Food Facility Inspection Report 6/20/15, 12:52 PM

1	GEORGIA DEPARTMENT OF PUBLIC HEALTH Food Service Establishment Inspection Report													T SCORE	CURRENT G	RAD	)E
Establishment Name: CAMP NEW DAWN																	
Georgia Department of Public Health Address: 226 S CEDAR LN																	
City:	(	СН	CK	ΑM	AUGA Time In: 10 : 55 AM T	ime	Out	: <u> </u>	11	_:_	20	АМ					
Insp	ec	tioı	n D	ate	06/19/2015 CFSM: Jennifer (	Char	ndler	(02/	21/	201	6)					)	
Purpose of Inspection: Construction/Preoperational Initial Routine Follow-up Temporary									Score	Grade B		07/15	8		B	)	
Risk Type: 1 ○ 2 ● 3 ○ Permit#: 146-739								Prior Sc				Date					
Risk Factors are food preparation practices and employee behaviors Good Retail Practices are preventive most commonly reported to the Centers for Disease Control and measures to control the introduction o Prevention as contributing factors in foodborne illness outbreaks. Public pathogens, chemicals, and physical o									7		В	06/17	/14				
Health Interventions are control measures to prevent illness or injury. Into foods.											D		SCORING AND G	RADING: A=	90-100 B=80-89 C=70-	79 U:	≤69
					FOODBORNE ILLNESS RISK F	AC	TOF			Pl)		HEAL					
				_	(Mark designated compliance staus (IN, OUT, NA, or NO) for or increase OUT=not in compliance NO=not observed NA=not app		e CO	OS=co	rrect	ed or	n-site durir	ng inspec					
Comp	_		_				cos		Co	omp	liance S	tatus				cos	R
1 11	+		NA	NO	Supervision 1-2. Person in charge present, demonstrates knowledge, ar	nd		oints	5	5 IN	OUTN	A NO	Cooking and Rehe Foods, (	ating of Pote Consumer A		9 pc	oints
•	•	0			performs duties	iu	0	0			0 0	0 5-	1A. Proper cooking to	ime and temp	eratures	0	0
2 11	N C	UT	NA	NO	Employee Health, Good Hygenic Practices, Preventin Contamination by Hands	ng	9 pc	oints		C	0 0	) 🌘 5-	1B. Proper reheating	procedures f	or hot holding	0	0
	,	0			2-1A. Proper use of restriction & exclusion		0	0	·							4 pc	oints
•	_	o		_	2-1B. Hands clean and properly washed		0	O		0	0		Consumer advisor dercooked foods	y provided fo	r raw and	0	0
0	)	•	0	0	2-1C. No bare hand contact with ready-to-eat foods or appro	oved		0				+ +	Holding of Poten	tially Hazard	ous Foods Date		
Ш~	_	_	_	_	alternate method properly followed		4 n	oints	6	6 IN	OUTN	ANO	Marking Pote			9 pc	oints
	•	0			2-2A. Management awareness; policy present; reporting		0	0				6-	1A. Proper cold hold	ing temperatu	ire	0	0
1	_	0		0	2-2B. Proper eating, tasting, drinking, or tobacco use		0	O		C			1B. Proper hot holdir	• '		0	0
•	•	0		0	2-2C. No discharge from eyes, nose, and mouth		0	0		C	0 0		1C. Proper cooling ti			0	0
•	•	0			2-2D. Adequate handwashing facilities supplied & accessible	е	0	0		C	0		1D. Time as a public cords	health contro	l; procedures and	0	0
3 11	_	UT	NA	NO	Approved Source		_	oints								4 pc	oints
	_	0	0		3-1A. Food obtained from approved source, parasite destru	ction	0	0			0 0	0 6-	2. Proper date marki	ng and dispos	sition	0	0
0	-	0	0	•	3-1B. Food received at proper temperature 3-1C. Food in good condition, safe, and unadulterated		0	0	7	7 IN	OUTN	A NO	Highly Su	sceptible Po	pulations	9 pc	oints
4 11	-	UT	NA	NO	Protection from Contamination		+	oints		C	0	7-	1. Pasteurized foods	used; Prohib	ited foods not offered	0	0
	•	0	0		4-1A. Food separated and protected		0	0	8					Chemicals			oints
	•	0			4-1B. Proper disposition of contaminated food; returned foo	d or	0	0		C		+	2A. Food additives; a	• • • • • • • • • • • • • • • • • • • •	,	0	0
H	unused food not re-served						oints	9	II G	O OUT N.		2B. Toxic substances	<u>' ' ' '                              </u>		0	0	
	•	0	0		4-2A. Food stored covered		0	0		-	+ +	+++	2. Compliance with v				oints
	O O 4-2B. Food-contact surfaces; cleaned & sanitized					0	0		C	0		ACCP plan	anance, spec	dalized process and	0	0	
											TICES						
Comp	lia				mbered item OUT, if not in compliance. For items marked OUT,	cos					item as a e Status	pplicable	. R = Repeat Violation	of the same o	code provision = 1 poin		R
10	Ol				Safe Food and Water, Food Identification	3 pc	oints	14	÷	DUT			Proper Use	of Utensils		-	ooint
	(	_			eurized eggs used where required	0	0		-				sils; properly stored			0	0
	0	_			er and ice from approved source ance obtained for specialized processing methods	0	0		-	-			uipment and linens;   single-service articles			0	0
		1			d properly labeled; original container; required records			H	-				d properly	s, property sic	nea, usea	0	0
	(	a			shellstock tags	0	0	15	-+	DUT			Utensils, Equipme	ent and Vend	ing		point
11	Ol	1	1Δ	Pro	Food Temperature Control er cooling methods used; adequate equipment for		oints	1	T		15A. Foo		onfood-contact surfa	ces cleanable	e, properly designed,	0	0
	(				ure control	0	0		-				ng facilities; installed,	maintained,	used; test strips	0	0
	(	-			t food properly cooked for hot holding	0	0			-			ntact surfaces clean		•	0	0
	(	-			roved thawing methods used	0	0	16	_	TUC			Water, Plumbin	_			oints
12	OI	IΤ	ID.	me	Prevention of Food Contamination	<b>0</b>	oints		-	_			d water available; ad stalled; proper backf		ure	0	0
12	,	, 1	2A.	Cor	tamination prevented during food preparation, storage		Т	1	-	-			d waste water proper			o	O
	(	c	lispl	ay		0	0	17	_	DUT				Physical Facilities			point
		-			conal cleanliness	•	0		-	_			es; properly construc			0	0
	(	_		_	ing cloths; properly used and stored thing fruits and vegetables	0	0		-	_			fuse properly dispose cilities installed, main			0	0
13	Ol	-	ـں.	••α	Postings and Compliance with Clean Air Act		oint	1	_ <u> </u>				entilation and lighting			0	0
	(	-	3A.	Pos	red: Permit/Inspection/Choking Poster/Handwashing	О	0	18	_	DUT			Pest and Anir				oints
	(	) 1	3B.	Cor	npliance with Georgia Smoke Free Air Act	0	0			•	18. Insec	ts, rode	nts, and animals not	present		•	•
Perco	n i	n C	harr	ام (c	ignature)			(Dri	nt)	Jen	nifer			<b>Date:</b> 06/19			
								(1.11)				V=0 F	) No.				
ınspe	CTO	ır (S	ign	atur	e) Kacy Hurlbert				F	roilc	w-up:	YES (	NO 🛡	Follow-up D	aie:		

