

Standard Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

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|---|---|--------------------------------|----------------------------------|
| Name of facility <i>Circle K #5219</i> | Check one <input type="checkbox"/> FSO <input checked="" type="checkbox"/> RFE | License number <i>394</i> | Date <i>1/10/18</i> |
| Address <i>2206 Grand Blvd, Ham, OH 45011</i> | Category/Descriptive <i>C3425K #12</i> | | |
| License holder <i>MAC's Convenience Store, LLC</i> | Inspection time (min) <i>45</i> | Travel time (min) <i>15</i> | Other |
| Type of visit (check) <input type="checkbox"/> Standard <input checked="" type="checkbox"/> Follow up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 day <input type="checkbox"/> Complaint <input checked="" type="checkbox"/> Precicensing <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

| | |
|-----|----------------------|
| 2.1 | Employee health |
| 2.2 | Personal cleanliness |
| 2.3 | Hygienic practices |
| 2.4 | Supervision |

| | |
|-----|--------------------------------------|
| 4.4 | Maintenance and operation |
| 4.5 | Cleaning of equipment and utensils |
| 4.6 | Sanitizing of equipment and utensils |
| 4.7 | Laundrying |
| 4.8 | Protection of clean items |

Poisonous or Toxic Materials

| | |
|-----|---------------------------------------|
| 7.0 | Labeling and identification |
| 7.1 | Operational supplies and applications |
| 7.2 | Storage and display separation |

Food

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

Water, Plumbing, and Waste

| | |
|-------|--|
| 5.0 | Water |
| X 5.1 | Plumbing system |
| 5.2 | Mobile water tanks |
| 5.3 | Sewage, other liquid waste and rainwater |
| 5.4 | Refuse, recyclables, and returnables |

Special Requirements

| | |
|-----|--|
| 8.0 | Fresh juice production |
| 8.1 | Heat treatment dispensing freezers |
| 8.2 | Custom processing |
| 8.3 | Bulk water machine criteria |
| 8.4 | Acidified white rice preparation criteria |
| 9.0 | Facility layout and equipment specifications |
| 20 | Existing facilities and equipment |

Physical Facilities

| | |
|-------|--|
| 6.0 | Materials for construction and repair |
| 6.1 | Design, construction, and installation |
| 6.2 | Numbers and capacities |
| 6.3 | Location and placement |
| X 6.4 | Maintenance and operation |

Administrative

| |
|-------------|
| 901:3-4 OAC |
| 3701-21 OAC |

Equipment, Utensils, and Linens

| | |
|-----|---------------------------------------|
| 4.0 | Materials for construction and repair |
| 4.1 | Design and construction |
| 4.2 | Numbers and capacities |
| 4.3 | Location and installation |

R-repeat violat

Violation(s)/Comment(s)

NOTE: violations noted on 1/8/18 corrected at this time with the exception of the following items:

R 5.1 observed warm water coming from faucets. Manager stated plumber was on site today and made repairs. Water temperature for handwashing is required to be at least 100°F. For Quaternary Ammonium Sanitizer must have minimum water temperature of 75°F. NOTE: H₂O reading 71°F at 3-comp sink

R 5.1 operation has a plumbing drainage issue. Drainage system in wall between 3-comp sink and self serve drink station at sales floor in need of repair to allow for full and proper drainage.

| | | |
|---|-------------------------------|--|
| Inspected by <i>Carmine Madrone RS</i> | R.S./SIT # <i>2357</i> | Licensors <i>Hamilton City 785-7062</i> |
| Received by <i>Carmine Arroyo</i> | Title <i>Asst. Manager</i> | Phone <i>513-863-1753</i> |

State of Ohio
Continuation Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

| | | |
|------------------------------------|----------------------------|-----------------|
| Name of Facility Circle K #5219 | Type of visit Follow-up | Date 1/10/19 |
|------------------------------------|----------------------------|-----------------|

Violation(s)/Comment(s)

NOTE: Provide copy of grease trap cleaning ^{invoice/report} to ensure that grease trap below 3-compartment sink is being maintained properly

R 6.4 Replace missing floor tiles in back storage area near side of walk in cooler. This is to provide smooth easily cleanable floor surface throughout operation

X

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|------------------------------------|--------------------------|---------------------------|
| Inspected by Lammie McNamee, RS | R.S./SIT # 2357 | Licenser Hamilton City |
| Received by Lammie McNamee | Title Assist. Manager | Phone 513-863-1753 |