Establishment Name	Toes					Permit Number:	100146		
Mailing Address D O D O	111 11	0.01	10. 4	1.6	CG, INT OV	Permit Posted:	□ Yes □ No		
Physical Address	L 122, 14	OVW	WI	nel	U, 141 OV	Date of mopostion	No by be	6	9016
Routine Inspection Complai	nt Follow-u	p Inspec	tion \square	If fol	Vells	(d/m/y) evious inspection (d/m	Morember	1, (XU)
*					W 4.7				
RITICAL ITEMS: Based on the ems must be corrected at the time of insp									
ems may result in revocation or suspension					THE PARTY OF THE P		Infinediately correct of	CONTRO	n Cittica
	n compliance) ot in compliance)	•		served) licable)	Mark		repeat violation) (controlled during in:	spection	on)
Compliance Sta	tus	CDI	R		Com	pliance Stat	us	CDI	R
Time/Temperature of Potentia	ally Hazardous Fo	ods			Person	al Hygiene of Foo	d Service Workers		
101 Cold holding temperatures ≤ 4°C	YES NO NA NOB			201	Hands clean & prop	perly washed	MES NO NOB		
Hot holding temperatures ≥60°C	YES NO NA NOB	4	18	(202)	Adequate handwas accessible	hing facilities supplied &	ES NO NOB		
103 Proper cooking of raw food of animal				203	Food handlers free	of disease or condition			
origin 104 Proper cooling time and temperatures	YES NO NA NOB					g proper utensils to avoi			
105 Adequate equipment to maintain food			-	204	unnecessary hand cooked/prepared for		ES NO NA NOB		
temperatures	YES NO NA NOB	62/100	-311	205	Food training certif		YES NO NA NOB		
106 Proper monitoring of temperatures 107 Proper reheating procedures for hot holding	YES NO NA NOB				Potentially Haz	ardous Foods Pro	tected from Conta	minat	ion
108 Proper thawing procedures	TES NO NA NOB	V*C	PIS	401	Food separated an	d protected	WES NO NA NOB		
Food, Water and Ice from		s		402	Food contact surfact sanitized	ces cleaned and	FES NO NA NOB		
301 Food obtained from approved sources	YES'NO NOB			403	Facility free of pest	s (vermin and insects)	YES NO NOB		
302 Food in good condition, safe and	<u> </u>			404	Toxic chemicals proused to prevent for	operly labeled, stored or	NES NO NOB		
unaltered 303 Food properly labeled	YES NO NOB	-		405	Proper disposal of	returned, previously			
Food properly labeled	NOB NOB				served food		YES NO MANOB		
	Food	Temn	erat	ure O	bservations				
	Temp	Temp	Jerai	uieo	Temp				Гетр
Item / Location	(°C)	Item	/ Loca	tion	(°C)	Item	/ Location		(°C)
(Nhite retrioerator	: 2.00		M	* (chimas an	d hotholdin	g of hot de	265	
Black refregerator	:), 50%	1	Jud 5	5) 10	perseve	dinita a	reporting	7	
11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1. 1.151	20/		1	1010000	Delca de	Traff VI	0	
Hot days Chot hol	ang). 67.1		Ud IS	1	ntemal	i her mener	er pravided		
Janes de la	to land week	<u> </u>	Land.	13/ 1070	by El	10.	and a second		
Item (Observat	ione a	and C	Orroc	tive Actions				ection
Number	Observat	10115 0	illu C	JUITEC	LIVE ACTIONS	and the latest the lat	KUIA E BBU		licable)
202 Properly Secry	re the wa	11-0	noi	while	d paper	sheets dis	penser	No	1, 12,
In Dud wall	went the nowth	10.0	2		14	ol sidadzite i la	Refrigerate	1 10	2019
- 1 total sources			N.E.	12.01	- The May			0	XP.
