

Food Establishment Inspection Report



FOR OFFICE USE ONLY

EMAIL

NAME OF ESTABLISHMENT <i>Foxy Lady Cafe</i>		ADDRESS OR LOCATION <i>20275 SR 20</i>		CITY <i>Burlington</i>	
MEALS SERVED B L D C O	PURPOSE OF INSPECTION <input type="checkbox"/> Routine <input type="checkbox"/> Illness Investigation <input type="checkbox"/> Other:	<input type="checkbox"/> Preoperational <input type="checkbox"/> Temporary	<input type="checkbox"/> Reinspection <input type="checkbox"/> Complaint	ESTABLISHMENT TYPE <i>Small FD cat 1</i>	
MEALS OBSERVED B L D C O	ELAPSED TIME <i>20</i>	TOTAL POINTS <i>0</i>	RED POINTS <i>0</i>	REPEAT RED <i>0</i>	PHONE
DATE <i>1/25/18</i>	TIME IN <i>13:20</i>				

TEMPERATURE OBSERVATIONS

Food	Location	Temp (°F)	Food	Location	Temp (°F)
<i>Cream</i>	<i>upright</i>	<i>41°</i>			

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames specified.	Points
	<i>Re-inspection #3 to confirm correction of chronic cold holding violation.</i>	
	<i>Violation corrected. No potentially hazardous food observed in either of the two under counter refrigerators. PTHF in upright refrigerator is 41°F as required.</i>	
	<i>Food worker cards posted &amp; current. Carly, currently working, has card.</i>	
	<i>Going forward: Keep all employees' food worker cards posted &amp; up to date.</i>	
	<i>Monitor food in refrigerators daily to assure stay ≤ 41.</i>	
	<i>Do Not Use under counter refrigerators for PTHF until replaced with new functioning commercial refrigerators.</i>	

*Comments*

*Invoice for 3<sup>rd</sup> re-inspection will be issued. Back to routine inspections now.*

Person In Charge (Signature) <i>MMA</i>	Person In Charge (Print Name) <i>Carley McAuliffe</i>	Date <i>1/25/18</i>
Regulatory Authority (Signature) <i>Polly Dubb</i>	Regulatory Authority (Print Name) <i>Polly Dubb</i>	Follow-up Needed? Yes <input type="radio"/> No <input checked="" type="radio"/>