

# State of Ohio Standard Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

|  |                                    |   |                                  |                       |
|--|------------------------------------|---|----------------------------------|-----------------------|
| Name of facility<br><i>Circle K #5219</i>  |                                    | Check one<br><input type="checkbox"/> FSO <input checked="" type="checkbox"/> RFE | License number<br><i>394</i>     | Date<br><i>1/9/18</i> |
| Address<br><i>2206 Grand Blvd, Ham, OH 45011</i>   |                                    | Category/Descriptive<br><i>C 35251CF/2</i>  |                                  |                       |
| License holder<br><i>MAC's Convenience Store, LLC</i>  | Inspection time (min)<br><i>15</i> | Travel time (min)<br><i>15</i>  | Other                            |                       |
| Type of visit (check)<br><input type="checkbox"/> Standard <input checked="" type="checkbox"/> Follow up <input type="checkbox"/> Foodborne <input type="checkbox"/> 30 day<br><input type="checkbox"/> Complaint <input type="checkbox"/> Prelicensing <input type="checkbox"/> Consultation <input type="checkbox"/> Other specify |                                    | Follow-up date (if required)<br><i>1/10/18</i>                                    | 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 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)

*NOTE: Manager stated that plumber is not able to come until tomorrow. Will reinspect 1/10/18*

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| Inspected by<br><i>Lamaine M. Brown RS</i> | R.S./SIT #<br><i>2357</i> | Licensors<br><i>Hamilton City</i> |
| Received by<br><i>[Signature]</i>          | Title<br><i>Manager</i>   | Phone<br><i>513-868-1753</i>      |