|        |   |  |        |             |  | Reta  |  |   |              |                 | ent   | In   | she  | ecu  | tion Report<br>First aid kit<br>Allergy policy<br>Vomit clean up<br>Employee health  | 1                 |  |
|--------|---|--|--------|-------------|--|---|--|---|--------------|-----------------|---|--|--|--|--|-------------------|--|
|        | 1te:<br>17  | 712  | 202    | 20          | Time in: <b>9:20</b>   | Time out: <b>10:13</b>  |  | License/P   |              |                 |   |  |  |  | Est. Type Risk Category Page 1   | of <u>2</u>       |  |
| Pı     | irpo  | se of  | f Ins  | spec        | tion: 🖌 1-Routine  | 2-Follow U  | р  | 3-Complai   | int          | _               | Inve  | stiga  | tior                                       | 1  | 5-CO/Construction 6-Other TOTAL/S  | CORE              |  |
|        | tabli<br>nn   |  |        |             |  |   |  | ct/Owner N<br>mes Da  |              |                 |   |  |  |  | * Number of Repeat Violations:      ✓ Number of Violations COS:  |                   |  |
| Ph     | ysic  | al A   | ddre   | ess:        |  |   | st contro  | ol :  |              | Ho<br>n/a       |   |  |  | reas<br>rry'   | ise trap : Follow-up: Yes 6/94   | -/A               |  |
|        |   |  |        |             |  |   | <b>D</b> = not   | t observed NA   |              | <b>x</b> = n    | ot ap   | applicable $COS = corrected on site R = repeat violation W-V$                        | Watch                                      |  |  |                   |  |
| Ma     | urk tl  | he ap  | prop   | oriate      | points in the OUT box for  | each numbered it  | tem  | Mark .  |              |                 |   |  | -  |  | box for IN, NO, NA, COS Mark an $\times$ in appropriate box for R<br>ctive Action not to exceed 3 days   |                   |  |
| 0      | mpli<br>I   | Ν  | Ν      | С           | IS C Time and Temperature for Each Sofety  |   |  |   |              |                 | Compl   | Ν  | Ν  | С  |  | R                 |  |
| U<br>T | N   | 0  | A      | s           | (E deman Eshandait)  |   |  |   |              | U<br>T          |   | 0  | A  | 0<br>S   |  |                   |  |
|        | ~   |  |        |             |  |   |  |   | ~            |                 |   |  | knowledge, responsibilities, and reporting |  |  |                   |  |
|        | ~   | 2. Proper Cold Holding temperature(41°F/ 45°F) |        |             |  |   |  | ~   |              |                 |   | 13. Proper use of restriction and exclusion; No discharge from eyes, nose, and mouth |  |  |  |                   |  |
| _      |   | 3. Proper Hot Holding temperature(135°F)       |        |             |  |   |  |   |              |                 |   | Preventing Contamination by Hands  |  |  |  |                   |  |
|        |   |  | v      |             | 4. Proper cooking time a   | and temperature   | :  |   |              | -               | ~   | 14. Hands cleaned and properly washed/ Gloves used properly                          |  |  |  |                   |  |
|        |   |  | -      |             | 5. Proper reheating proc   | cedure for hot ho   | olding (16   | 55°F in 2   |              | -               | ~   |  |  | -  | 15. No bare hand contact with ready to eat foods or approved   |                   |  |
|        |   |  | ~      |             | Hours)<br>6. Time as a Public Hea  | Ith Control: proc   | coduros  | & records   |              |                 |   |  |  |  | alternate method properly followed (APPROVED Y. N.   | ,                 |  |
|        | ~   |  |        |             | o. This as a rubic rica  |   |  | a records   |              |                 |   |  | - 1  |  | Highly Susceptible Populations           16. Pasteurized foods used; prohibited food not offered   |                   |  |
|        |   |  |        |             | Арј  | proved Source   |  |   |              |                 | ~   | Pasteurized eggs used when required  |  |  |  |                   |  |
|        | <ul> <li>7. Food and ice obtained from approved source; Food in good condition, safe, and unadulterated; parasite destruction</li> <li>Sysco/Nogales</li> </ul> |  |        |             |  |   |  |   |              |                 | Chemicals   |  |  |  |  |                   |  |
|        | ~   |  |        |             | 8. Food Received at pro  | oper temperature  | 1  |   |              |                 | ~   |  |  |  | 17. Food additives; approved and properly stored; Washing Fru<br>& Vegetables  | ts                |  |
