## **State of Ohio** Food Inspection Report Authority: Chapters 3717 and 3715 Ohio Revised Code

Na	me of facility	am. 111.11/- 1. cha/	1	Check one □ FSO □ RFE		License Number		Date					
1	rederick town	Middle High School	1			! !a/		10/10/09/09/0					
Ad	dress		City/Stat	ity/State/Zip Code									
The Company	11 Stadiu	m Drive	Fred	redericktown Off 43019									
Lic	ense holder	5	Inspection	spection Time T		avel Time C		Category/Descriptive					
	Frederickt	Own Superivitendent		100				11/2<					
Tv	pe of Inspection (chec		<u></u>			Follow up data (if required)							
1 7		Control Point (FSO) □ Process Review (RFE) □ Varia	ance Revie	Review   Follow up		Follow up date (if required	ow up date (if required) Water sample da (if required)						
		☐ Complaint ☐ Pre-licensing ☐ Consultation				Carried Angelin		ACCUPATION AND ADDRESS OF THE PARTY OF THE P					
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS													
Mark designated compliance status (IN, OUT, N/O, N/A) for each numbered item: IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable													
		Compliance Status		Compliance Status									
64.5		Supervision		Time/Temperature Controlled for Safety Food (TCS food)									
1	ZÍN DOUT D N/A	Person in charge present, demonstrates knowledge, a performs duties	nd 2			Proper date marking and disposition							
2	DÎN □OUT □ N/A	Certified Food Protection Manager		24   IN   OUT		Time as a public health control: procedures & records							
136		Employee Health		DN/A □ N	/0			procedures & records					
3	☑ÍN □OUT □ N/A	Management, food employees and conditional employee knowledge, responsibilities and reporting	25		UT	Consumer Advis							
4	_ØÍN-□OUT □ N/A	Proper use of restriction and exclusion		,EÍN/A		Consumer advisory provided for raw or undercooked foods							
5	A'N OUT NIEL	Procedures for responding to vomiting and diarrheal eve	nts			Highly Susceptible Populations							
6	DIN OUT NO	Good Hygienic Practices  Proper eating, tasting, drinking, or tobacco use	26	26 DN/A		Pasteurized foods used; prohibited foods not offered		bited foods not offered					
7	ZIN OUTONO	No discharge from eyes, nose, and mouth											
	A CONTRACTOR OF THE STATE OF TH	eventing Contamination by Hands			HT	Chemical		10-10-10-10-10-10-10-10-10-10-10-10-10-1					
8	ØÍN □ OUT□ N/O	Hands clean and properly washed	27	DN/A	Food additives: approved and properly used								
9	Ø IN □ OUT □N/A □ N/O	No bare hand contact with ready-to-eat foods or appro alternate method properly followed	ved 28	ØÎN □ OI □N/A	UT	Toxic substances properly identified, stored, used							
					ocedures								
10	DÎN □OUT □ N/A	Adequate handwashing facilities supplied & accessible  Approved Source	29	29 N/A Compliance with Reduced Oxygen Packaging, other specialized processes, and HACCP plan									
11	ØIN □ OUT	Food obtained from approved source		DIN DO	LIT								
10	□ IN □ QUT	Food received at proper temperature	30	□N/A □ N/		Special Requirements: Fre	∍sh Ju	uice Production					
12	□N/A ☑ N/O □4Ñ □ OUT	Food in good condition, safe, and unadulterated	31										
14	□ N □ OUT	Required records available: shellstock tags, parasite	32		UT	Oi-I Di	<i>-</i>	D					
14	J⊠Ñ/A □ N/O	destruction	32		/0	Special Requirements: Cu	stom	Processing					
1889		Protection from Contamination	33			Special Requirements: Bu	lk Wa	iter Machine Criteria					
15	DÎN □ OUT □N/A □ N/O	Food separated and protected		N/A D N/	10	1 11	4						
16	□1N □ OUT □N/A □ N/O	Food-contact surfaces: cleaned and sanitized	34			Special Requirements: Aci Criteria	ídified	d White Rice Preparation					
17	.⊠ÍN □ OUT	Proper disposition of returned, previously served, reconditioned, and unsafe food	35	□ IN □ OU	UT	Critical Control Point Inspe	ection	**PEANANTAL II AMMA					
	Time/Tempe	rature Controlled for Safety Food (TCS food)	200	□ IN □ O	UT	D Di		***************************************					
18	□IN □ OUT □N/A ☑ N/O	Proper cooking time and temperatures	36	□N/A /		Process Review							
19	□ IN □ QUT □N/A □ N/O	Proper reheating procedures for hot holding	37	□ IN □ OI □N/A	U I	Variance							
20	□ IN □ OUT □N/A □ N/O	Proper cooling time and temperatures	R	Risk factors are food preparation practices and employee behaviors									
21	DIN DOUT	Proper hot holding temperatures	fo	that are identified as the most significant contributing factors to foodborne illness.									
22	□ OUT □ N/A	Proper cold holding temperatures		Public health interventions are control measures to prevent foodborne illness or injury.									

