

PIKE COUNTY HEALTH DEPARTMENT  
 OFFICE: 573-324-2111 FAX: 573-324-5517  
**FOOD ESTABLISHMENT REPORT**

DATE: 10/21/19  
 PAGE 1 OF 2

Based on an inspection this day, the items noted below identify noncompliance in operations or facilities which must be corrected by the next routine inspection, or such shorter period of time as may be specified in writing by the regulatory authority. Failure to comply with any time limits for corrections specified in this notice may result in cessation of your food operations.

ESTABLISHMENT NAME: *Abel's Quick Shop #21* OWNER: \_\_\_\_\_ PERSON IN CHARGE: \_\_\_\_\_  
 ADDRESS: *3508 Georgia St.* ESTABLISHMENT LICENSE NO.: \_\_\_\_\_ COUNTY: *Pike* REGION: \_\_\_\_\_  
 CITY/ZIP CODE: *Terre Haute 43003* TELEPHONE NUMBER: *573-754-6185* FAX NUMBER: \_\_\_\_\_ P.H. PRIORITY:  H  M  L

ESTABLISHMENT TYPE  
 Bakery  C. Store  Caterer  Deli  Grocery Store  Institution  Mobile  
 Restaurant  School  Senior Center  Summer F.P.  Tavern  Temporary

SEWAGE DISPOSAL:  Public  Private  
 WATER SUPPLY:  Community  Non-Community  Private  
 Date Sampled: \_\_\_\_\_ Result: \_\_\_\_\_  
 FROZEN DESSERT:  Approved  Disapproved  Not Applicable  
 License Number: \_\_\_\_\_

PURPOSE  
 Pre-Opening  Follow-Up  Routine  Complaint  Other

FOOD PRODUCT	TEMP	LOCATION	FOOD PRODUCT	TEMP	LOCATION
<i>mer dressing</i>	<i>27.9°</i>	<i>white fridge kitchen</i>	<i>sandwich</i>	<i>35.7°</i>	<i>Abel's cooler</i>
<i>sausage</i>	<i>38.1°</i>	<i>prep cooler</i>	<i>sandwich</i>	<i>36.5°</i>	<i>deli express cooler</i>
<i>hot dogs</i>	<i>35.2°</i>	<i>Reach in kitchen</i>	<i>Roller dog</i>	<i>150°</i>	<i>hot holding</i>
<i>milk</i>	<i>30°</i>	<i>small cooler near drinks</i>	<i>Pizza/hot sand</i>	<i>155°</i>	<i>hot holding</i>
<i>milk</i>	<i>45°</i>	<i>walk in</i>			

**RISK FACTORS AND INTERVENTIONS**

COMPLIANCE	DEMONSTRATION OF KNOWLEDGE	CODE REF.	R	COS	COMPLIANCE	POTENTIALLY HAZARDOUS FOODS TIME & TEMPERATURE	CODE REF.	R	COS
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Designated PIC, demonstration of knowledge and PIC duties	2-101.11 2-102.11 2-103.11			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooking, time and temperature	3-401.11-13		
<b>EMPLOYEE HEALTH</b>									
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Management awareness, policy present. Proper use of reporting restrictions and exclusion	2-201.11-15			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A	Reheating for hot holding	3-403.11		
<b>GOOD HYGIENIC PRACTICES</b>									
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	Eating, tasting, drinking or tobacco use	2-401.11			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A	Cooling	3-501.14		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	Discharges from eyes, nose, or mouth	2-401.12			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A	Parasite destruction	3-402.11		
<b>CONTROL OF HANDS AS A VEHICLE OF CONTAMINATION</b>									
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O	Clean condition, cleaning procedure, when to wash, and where to wash	2-301.11-12 2-301.14-15			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input type="checkbox"/> N/A	Hot holding	3-501.16		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O	Bare hand contact with ready-to-eat foods	3-301.11			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Cold holding	3-501.16		
<b>APPROVED SOURCE</b>									
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Food obtained from approved source	3-201.11-17			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Date marking and disposition	3-501.17 3-501.18		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O	Receiving temperature / condition	3-202.11-19			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Time as a public health control (procedures / records)	3-501.19		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Records: shellstock tags, parasite destruction, required HACCP plan	3-202.18 3-203.12 3-402.11-12			<b>CONSUMER ADVISORY</b>				
<b>PROTECTION FROM CONTAMINATION</b>									
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Food segregated, separated and protected	3-302.11			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Consumer advisory for raw or undercooked food	3-603.11		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Food contact surfaces cleaned & sanitized; cleaning frequency	4-601.11A 4-602.11			<b>HIGHLY SUSCEPTIBLE POPULATIONS</b>				
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Food display, consumer self-service, returned food / re-service of food	3-306.11-14			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered	3-801.11		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Preventing contamination from equipment	3-304.11			<b>CHEMICAL</b>				
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Discarding / reconditioning unsafe food	3-701.11			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored and used	7-1, 7-2, 7-3		
<b>CONFORMANCE WITH APPROVED PROCEDURES</b>									
IN = In Compliance      COS = Corrected on Site OUT = Not In Compliance      R = Repeat N/A = not applicable      N/O = Not Observed									

