

# Standard Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility <i>Young's Locker</i>	Check one <input type="checkbox"/> FSO <input checked="" type="checkbox"/> RFE	License number <i>1042</i>	Date <i>2/8/2018</i>
Address <i>116207 Nashville Rd, Danville</i>	Category/Descriptive <i>CLS</i>		
License holder <i>Young's Locker</i>	Inspection time (min) <i>30</i>	Travel time (min) <i>20</i>	Other
Type of visit (check) <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Complaint	<input type="checkbox"/> Follow up <input type="checkbox"/> Precicensing	<input type="checkbox"/> Foodborne <input type="checkbox"/> Consultation	<input type="checkbox"/> 30 day <input type="checkbox"/> Other <i>specify</i>
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

#### 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

#### 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

<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

#### 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

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

#### 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

#### 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

#### Administrative

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

*\* CASAR Retail Food License is displayed*

#### Violation(s)/Comment(s)

*Person-In-Charge present*

*\* 4.2 - provide refrigeration thermometer for inside the meat case. maintain at 41°F or below.*

*\* 6.4 - Grooves of meat case doors showing build-up of food debris and dirt. properly clean and sanitize.*

*Retail labeling present. Meat Case temperatures - 32°F - 41°F. Ensure meat product is not piled high to limit air flow circulation. Correct violations before next inspection*

Inspected by <i>Leticia Huber (RS)</i>	R.S./SIT # <i>2084</i>	Licenser <i>Knox County HD</i>
Received by <i>[Signature]</i>	Title	Phone