

State of Ohio Food Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility LA TENA LTD DBA LA NETA	Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License Number 547	Date 12/06/2018
Address 1262 BELLEFONTAINE ST.	City/Zip Code WAPAKONETA		
License holder LA TENA LTD	Inspection Time 60	Travel Time 10	Category/Descriptive COMMERCIAL CLASS 4 <25,000 SQ. FT.
Type of inspection (check all that apply) <input checked="" type="checkbox"/> Standard <input checked="" type="checkbox"/> Critical Control Point (FSO) <input type="checkbox"/> Process Review (RFE) <input type="checkbox"/> Variance Review <input type="checkbox"/> Follow Up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 Day <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-licensing <input type="checkbox"/> Consultation		Follow-up date (if required) 12/07/2018	Water sample date/result (if required) / /

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	
Supervision		Time/Temperature Controlled for Safety Food (TCS food)	
1	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	23	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O
Person in charge present, demonstrates knowledge, and performs duties		Proper date marking and disposition	
2	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	24	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O
Certified Food Protection Manager		Time as a public health control: procedures & records	
Employee Health		Consumer Advisory	
3	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	25	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A
Management, food employees and conditional employee; knowledge, responsibilities and reporting		Consumer advisory provided for raw or undercooked foods	
4	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Highly Susceptible Populations	
Proper use of restriction and exclusion		26	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
5	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Pasteurized foods used; prohibited foods not offered	
Procedures for responding to vomiting and diarrheal events		Chemical	
Good Hygienic Practices		27	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
6	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Food additives: approved and properly used	
Proper eating, tasting, drinking, or tobacco use		28	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A
7	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	Toxic substances properly identified, stored, used	
No discharge from eyes, nose, and mouth		Conformance with Approved Procedures	
Preventing Contamination by Hands		29	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
8	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	Compliance with Reduced Oxygen Packaging, other specialized processes, and HACCP plan	
Hands clean and properly washed		30	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
9	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Special Requirements: Fresh Juice Production	
No bare hand contact with ready-to-eat foods or approved alternate method properly followed		31	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
10	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Special Requirements: Heat Treatment Dispensing Freezers	
Adequate handwashing facilities supplied & accessible		32	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
Approved Source		Special Requirements: Custom Processing	
11	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	33	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
Food obtained from approved source		Special Requirements: Bulk Water Machine Criteria	
12	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	34	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A <input type="checkbox"/> N/O
Food received at proper temperature		Special Requirements: Acidified White Rice Preparation Criteria	
13	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	35	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A
Food in good condition, safe, and unadulterated		Critical Control Point Inspection	
14	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	36	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
Required records available: shellstock tags, parasite destruction		Process Review	
Protection from Contamination		37	<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A
15	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	<p>Risk Factors are food preparation practices and employee behaviors that are identified as the most significant contributing factors to foodborne illness.</p> <p>Public health interventions are control measures to prevent foodborne illness or injury.</p>	
Food separated and protected			
16	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Food-contact surfaces: cleaned and sanitized			
17	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT		
Proper disposition of returned, previously served, reconditioned, and unsafe food			
Time/Temperature Controlled for Safety Food (TCS food)			
18	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Proper cooking time and temperatures			
19	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Proper reheating procedures for hot holding			
20	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Proper cooling time and temperatures			
21	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Proper hot holding temperatures			
22	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A		
Proper cold holding temperatures			

State of Ohio Food Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility LA TENA LTD DBA LA NETA	Type of Inspection sta ccp	Date 12/06/2018
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GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.
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