RECEIVED BY (PERSON IN CHARGE/TITLE): *DENEO BURSE #21* DATE: *10/21/19*

INSPECTOR: *Stefanie Davis* EPHS NO.: \_\_\_\_\_ FOLLOW-UP:  YES  NO DATE OF FOLLOW-UP: *after proof of walk in repair*

**FOOD ESTABLISHMENT INSPECTION REPORT**

ESTABLISHMENT NAME <i>Abel's Quik Shop #4</i>	ADDRESS <i>3508 Georgia St.</i>	CITY <i>Louisiana</i>
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FOOD CODE REFERENCES	CRITICAL ITEMS			
2 MANAGEMENT/PERSONNEL	CODE REF.	DESCRIPTION: These items relate directly to factors which lead to foodborne illness. These items <b>MUST RECEIVE IMMEDIATE ACTION</b> within 72 hours or as stated.	CORRECT BY (DATE)	INIT.
2-1 Supervision 2-2 Employee Health 2-3 Personal Cleanliness 2-4 Hygienic Practices		<i>- hot shot bug spray not allowed in Food Establishment -</i>		
<b>3 FOOD</b>  3-1 Characteristics 3-2 Sources, Containers & Records 3-3 Protection from Contamination 3-4 Cooking, Parasite Destruction, Reheating 3-5 Limiting Growth of Organisms 3-6 Food Presentation & Labeling 3-7 Disposition of Contaminated Food 3-8 Highly Susceptible Populations		<i>- milk in walk in cooler @ 45°-48°F all food/drink items must be stored/held at 41° or below for food safety - taken off shelves - needs to be discarded.            * No food items to be kept in this location until cooler holds temp below 41° *            please contact Stefanie Davis at 573-470-9985 you may call and/or text a pic of thermometer</i>		
<b>4 EQUIP. UTENSILS &amp; LINENS</b>  4-1 Characteristics & Use Limitations 4-2 Design & Construction 4-3 Numbers & Capacities 4-4 Location & Installation 4-5 Maintenance & Operation 4-6 Cleaning of Equipment 4-7 Sanitization 4-8 Laundry 4-9 Protection of Clean Items				

NON-CRITICAL ITEMS				
	CODE REF.	DESCRIPTION: These items relate to maintenance of food operations and cleanliness. These items are to be corrected by the next regular inspection or as stated.	CORRECT BY (DATE)	INIT.
<b>5 WATER, PLUMBING &amp; WASTE</b>  5-1 Water Source, Quality, Capacity 5-2 Plumbing 5-3 Mobile Water Tanks 5-4 Sewage & Rainwater 5-5 Refuse & Recyclables		<i>- kitchen ceiling/hooks have dust &amp; debris on them, need cleaning            - all items removed from their original containers need 7-day discard date - unless being used within 24 hours</i>		
<b>6 PHYSICAL FACILITIES</b>  6-1 Materials for Construction 6-2 Design, Construction, Installation 6-3 Numbers & Capacities 6-4 Location & Placement 6-5 Maintenance & Operation		<i>- No cardboard allowed in storage - on cooler shelves, under soda concentrate boxes soda concentrate leaking must be repaired            - No towels to be used in drying - dishes must air dry - can not be on towels</i>		
<b>7 POISONOUS OR TOXIC ITEMS</b>  7-1 Labeling & Identification 7-2 Supplies & Applications 7-3 Storage & Display		<i>- frappe, slushy machine and soda nozzles must be <del>clean</del> cleaned daily            - seal on big freezer needs repair</i>		

**EDUCATION PROVIDED OR COMMENTS**  
*New QR code shared. Discussed keeping a temperature log.*

RECEIVED BY (PERSON IN CHARGE/TITLE) <i>DEINED BURSE #21</i>	DATE <i>10/22/19</i>
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INSPECTOR <i>[Signature]</i> Stefanie Davis	EPHS NO.	FOLLOW-UP <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DATE OF FOLLOW-UP <i>after proof of walk in repair</i>
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