

# State of Ohio Standard Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility <b>Conterbaven</b>		Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License number <b>218</b>	Date <b>1/16/18</b>
Address <b>422 N. Second St. Hamilton OH 45011</b>		Category/Descriptive <b>Class 3-25 OCSF</b>		
License holder <b>James Gentry</b>		Inspection time (min) <b>35min</b>	Travel time (min) <b>25 min</b>	Other
Type of visit (check) <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Follow up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 day <input type="checkbox"/> Complaint <input type="checkbox"/> Prelicensing <input type="checkbox"/> Consultation <input type="checkbox"/> Other specify		Follow-up date (if required)		Sample date/result (if required)

### 3717-1 OAC Violation Checked

#### Management and Personnel

<input type="checkbox"/> 2.1 Employee health
<input type="checkbox"/> 2.2 Personal cleanliness
<input type="checkbox"/> 2.3 Hygienic practices
<input type="checkbox"/> 2.4 Supervision

<input type="checkbox"/> 4.4 Maintenance and operation
<input checked="" type="checkbox"/> 4.5 Cleaning of equipment and utensils
<input type="checkbox"/> 4.6 Sanitizing of equipment and utensils
<input type="checkbox"/> 4.7 Laundering
<input type="checkbox"/> 4.8 Protection of clean items

#### Poisonous or Toxic Materials

<input type="checkbox"/> 7.0 Labeling and identification
<input type="checkbox"/> 7.1 Operational supplies and applications
<input type="checkbox"/> 7.2 Storage and display separation

#### Food

<input type="checkbox"/> 3.0 Safe, unadulterated and honestly presented
<input type="checkbox"/> 3.1 Sources, specifications and original containers
<input checked="" type="checkbox"/> 3.2 Protection from contamination after receiving
<input type="checkbox"/> 3.3 Destruction of organisms
<input type="checkbox"/> 3.4 Limitation of growth of organisms
<input type="checkbox"/> 3.5 Identity, presentation, on premises labeling
<input type="checkbox"/> 3.6 Discarding or reconditioning unsafe, adulterated
<input type="checkbox"/> 3.7 Special requirements for highly susceptible populations

#### Water, Plumbing, and Waste

<input type="checkbox"/> 5.0 Water
<input type="checkbox"/> 5.1 Plumbing system
<input type="checkbox"/> 5.2 Mobile water tanks
<input type="checkbox"/> 5.3 Sewage, other liquid waste and rainwater
<input type="checkbox"/> 5.4 Refuse, recyclables, and returnables

#### Special Requirements

<input type="checkbox"/> 8.0 Fresh juice production
<input type="checkbox"/> 8.1 Heat treatment dispensing freezers
<input type="checkbox"/> 8.2 Custom processing
<input type="checkbox"/> 8.3 Bulk water machine criteria
<input type="checkbox"/> 8.4 Acidified white rice preparation criteria
<input type="checkbox"/> 9.0 Facility layout and equipment specifications
<input type="checkbox"/> 20 Existing facilities and equipment

#### Physical Facilities

<input type="checkbox"/> 6.0 Materials for construction and repair
<input type="checkbox"/> 6.1 Design, construction, and installation
<input type="checkbox"/> 6.2 Numbers and capacities
<input type="checkbox"/> 6.3 Location and placement
<input type="checkbox"/> 6.4 Maintenance and operation

#### Equipment, Utensils, and Linens

<input type="checkbox"/> 4.0 Materials for construction and repair
<input checked="" type="checkbox"/> 4.1 Design and construction
<input type="checkbox"/> 4.2 Numbers and capacities
<input type="checkbox"/> 4.3 Location and installation

#### Administrative

<input type="checkbox"/> 901.3-4 OAC
<input type="checkbox"/> 3701-21 OAC

#### Violation(s)/Comment(s)

\*Critical\*

\* 3.2 Observed employee conducting food preparation in the 3 tub sink - not allowed; possible cross contamination - move. Cooking boiled eggs and peeling them should only be done in the food prep sink. Corrected.

non-critical

4.1 Non-commercial equipment found in the operation; Hamilton Beach and Kitchenaid choppers; remove; not allowed for use.

4.5 Equipment unclear; microwave, can opener blade, cabinet drawers, etc - closed; must be kept along to sight and touch.

Inspected by <b>Annexa N. Church Roberts</b>	R.S./SIT # <b>2156</b>	Licenser <b>Hamilton City 1775/1001</b>
Received by <b>Becky Stupp</b>	Title <b>Cook</b>	Phone <b>868 9600</b> <b>889 5953</b>

State of Ohio  
Continuation Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility Centerhaven	Type of visit Standard	Date 1/16/18
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Violation(s)/Comment(s)

Note: Level II certification observed employee health policy in a verifiable form and a procedure to clean up vomiting/diarrhea

Note: New equipment added - Electrolux single door freezer Model FCF51119 by NSF. New Garland 9 burner gas stove with flat top added also.

Inspected by Annalisa A. Cline RPH	R.S./SIT # 2756	Licenser Kamellen City 7857081
Received by Beck Stigall	Title Cook	Phone 888-9600