Safe Food and Water		Utensils, Equipment and Vending	
38	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	54	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT
Pasteurized eggs used where required		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used	
39	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	55	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
Water and ice from approved source		Warewashing facilities: installed, maintained, used; test strips	
Food Temperature Control		56	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT
40	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Nonfood-contact surfaces clean	
Proper cooling methods used; adequate equipment for temperature control		Physical Facilities	
41	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	57	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
Plant food properly cooked for hot holding		Hot and cold water available; adequate pressure	
42	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	58	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
Approved thawing methods used		Plumbing installed; proper backflow devices	
43	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	59	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
Thermometers provided and accurate		Sewage and waste water properly disposed	
Food Identification		60	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
44	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Toilet facilities: properly constructed, supplied, cleaned	
Food properly labeled; original container		61	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A
Prevention of Food Contamination		Garbage/refuse properly disposed; facilities maintained	
45	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	62	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT
Insects, rodents, and animals not present/outer openings protected		Physical facilities installed, maintained, and clean	
46	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	63	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT
Contamination prevented during food preparation, storage & display		Adequate ventilation and lighting; designated areas used	
47	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	64	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
Personal cleanliness		Existing Equipment and Facilities	
48	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	Administrative	
Wiping cloths: properly used and stored		65	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
49	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O	901:3-4 OAC	
Washing fruits and vegetables		66	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A
Proper Use of Utensils		3701-21 OAC	
50	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
In-use utensils: properly stored			
51	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A		
Utensils, equipment and linens: properly stored, dried, handled			
52	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A		
Single-use/single-service articles: properly stored, used			
53	<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A <input type="checkbox"/> N/O		
Slash-resistant and cloth glove use			

Observations and Corrective Actions

Mark "X" in appropriate box for COS and R: **COS** = corrected on-site during inspection **R** = repeat violation

Item No.	Code Section	Priority Level	Comment	COS	R
6	3717-1-02.3(A)	NC	Food contamination prevention - eating, drinking, or using tobacco. An open drink cup was observed on the cook line. Removed to correct.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10	3717-1-05.1(O)	C	Using a handwashing sink - operation and maintenance. 3 of the handsinks in the facility had pitchers or glasses stored in them at the time of inspection, which prevented proper handwashing accessibility. Items removed to correct.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10	3717-1-06.2(B)	NC	Handwashing cleanser - availability. The handsink near the dishwash area did not have soap available to it.	<input type="checkbox"/>	<input type="checkbox"/>
10	3717-1-06.2(C)	NC	Handwashing sinks - hand drying provision. The handsink at the end of the cook line did not have hand towels available.	<input type="checkbox"/>	<input type="checkbox"/>
13	3717-1-03	NC	Food - safe, unadulterated, and honestly presented A moldy bag of chicken tenders was observed in the cook line reach in cooler. Uncovered foods were observed covered in condensation in the walk in freezer. Removed to trash.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15	3717-1-03.2(C)	C	Packaged and unpackaged food - preventing contamination by separation, packaging, and segregation The following products were observed uncovered in the facility: ice bin at the waitress station, salt for chips, salsa in bowls at the server station, cheese, ham, mushrooms, vegetables, pineapples, tamales in the cook line reach in cooler, sliced onions, cheese sauce, and red sauce in the walk in cooler. Raw beef and fish was being stored over uncovered sliced tomato in the bottom of the prep cooler. A raw egg was being stored over uncovered shredded cheese in the bottom of the prep cooler.	<input type="checkbox"/>	<input type="checkbox"/>
16	3717-1-04.5(A)(1)	C	Cleanliness of equipment food-contact surfaces and utensils. Chip containers are dirty and need cleaned.	<input type="checkbox"/>	<input type="checkbox"/>

Person in Charge Sanitarian CHRIS MILLER RS/SIT# 3139	Date 12/06/2018
Licensor: Auglaize County Health Department	

PRIORITY LEVEL: C=CRITICAL NC = NON-CRITICAL

As per HEA 5302B The Baldwin Group, Inc. (7/18)

As per AGR 1268 The Baldwin Group, Inc. (7/18)

