sanitizer*
- Acceptable Temperatures - Deli prep case - Ham - 40°F*
- Deli Case - Bologna - 40°F, ~~Back~~ Back Refrigeration Storage - 37°F*
- Quat Apron Sanitizer in use*
- observed date marking procedures in place*
- 4.2 - provide internal refrigeration thermometers for*

Inspected by <i>Tom F. Helmer, PS</i>	R.S./SIT # <i>2084</i>	Licenser <i>Knox County HD</i>
Received by <i>Raymond Weaver</i>	Title	Phone

State of Ohio
Continuation Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility <i>Wraucers Farm & Furniture</i>	Type of visit <i>Standard</i>	Date <i>12/6/17</i>
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Violation(s)/Comment(s)

Self-serve Retail Unit and for back storage Refrigeration Unit.

to 4 - mop holder not yet present for hanging mop in mop room for proper drying. At time of inspection part of mop wall had to be removed due to plumbing issue. Repair wall and provide require mop holder for mop. (Repeat violation)

** ensure employee health forms and clean-up kit are maintained. - both present*
** provided 2018 Food Safety training to deli food worker.*

Correct noted violations before next routine inspection.

Note - For 2018 operation will be classified - as a Retail Food Establishment.

Inspected by <i>Laura J. Hillier, RS</i>	R.S./SIT # <i>2084</i>	Licenser <i>Lnox County OH</i>
Received by <i>Kaymond A. Wraucers</i>	Title	Phone