

**State of Ohio**  
**Standard Inspection Report**

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility <b>McDonald's</b>	Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License number <b>251</b>	Date <b>1/12/18</b>
Address <b>20 S. Martin Luther King Blvd Hamilton OH</b>		Category/Descriptive <b>Class 4 = 25000 sf</b>	
License holder <b>George Schmidt</b>	Inspection time (min) <b>30 min</b>	Travel time (min) <b>10 min</b>	Other
Type of visit (check) <input type="checkbox"/> Standard <input type="checkbox"/> Follow up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 day <input checked="" type="checkbox"/> Complaint <input type="checkbox"/> Precicensing <input type="checkbox"/> Consultation <input type="checkbox"/> Other specify	Follow-up date (if required) <b>—</b>		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 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 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 checked="" type="checkbox"/>	6.4 Maintenance and operation

**Administrative**

<input type="checkbox"/>	901:3-4 OAC
<input type="checkbox"/>	3701-21 OAC

**Equipment, Utensils, and Linens**

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

**Violation(s)/Comment(s)**

*non-critical*

**6.4 Floors found unclean; clean; physical facilities must be kept clean.**

**Note: Made inspection due to complaint #201800141 regarding unsanitary employees, unsanitary food handling by employee, and floors unclean. Discussed complaint with GM, and she is unaware of the complaint. Observed food handling during inspection and observed no violations at that time. Floor being unclean was the only part of complaint confirmed. Discussed good personal hygiene and the importance of good handwashing. Complaint partially confirmed.**

Inspected by <b>Christina A. Creech #812</b>	R.S./SIT # <b>2126</b>	Licensors <b>Hamilton City / 175-1001</b>
Received by <b>Carlye Carter</b>	Title <b>General Manager</b>	Phone <b>563-0989</b>