Food Facility Inspection Report 6/20/15, 12:59 PM

GEORGIA DEPARTMENT OF PUBLIC HEALTH Food Service Establishment Inspection Report									CURRENT	SCORE	CURRENT G	RAD	E					
Establishment Name: Pie Slingers Pizzeria																		
A LL Lucy CC Fieldstone Village DD CTE A																		
_	Georgia Department of Public Health Address: 56 Fieldstone Village DR STE A City: ROCK SPRING Time In: 11 : 55 AM Time Out: 12 : 25 PM																	
								: <u> </u>	2		25	- PN	Л					
Insp							17)	1 1 (0		Data	9				
Purpose of Inspection: Construction/Preoperational ○ Initial ○ Routine ■ Follow-up ○ Temporary ○								99				03/18/15			U		7	
					2 3 Permit#: FSP-146-000008		_	Prior S	Score	+	Grade	+	Date					
Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and measures to control the introduction of Prevention as contributing factors in foodborne illness outbreaks. Public pathogens, chemicals, and physical objetealth Interventions are control measures to prevent illness or injury. Into foods.							of	9	8	3 A		12	/08/14	SCORING AND G	PADING: A	=90-100 B=80-89 C=70-7	70 11-	-60
					EOODBOBNE II I NESS BISK E	ΛC	TOF	RS A	ND	Pl	JBLIC	HE	ALTH	L		=90-100 B=60-69 C=70-	/9 U:	109
					(Mark designated compliance staus (IN, OUT, NA, or NO) for e					For	items ma	arked	OUT, m	ark COS or R for e	ach item as a			
Comp	lia			_	iance OUT=not in compliance NO=not observed NA=not app	licable	cos				i-site duri Iiance S			H=repeat violati	on of the same	e code provision=2 points		R
<u> </u>	_		NA	_	Supervision		1	oints	Н	T.	1 1	Т	0-	oking and Rehe	ating of Pote	entially Hazardous		1
	T				1-2. Person in charge present, demonstrates knowledge, an	nd			5		OUTN		U	Foods, (Consumer A	dvisory	9 pc	oints
	1	0			performs duties		0	0						Proper cooking ti			0	0
2 1	N C	DUT	NA	NO	Employee Health, Good Hygenic Practices, Preventir Contamination by Hands	ng	9 pc	oints		O	0 0	0	5-1B.	Proper reheating	procedures	for 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	0		О	0	•		onsumer advisor	y provided fo	or raw and	0	0
•	•	0	0	0	2-1C. No bare hand contact with ready-to-eat foods or approalternate method properly followed	oved	0	0	6	IN	OUTN	IA N	ы			lous Foods, Date	9 pc	oints
							_	oints			0 0	0	6-1A.	Proper cold holdi			0	0
•	_	0			2-2A. Management awareness; policy present; reporting		0	0		0		_	_	Proper hot holdin	• •		o	0
9	_	0			2-2B. Proper eating, tasting, drinking, or tobacco use		0	0		0				Proper cooling tir	• '		o	0
9	4	0			2-2C. No discharge from eyes, nose, and mouth	_	0	0					-			ol; procedures and		
3		O DUT	NA	NO	2-2D. Adequate handwashing facilities supplied & accessibl Approved Source	е	0	O oints		О	0		record			., p	0	0
3 11	4	0	NA	NO	3-1A. Food obtained from approved source, parasite destru	ction	9 pc	0									4 pc	oints
0	_	o	0	•	3-1B. Food received at proper temperature	Clion	o	0		•				roper date markir	ng and dispo	sition	0	0
ì	-	ō	Ŭ	•	3-1C. Food in good condition, safe, and unadulterated		0	0	7	4		IA N	0	Highly Sus	sceptible Po	pulations	9 pc	oints
4 11	V C	DUT	NA	NO	Protection from Contamination		1	oints		О		_	_	asteurized foods	used; Prohib	pited 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 food	d or	0	0		О		•		Food additives; a	• •	,	0	0
Щ	unused food not re-served							oints			0					ntified, stored, used	0	0
	•	0	0		4-2A. Food stored covered		0	0	9	+	1 1	IAN	-	Conformance v			4 pc	oints
0	_		0		4-2B. Food-contact surfaces; cleaned & sanitized		•	Ō		O	0	•		ompiiance with v P plan	ariance, spe	cialized process and	0	0
					GOO	D F	RET		PR		TICES	3						
	1:-				mbered item OUT, if not in compliance. For items marked OUT,								able. R :	= Repeat Violation	of the same	code provision = 1 poin		
Comp 10	OI		Sta	ius	Safe Food and Water, Food Identification	COS 3 nr	R	14	- -	UT	e Status	•		Proper Use of	of Utensils		+	R
	₩.		10A.	Pas	teurized eggs used where required	0	0		_	_	14A. In-ւ	use u	ıtensils;	properly stored			0	0
		_			er and ice from approved source	0	0								properly store	ed, dried, handled	0	0
	(_			ance obtained for specialized processing methods	0	0			_		_		le-service articles	; properly st	ored, used	0	0
	(d properly labeled; original container; required records shellstock tags	0	0	4.	-		14D. Glo	oves			mh and M-	dia a	0	0
11	Ol	-+			Food Temperature Control	3 pc	oints	15	1	UT	15A For	od ar		ensils, Equipme		e, properly designed,		oint
	(per cooling methods used; adequate equipment for	0	0				construc				oo oloanabii	o, property designed,	0	0
		·			ure control t food properly cooked for hot holding	0	0		-	_				acilities; installed,	maintained,	used; test strips	0	0
		_			roved thawing methods used	0	0	10	_	_	15C. No	nfoo	d-contac	t surfaces clean	a and Mask	-	0	0
	-	_			rmometers provided and accurate	ō	0	16	_	O	16A Hot	t and	cold wa	Water, Plumbin ater available; ade	_		2 pc	oints
12	OI	UT			Prevention of Food Contamination	3 pc			-	_				ed; proper backfl		idi 0	Ö	Ö
	-	1	12A.	Cor	tamination prevented during food preparation, storage	0	0			_			•	aste water proper			0	0
	display					17	_	UT	_		Physical F		•		_	oint		
		-			sonal cleanliness	0	0		-	_				oroperly construc		-	0	0
		_		_	ing cloths; properly used and stored	0	0			_		_ ĭ		properly dispose	-		0	0
13								_		•		es installed, maint ation and lighting			0	0		
	Η.	_	13A	Pos	ted: Permit/Inspection/Choking Poster/Handwashing	0	0	18	_	UT	. , D. Au	Jqua	VOIIIII	Pest and Anir				oints
	-	_			ppliance with Georgia Smoke Free Air Act	ō	0		-	_	18. Insed	cts, r	odents.	and animals not			0	0
	-							·					,					
Perso	n i	n C	harç	je (S	ignature)			(Pri	nt)	Jen	nifer				Date: 06/1	0/2015		
Inspe	Inspector (Signature) Ashlee Grimm Follow-up: YES O NO Follow-up Date:																	