State of Ohio Continuation Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility		Type of Inspection		Date	
LA TENA LTD DBA LA NETA		sta ccp		12/06/2018	
Observations and Corrective Actions (continued)					
Mark "X" in appropriate box for COS and R: COS = corrected on-site during inspection R = repeat violation					
Item No.	Code Section	Priority Level	Comment	COS	R
20	3717-1-03.4(D)	C	Cooling - temperature and time control. A container of cooked rice which had been cooked more than 4 hours earlier was observed on the cook line at 108F. Removed to trash to correct.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22	3717-1-03.4(F)(1)(b)	C	Time/temperature controlled for safety food - cold holding. Diced tomato on the salsa cart was observed at 61F. Removed to trash to correct. 4 tubs of raw chicken were observed in the kitchen at 48F. Moved into walk in cooler to correct.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
23	3717-1-03.4(G)	C	Ready-to-eat, time/temperature controlled for safety food - date marking. The following products were observed in the facility without date marking as required: sliced tomato and guacamole dip in the bottom of the prep cooler, diced ham, tamales, and moldy bag of chicken tenders in the cook line reach in cooler. Pan of cooked pork, 2 pans cooked chicken, and pan of refried beans in the walk in cooler.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
25	3717-1-03.5(E)	C	Consumer advisory. The facility offers some products in a form where they are not fully cooked; however, the menu does not advise of the potential risks as required.	<input type="checkbox"/>	<input type="checkbox"/>
28	3717-1-07.1(P)	NC	Personal care items - storage. Personal foods were being stored in the walk in cooler that were leaking, moldy, and intermingled with food offered for sale. A designated area shall be provided and used that will prevent potential contamination of food offered for sale.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-II.0002		Good Hygienic Practices: Observed employee eating, drinking, or using tobacco in non-designated area.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35	CCP-III.0008		Preventing Contamination by Hands: The hand washing sink(s) were not accessible for convenient use by employees. 3 or 4 hand sinks were blocked with dishes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35	CCP-III.0009		Preventing Contamination by Hands: Observed no supply of hand cleaning liquid, powder or bar soap at the handwashing sink(s). One soap was missing towels and another one was missing soap.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35	CCP-IV.0002		Demonstration of Knowledge: The person in charge was unable to demonstrate proper knowledge of food safety and prevention.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-IV.0004		Demonstration of Knowledge: The person in charge is Certified in Food Protection.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-VI.0006		TCS Food: Observed improper method for cooling TCS foods. Bulk hot foods sitting at room temperature (beans, rice beef). All moved into cooling process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35	CCP-VI.0007		TCS Food: Ready-to-eat raw, marinated or partially cooked fish was not properly frozen for parasite destruction.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-VI.0015		TCS Food: TCS foods were not being held at the proper temperature.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
35	CCP-VII.0001		Protection from Contamination: Observed food that was not properly protected from contamination by separation, packaging, and segregation. Many pans of food did not have lids or covers.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-VII.0003		Protection from Contamination: Observed improper storage of food items.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-VIII.000		Consumer Advisory: The consumer is not properly advised of the risk of consuming raw or undercooked animal foods.	<input type="checkbox"/>	<input type="checkbox"/>
35	CCP-VIII.000		Consumer Advisory: Observed a consumer advisory on the menu for animal foods that are served raw, undercooked or not otherwise processed to eliminate pathogens.	<input type="checkbox"/>	<input type="checkbox"/>
40	3717-1-03.4(E)	NC	Cooling methods - temperature and time control. A container of cooked chicken was observed at 134F on the cook line. A pot of cooked beans was observed at 126F on the cook line. The products were moved into active cooling to correct.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
43	3717-1-04.2(G)	NC	Food temperature measuring devices. The person in charge was not able to locate a reduced diameter thermometer capable of reading temperatures on thin items as required.	<input type="checkbox"/>	<input type="checkbox"/>
44	3717-1-03.2(D)	NC	Food storage containers - identified with common name of food.	<input type="checkbox"/>	<input type="checkbox"/>

Person in Charge		Date	
Sanitarian CHRIS MILLER RS/SIT# 3139		12/06/2018	
Licensor:		Auglaize County Health Department	

PRIORITY LEVEL: C=CRITICAL NC = NON-CRITICAL

As per HEA 5351 The Baldwin Group, Inc. (7/18)

As per AGR 1268 The Baldwin Group, Inc. (7/18)

