

State of Ohio

Standard Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility Legends Bar & Grill Hamilton	Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License number 474	Date 1/24/18
Address 2104 Fairgrove Ave Hamilton OH 45011	Category/Descriptive Class 3 - 25,000 sf		
License holder Legends Bar & Grill of Hamilton LLC	Inspection time (min) 70 min	Travel time (min) 15 min	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 checked="" 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 checked="" type="checkbox"/> 4.2 Numbers and capacities
<input type="checkbox"/> 4.3 Location and installation

Violation(s)/Comment(s)

Critical

* 7.0 Toxic chemicals found unlabeled and mislabeled at the mop sink - label to prevent misidentification that could create a toxic contamination. Labeled "by owner. Corrected."

Non-critical

4.2 No quaternary ammonia test strips available to check sanitizer strength.

4.5 Equipment unclean: soda gun holder, ice machine, shield prep shell, belt corders, etc; clean, must be kept clean to sight and touch.

6.2 No soap available at handsinks in the kitchen and bar, supply - must be available to wash hands properly.

Inspected by Channah A. Creech	R.S./SIT # 2726	License # Hamilton City / 7857001
Received by Y. [Signature]	Title owner	Phone 936-5116

State of Ohio
Continuation Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of Facility Legends Bar & Grill of Hamilton LLC	Type of visit standard	Date 11/24/18
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Violation(s)/Comment(s)

6.4 Wall band unclear behind fryers; grease buildup; clean; physical facilities must be kept clean.

Note: employee health policy, vomiting/diarrhea clean up procedure and level II certification available.

Inspected by Thomas A. Creech AS Ren	R.S./SIT # 2756	Licenser Hamilton City 17857081
Received by Cristina...	Title ...	Phone 266-5111