|        |   |  |        |             | check at rece  | -   | nation   |   |              | 3               |   |  |  |  | water only           18. Toxic substances properly identified, stored and used   |                   |  |
|        | Protection from Contamination           9. Food Separated & protected, prevented during food  |  |        |             |  |   |  |   |              |                 |   |  |  |  |  |                   |  |
|        | ~   |  |        |             | 10. Food contact surface   |   |  | ned and   |              | Water/ Plumbing |   |  |  | 19. Water from approved source; Plumbing installed; proper |  |                   |  |
|        | ~   |  |        |             | Sanitized at <u>100</u> j  | ppm/temperature   | e  |   |              |                 | ~   |  |  |  | backflow device  |                   |  |
|        | ~   |  |        |             | 11. Proper disposition o<br>reconditioned disca  | arded   | iously ser   |   |              |                 | ~   |  |  |  | 20. Approved Sewage/Wastewater Disposal System, proper<br>disposal   |                   |  |
| 0      |   |  |        |             | D!   |   | 4 T4 .   |   | A )          |                 | · •   | n  | •  | a  |  |                   |  |
| U U    | I<br>N  | N  | NA     | C           |  |   |  |   | ints) v<br>R | 0               | I   | N  | Ν  | С  |  | R                 |  |
| U<br>T | I<br>N  | N<br>O   | N<br>A | C<br>O<br>S | <b>Demonstration</b><br>21. Person in charge pro-  | of Knowledge/   | <b>Personn</b> etion of k  | nel   |              |                 | I<br>N  | _  |  |  | Food Temperature Control/ Identification   | R                 |  |
|        | I<br>N  | N<br>O   | N<br>A | 0           | Demonstration<br>21. Person in charge pre<br>and perform duties/ Cer<br>1  | of Knowledge/<br>esent, demonstra<br>rtified Food Man   | <b>Personn</b><br>ation of k<br>nager/ Po  | nel<br>nowledge,<br>sted  |              | 0<br>U          | I<br>N  | N  | Ν  | C<br>O   | Food Temperature Control/ Identification           27. Proper cooling method used; Equipment Adequate to Maintain Product Temperature  | R                 |  |
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| Received by:<br>(signature) see below  | see below        | Title: Person In Charge/ Owner |
|--|------------------|--------------------------------|
| Inspected by:<br>(signature) See below | Print: see below | Business Email:                |

Form EH-06 (Revised 09-2015)

| Establishment Name:<br>Jimmy John's   | Physical A <b>2785</b>  | <sup>ddress:</sup><br>Ridge Rd                         | City/State:<br>Rockwa |           | License/Permit #<br>FS-9292 | Page <u>2</u> of <u>2</u> |  |  |  |  |  |
|---|---|--|-----------------------|-----------|-----------------------------|---------------------------|--|--|--|--|--|
|   | 2705  | TEMPERATURE OBSERV                                     |                       | aii, 17   | 10-5252                     |                           |  |  |  |  |  |
| Item/Location   | Temp F  | Item/Location  | Temp F                | Item/Loca | tion                        | Temp F                    |  |  |  |  |  |
| cold table 2/cut tomatoes   | 41  |  |                       |           |                             |                           |  |  |  |  |  |
| roast beef/Turkey   | 41/41   |  |                       |           |                             |                           |  |  |  |  |  |
| under/roast beef/turkey   | 41/41   |  |                       |           |                             |                           |  |  |  |  |  |
| cold table 1/roast beef   | 41  |  |                       |           |                             |                           |  |  |  |  |  |
| turkey  | 41  |  |                       |           |                             |                           |  |  |  |  |  |
| under/cut tomatoes  | 41  |  |                       |           |                             |                           |  |  |  |  |  |
| WIC/ham   | 27  |  |                       |           |                             |                           |  |  |  |  |  |
| WIF ambient   | -7  |  |                       |           |                             |                           |  |  |  |  |  |
