

Food Establishment Inspection Report

Local Health Department Name and Address Cumberland County Health Department PO Box 130 200 S. Indiana St. Toledo, IL 62468		No. of Risk Factor/Intervention Violations 4	Date 12-11-23
Establishment Villa on 45		License/Permit # 101	No. of Repeat Risk Factor/Intervention Violations 1
Street Address 588 Oak Ave		Permit Holder Frank Miller	Risk Category 1
City/State Neoga, IL		ZIP Code 62447	Purpose of Inspection Routine Inspection

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

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

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance Status		COS	R
Supervision			
1	In		
Person in charge present, demonstrates knowledge, and performs duties			
2	In		
Certified Food Protection Manager (CFPM)			
Employee Health			
3	In		
Management, food employee and conditional employee; knowledge, responsibilities and reporting			
4	In		
Proper use of restriction and exclusion			
5	In		
Procedures for responding to vomiting and diarrheal events			
Good Hygienic Practices			
6	In		
Proper eating, tasting, drinking, or tobacco use			
7	In		
No discharge from eyes, nose, and mouth			
Preventing Contamination by Hands			
8	In		
Hands clean and properly washed			
9	In		
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			
10	In OUT		
Adequate handwashing sinks properly supplied and accessible			
Approved Source			
11	In		
Food obtained from approved source			
12	In		
Food received at proper temperature			
13	In		
Food in good condition, safe, and unadulterated			
14	In		
Required records available: shellstock tags, parasite destruction			
Protection from Contamination			
15	In		
Food separated and protected			
16	In		
Food-contact surfaces; cleaned and sanitized			
17	In		
Proper disposition of returned, previously served, reconditioned and unsafe food			
Time/Temperature Control for Safety			
18	N/A		
Proper cooking time and temperatures			
19	N/A		
Proper reheating procedures for hot holding			
20	N/A		
Proper cooling time and temperature			
21	N/A		
Proper hot holding temperatures			
22	In		
Proper cold holding temperatures			
23	N/A		
Proper date marking and disposition			
24	N/A		
Time as a Public Health Control; procedures & records			
Consumer Advisory			
25	N/A		
Consumer advisory provided for raw/undercooked food			
Highly Susceptible Populations			
26	N/A		
Pasteurized foods used; prohibited foods not offered			
Food/Color Additives and Toxic Substances			
27	N/A		
Food additives: approved and properly used			
28	In		
Toxic substances properly identified, stored, and used			
Conformance with Approved Procedures			
29	N/A		
Compliance with variance/specialized process/HACCP			

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.
 Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R **COS**=corrected on-site during inspection **R**=repeat violation

Compliance Status		COS	R
Safe Food and Water			
30			
Pasteurized eggs used where required			
31			
Water and ice from approved source			
32			
Variance obtained for specialized processing methods			
Food Temperature Control			
33			
Proper cooling methods used; adequate equipment for temperature control			
34			
Plant food properly cooked for hot holding			
35			
Approved thawing methods used			
36			
Thermometers provided & accurate			
Food Identification			
37			
Food properly labeled; original container			
Prevention of Food Contamination			
38			
Insects, rodents, and animals not present			
39			
Contamination prevented during food preparation, storage and display			
40			
Personal cleanliness			
41			
Wiping cloths: properly used and stored			
42			
Washing fruits and vegetables			
Proper Use of Utensils			
43			
In-use utensils: properly stored			
44			
Utensils, equipment & linens: properly stored, dried, & handled			
45			
Single-use/single-service articles: properly stored and used			
46			
Gloves used properly			
Utensils, Equipment and Vending			
47	X		
Food and non-food contact surfaces cleanable, properly designed, constructed, and used			
48			
Warewashing facilities: installed, maintained, & used; test strips			
49	X		
Non-food contact surfaces clean			
Physical Facilities			
50			
Hot and cold water available; adequate pressure			
51			
Plumbing installed; proper backflow devices			
52			
Sewage and waste water properly disposed			
53			
Toilet facilities: properly constructed, supplied, & cleaned			
54			
Garbage & refuse properly disposed; facilities maintained			
55			
Physical facilities installed, maintained, and clean			
56	X		
Adequate ventilation and lighting; designated areas used			
Employee Training			
57			
All food employees have food handler training			
58			
Allergen training as required			

Food Establishment Inspection Report

Establishment: Villa on 45

Establishment #: 101

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Bleach, Dishwasher PPM: 100 Heat: _____

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Cooler		Flip Top Onion	37	Tall Freezer	
Milk	38	Cooler	36	Carrots	~7
Carrots	37				
Freezer		Flip Top 2			
French Fries	-4	Lettuce	37		
		Cheese	41		
Deep Fryer	305				
Grill Top	265	Walk in Freezer			
		Steak	~7		

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
47	4-601.4 4-202.15 Can Opener Dirty
49	4-601.11 Chest Freezer Seals Mold
47	4-204.17 Ice Machine Mold on Ice Shred
47	4-601.4 Ice Scoop Improperly Stored COS
10	6-307.14 Light in Vent Hood Off
49	4-601.11 Prep Freezer Mold on Seal
49	4-601.11 Walk in Freezer Door and Seal Dirty
10	6-301.14 NO Handwash Sign Mens Bathroom (SDA) Repeat

CFPM Verification (name, expiration date, ID#):

CFPM			
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HACCP Topic: Sanitizer

[Signature] 12-11-23
 Person In Charge (Signature) Date

[Signature] Follow-up: Yes No (Check one) Follow-up Date: 12-16-23
 Inspector (Signature)

[Signature]