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209 thould preet	of a Va	49_	an	d he	Cognized	food Cut	eta (10 dr	
frings Cox	Fificato						1	2-0	Mr
Training Co	i i fource)	Mo	m
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C Processing		1		,		9		0	
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NON-CRITICAL ITEMS: Based on the inspection today, the non-critical items identified below are violations of the Food Establishment Safety Regulations. Non-critical items must be corrected by the next routine inspection or a shorter period of time as may be specified by the inspector. Failure to comply with any time limits for corrections specified in this notice may result in revocation or suspension of your Food Establishment Permit and closure of your establishment

EGEND Circ	END Circle One of: YES (in compliance) NO (not in compliance)			NOB (not observed) NA (not applicable)				Mark "√" in Box: R (repeat violation) CDI (controlled during inspection)				
Compliance Status		CDI	R	in the part of the		Compliance Status		CDI	R			
IN BOSTO OF A CO	Food Equi	pment an	d Utensils				of Least	Physical Facili	ties	No.		
	Adequate facilities available to wash, rinse and sanitize utensils and/or equipment.		ES NO NA NOB	WE THE	7, 10	601		contact surfaces properly constructed or ed. Acceptable material used.	YES NO NA NOB	upit of	upp	
Appropriate procedures followed for mechanical and/or manual dishwashing		ES NO NA NOB		16 E	602	Hot &	cold water available; adequate pressure	ESNO NOB	neo! Dent é «			
Proper storage of frozen food items Food stored in food grade material Equipment and utensils that contact food are		ES NO NA NOB		7' 1	603		er disposal of sewage & waste water facilities: adequate number, properly	VES NO NOB	T THE SECTION OF THE	-unqu		
		YES NO NA NOB		- Service	604	consti	ructed, supplied and cleaned S. Jaff	YES NO NOB	Died.	_		
5 corrosion resis	corrosion resistant and non-toxic Equipment in good repair, cleaned and		WES NO NOB			605	Adequ	uate lighting; lighting protected	YES NO NOB	ight tell	18C	
6 sanitized			YES NO NOB			606	-	uate mechanical ventilation; ises clean, uncluttered, cleaning and	PES NO NA NOB	0.5		
navini elevaja)		eral Sanita	ntion	erom e		607		enance equipment properly stored	YES NO NA NOB			
1 facilities maint	Garbage & refuse properly disposed and acilities maintained		VES NO NOB		Testing Devices/Logging of Temperatures Working dishwasher temperature and pressure							
2 constructed, in	tact surfaces prop n good repair and s properly attired a	clean	PES NO NOB			801	gauge		YES NONA NOB	HINELY:		
3 personal hygie		rotos, y es	YES NO NA NOB			802		nical test kits and/ or papers provided erature logs maintained for refrigerated	TES NO NA NOB	V		
4 pests	oing quarters sepa		YES NO NOB		TMT3	803		ge units (non-regulatory requirement)	YES NO NA NOB	NOTE:		
5 food service a			YES NO NA NOB					Other				
6 excluded from			YES NO NA NOB			-		To little at a second for the as	Total Carlo	of the same		
7 in sanitizing s		310100	YES NO NA NOB					and sudden on accessole	Parameter Street	25		
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									date over Serve of Section 10 (file)	193		
		inst 10 - 3 - 15	80. No. 102 - 104					A CONTRACTOR OF THE SECOND	The best test boxes	puri	-	
						308 1114, 4		Complete and the first	1019	Self the		
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frau ferbei kolfr	is protect to the first term	electrical	E	nfor	cem	ent /	Actio	On: (Mark "√", if Applicable)	MAY OF SECURITY SECUR			
e-Inspection Required: Yes No V						Esta	blishment Closed Yes	No 🔽	no-i	Short		
oproximate Date o	of Re-Inspection:		(*iee 10)	117	o letter to	STATE OF STA	Foo	d Discarded Other	is produced beforego	5019		
erson in Charge I	Name:	DE CAIL	OLER				Enviror	nmental Health Officer Name:	Man H	vd.	Tille	
erson in Charge		1	1 (a)		£3	Ob) medical	Enviror	nmental Health Officer Signature:	114	y	or-	
ate	Almaz	12010	7				Date	Travel Ha	Las	neo		
m/v)		-1/1	/			1. [(d/m/v)	N 1711 12 1. 1711 1/	1/ 1//			