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## **Food Establishment Inspection Report Addendum**

Violations cited in this report must be corrected within the time frames specified below, or as stated in the Georgia Department of Human Resources Rules and Regulations Food Service Chapter 290-5-14, Rule .10 subsections (2)(i) and (j).

Establishment Permit # 146-739 Date 06/19/2015

Address CEDAR LN City/State CHICKAMAUGA GA 30707

TEMPERATURE OBSERVATIONS

Item/LocationTempItem/LocationTempItem/LocationTempOther PHF Sour cream / Refrigerator,39.0 ° FOther PHF Italian dressing / Refrigerator,40.0 ° FOther PHF Margarine / Refrigerator,40.0 ° F

Other PHF Pepperoni pizza / Final Cook Temp.,

Item Number

## **OBSERVATIONS AND CORRECTIVE ACTIONS**

2-1C Violation of Code: [.04(4)(a)1&2] Observed food employee handling cooked pizza/slicing pizza with bare hands. /CA: PIC made employee put on gloves. Corrected On-Site. New Violation.

12B Violation of Code: [.03(5)(i)] Observed employee with long beard handling and preparing food without a beard net. /CA: Employee needs beard net to prepare food. Corrected On-Site. New Violation.

Violation of Code: [.07(5)(k)] Observed excessive amount of flies in the kitchen. /CA: Suggested that PIC get a professional pest control company to come out and evaluate the situation. Corrected On-Site. Repeat Violation.

Remarks

Person in Charge (Signature) Date: 06/19/2015

Inspector (Signature) Kacy Hurlbert Date: 06/19/2015