HEA 5302A Ohio Department of Health (10/19)
AGR 1268 Ohio Department of Agriculture (10/19)

## State of Ohio

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Type of Inspection

Date

Name of Facility	in middlelile & Silver	)	*	Type of Inspection	Date	0								
Frederickton	TI MUCHE HIGH CONOU	- Carlotte		Sianuara	IV IV GYO!									
GOOD RETAIL PRACTICES														
Good Retail Practi	ces are preventative measures to control the intro			chemicals, and physical objects	into foods									
	status (IN, OUT, N/O, N/A) for each numbered item: I					cable								
	Safe Food and Water		Utensils, Equipment and Vending											
38   IN   OUT   N/A   N/O	Pasteurized eggs used where required	eurized eggs used where required 54 IN			Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used									
39 IN OUT ON/A	Water and ice from approved source	55	☑ IN □ OUT □	IN/A Warewashing facilities: installe	d, maintained, used	l; test								
Fo	od Temperature Control	1	□ IN □ OUT	Nonfood-contact surfaces clea	,									
40   IN   OUT   N/A   N/O	Proper cooling methods used; adequate equipment for temperature control	56		Physical Facilities										
41 IN OUT ON/A N/O	Plant food properly cooked for hot holding	57	□ IN □ OUT □	]N/A Hot and cold water available;	Hot and cold water available; adequate pressure									
42   IN   OUT   N/A   N/O	Approved thawing methods used	58	□ IN □OUT	Plumbing installed; proper ba	ckflow devices									
43 IN I OUT IN/A	Thermometers provided and accurate		□N/A □ N/O		-									
	Food Identification	59	OUT C	IN/A Sewage and waste water prope	Sewage and waste water properly disposed									
44 🗆 IN 🗆 OUT	Food properly labeled; original container	60	OIN OUT C	IN/A Toilet facilities: properly constru	Toilet facilities: properly constructed, supplied, cleaned									
Preven	tion of Food Contamination	61	D IN DOUT D	IN/A Garbage/refuse properly dispose	Garbage/refuse properly disposed; facilities maintained									
45 🗆 IN 🗆 OUT	Insects, rodents, and animals not present/outer openings protected	62	☑ IN ☐ OUT	ntained, and clean; d	logs in									
46   IN   OUT	Contamination prevented during food preparation, storage & display	63	□N/A □ N/O  63 □ IN □ OUT Adequate ventilation and lighting; design			designated areas used								
47	Personal cleanliness Wiping cloths: properly used and stored	64												
49   IN   OUT   N/A   N/O	Washing fruits and vegetables			Administrative										
	Proper Use of Utensils				HERMOLABEL ®	1								
50 IN OUT ONA ONO	In-use utensils: properly stored	65	OIN OUTE	IN/A 901:3-4 OAC Square turns	s 160°F	TL1-160								
51 IN OUT ON/A	Utensils, equipment and linens: properly stored, dried, handled	ls, equipment and linens: properly stored, dried,												
52 IN OUT ON/A	Single-use/single-service articles: properly stored, used	16			· health	,								
53 IN OUT ON/A N/O	Slash-resistant, cloth, and latex glove use		Chull V	VAR TVIB-INS	Janogar	5								
	Observations and O Mark "X" in appropriate box for COS and R: COS=cor				Dh.									
	ity Level Comment	, , , , ,	The same same		cos	-								
61 5.4 NC	Ubserved dumpsters	de	107 ha	re 11015. Contac	7 0	ď								
	refuse hanter to	Ob	tain 1	ids or replace	ement -									
	dumpster with 1	ds												
			1											
	- Vabel red buckets	WIT	n conti	ent wash-r	mse- 0									
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	and buil statis	DIAS	DIVER-	NE III Tourg		+-								
	produced size	11-	> *											
	- Hot and cold h	old	116-1 180	cestable										
	- Keviewen reheating	1/1:	HO1 d	das reheated to	12r 0									
	hot heldings Rep	who	cr. as	GERISK EVEL:	3 4m -									
I can reheat the hot holding only one Hem Ort we														
Person in Charge	1114 11			Date:	20									
KUM / MM HUMALUTURE)														
Sanitarian Licenson: DVX Pyblic HC														
PRIORITY LEVEL: C = CRITICAL NC = NON-CRITICAL Page of														

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Name of Facility