State of Ohio Continuation Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility LA TENA LTD DBA LA NETA			Type of Inspection sta ccp	Date 12/06/2018	
Observations and Corrective Actions (continued)					
Mark "X" in appropriate box for COS and R: COS = corrected on-site during inspection R = repeat violation					
Item No.	Code Section	Priority Level	Comment	COS	R
			The following products were observed in containers without identification of contents: vinegar, salt, sugar, and spice mixes.		
46	3717-1-03.2(Q)	NC	Food storage - preventing contamination from the premises. 3 drink cases and a box of limes were on the floor in the server area. Drink syrup boxes were observed on the floor of the back dry goods storage room.	<input type="checkbox"/>	<input type="checkbox"/>
46	3717-1-03.2(Y)	NC	Miscellaneous sources of contamination. Dirty chip baskets were being re-lined, then stacked upon each other with the bottom of the dirty basket contacting the clean paper. A container of sauce for personal use was leaking down on fresh produce in the walk in cooler.	<input type="checkbox"/>	<input type="checkbox"/>
48	3717-1-03.2(M)	NC	Wiping cloths - use limitation. Wet wiping cloths were observed on the prep table near the cook line.	<input type="checkbox"/>	<input type="checkbox"/>
50	3717-1-03.2(K)	NC	In-use utensils - between-use storage. The ice scoop at the server station is being kept on a surface that is not clean.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
51	3717-1-04.8(E)(2)	NC	Clean equipment and utensils stored in a self-draining position and covered or inverted. Clean bowls were observed upright and uncovered on the clean dish rack. Plates and bowls were observed upright and uncovered on the tables surrounding the hot wells.	<input type="checkbox"/>	<input type="checkbox"/>
52	3717-1-04.8(E)(1)	NC	Single-service and single-use articles - storage A box of aluminum pans were observed on the floor in the servers area.	<input type="checkbox"/>	<input type="checkbox"/>
54	3717-1-04(I)	NC	Nonfood-contact surfaces - materials. The portable cart has a wood block being used for support and a large amount of tape on the handle. The surfaces shall be smooth and easily cleanable and non absorbent.	<input type="checkbox"/>	<input type="checkbox"/>
54	3717-1-04.1(KK)	NC	Food equipment - certification and classification. Food and drinks were being stored on soft drink crates that were turned upside down in the dry goods storage room. Approved shelving must be used.	<input type="checkbox"/>	<input type="checkbox"/>
54	3717-1-04.4(A)	NC	Equipment - good repair and proper adjustment. The walk in freezer is accumulating a large amount of condensation and needs repaired.	<input type="checkbox"/>	<input type="checkbox"/>
56	3717-1-04.5(D)	NC	Nonfood-contact surfaces - cleaning frequency. The can opener is collecting food debris and needs cleaned. The interior of the salsa cooler is dirty and needs cleaned.	<input type="checkbox"/>	<input type="checkbox"/>
61	3717-1-05.4(N)	NC	Covering receptacles. The grease and garbage dumpster lids were open.	<input type="checkbox"/>	<input type="checkbox"/>
61	3717-1-05.4(P)	NC	Maintaining refuse areas and enclosures. Scattered debris was observed around the dumpster area.	<input type="checkbox"/>	<input type="checkbox"/>
62	3717-1-06.4(A)	NC	Repairing. Tiles are missing near the entrance of the walk in freezer. Tiles are missing in the floor by the chip serving area.	<input type="checkbox"/>	<input type="checkbox"/>
62	3717-1-06.4(B)	NC	Cleaning - frequency and restrictions. The floor of the walk in cooler had debris on it and needs cleaned.	<input type="checkbox"/>	<input type="checkbox"/>
62	3717-1-06.4(F)	NC	Drying mops. Mops were observed damp in the mop buckets in the front and back areas. Hang mops so they can air dry between use.	<input type="checkbox"/>	<input type="checkbox"/>
63	3717-1-06.2(I)(2)	NC	Lighting - intensity (20 FC) A light was out above the clean dish rack with 6 foot candles of light being provided. Please repair to provide at least 20 foot candles of light to this area.	<input type="checkbox"/>	<input type="checkbox"/>

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