| Item AN INSPECTION OF YOUR FS   |   | SERVATIONS AND CORRECT<br>NT HAS BEEN MADE. YOUR ATTEL |                       |           | E CONDITIONS ORSE           | RVED AND                  |  |  |  |  |  |
| Number NOTED BELOW:   | 1 ADLISHME  | AT HAS DEEN MADE, TOUR ATTE                            | ATTOL IS DIKE         | 10 10 11  | TE COMPTITIONS ODSEI        |                           |  |  |  |  |  |
| W Need current permi<br>Hand sink 107   | t. need   | to contact Vicky Morto                                 | on with cit           | y to get  | 2020 permit                 |                           |  |  |  |  |  |
|   | to 100 p  | pm bleach. Use strips                                  | to oncur              | o corroc  | st nom                      |                           |  |  |  |  |  |
| 3 comp sink 117   |   |  |                       |           | , ppm.                      |                           |  |  |  |  |  |
| 37 Condensation in W  | IF/prote  | ct food under  |                       |           |                             |                           |  |  |  |  |  |
|   | -   | brage low and separate                                 | ;                     |           |                             |                           |  |  |  |  |  |
| 32 Sand/bleach cutting  |   |  |                       |           |                             |                           |  |  |  |  |  |
| RR sinks 100  |   |  |                       |           |                             |                           |  |  |  |  |  |
| Soda/tea nozzles V  | /RS dai   | У  |                       |           |                             |                           |  |  |  |  |  |
| W Store personal item   | is low ar   | nd separate  |                       |           |                             |                           |  |  |  |  |  |
|   |   |  |                       |           |                             |                           |  |  |  |  |  |
|   |   |  |                       |           |                             |                           |  |  |  |  |  |
|   |   |  |                       |           |                             |                           |  |  |  |  |  |
|   |   |  |                       |           |                             |                           |  |  |  |  |  |
|   |   |  |                       |           |                             |                           |  |  |  |  |  |
|   |   |  |                       |           |                             |                           |  |  |  |  |  |
|   |   |  |                       |           |                             |                           |  |  |  |  |  |
|   |   |  |                       |           |                             |                           |  |  |  |  |  |
| Covid-19  | Covid-19  |  |                       |           |                             |                           |  |  |  |  |  |
| Masks, gloves worn by all employees<br>Social distancing dine in at 50% per governor's orders |   |  |                       |           |                             |                           |  |  |  |  |  |
|   |   |  |                       |           |                             |                           |  |  | Testing before returning to work if showing symptoms |  |  |
|   | Self-monitoring of employee health  |  |                       |           |                             |                           |  |  |  |  |  |
|   | No self serve chips, condiments, cups, cookies.   |  |                       |           |                             |                           |  |  |  |  |  |
|   | 30 minutes to an hour sanitizing contact surfaces. Sanitizing always after dine in tables after each customer |  |                       |           |                             |                           |  |  |  |  |  |
|   |   |  |                       |           |                             |                           |  |  |  |  |  |
| Received by:<br>(signature) Denmers Darris  |   | Deame  | s Da                  | vis       | Title: Person In Charge     | e/ Owner                  |  |  |  |  |  |
| (signature)<br>Deames Davis<br>Inspected by:<br>(signature)<br>Christy C                      |   | Print:   |                       |           |                             |                           |  |  |  |  |  |
| Form EH-06 (Revised 09-2015)  | orte  | 😵 📔 Christy  | Cort                  | ez        | Samples: Y N                | # collected               |  |  |  |  |  |