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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
Pie Slingers PizzeriaPermit #
FSP-146-000008Date
06/10/2015Address
56 FIELDSTONE VILLAGE DR STE ACity/State
ROCK SPRING GAZipcode
30739

TEMPERATURE OBSERVATIONS

Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Other PHF Tomatoes / Cold-Hold Unit, prep cooler	39.0 ° F	Other PHF Marinara Sauce / Cold-Hold Unit, prep cooler	39.0 ° F	Other Meat Pepperoni / Cold-Hold Unit, prep cooler	
Beef Ground Beef / Cold-Hold Unit, prep cooler		Other PHF Salsa / Cold-Hold Unit, prep cooler	38.0 ° F	Other PHF Grape Tomatoes / Cold-Hold Unit, prep cooler	36.0 ° F
Other PHF Marinara Sauce / Walk-In Cooler,	37.0 ° F	Other PHF Pimento Cheese / Walk-In Cooler,	36.0 ° F	Other PHF Ranch Dressing / Walk-In Cooler,	36.0 ° F

Item Number OBSERVATIONS AND CORRECTIVE ACTIONS

4-2B Violation of Code: [.05(7)(a)1] Observed food debris build-up inside microwave and on can opener. /CA: Pic will clean and sanitize. Corrected On-Site. New Violation.

Remarks

Person in Charge (Signature)

Date: 06/10/2015

Inspector (Signature) Ashlee Grimm

Date: 06/10/2015