

State of Ohio Standard Inspection Report

Authority: Chapters 3717 and 3715 Ohio Revised Code

Name of facility All Eight Up		Check one <input checked="" type="checkbox"/> FSO <input type="checkbox"/> RFE	License number 429	Date 8/22/18
Address 23 N. Third St. Hamilton OH 45011		Category/Descriptive Class 4 - 25,000 sf		
License holder Tony Brown		Inspection time (min) 45 min	Travel time (min) 10 min	Other
Type of visit (check) <input checked="" type="checkbox"/> Standard <input type="checkbox"/> Complaint		<input type="checkbox"/> Follow up <input type="checkbox"/> Prelicensing	<input type="checkbox"/> Foodborne <input type="checkbox"/> Consultation	<input type="checkbox"/> 30 day <input type="checkbox"/> Other <i>specify</i>
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 checked="" 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	Laundrying
<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

4.4 Equipment found in disrepair, Arctic Air Coder is missing a door handle - repair; must be kept in good repair; reach in freezer has heavy ice build up also

4.5 Utensils found unclear in a container; at prep table; clean; must be kept clean. Corrected.

6.4 Floor unclear in corner by sandwich block in kitchen; clean; must be kept clean.

6.4 Ceiling found damaged and not smooth and cleanable behind in the restroom and behind the counter - repair/replace.

Note: employee health policy and vomiting/diarrhea clean up procedure available.

Note: New menu items added; received updated menu - added french fries and potato skins. New equipment added; patriot fryer double Model # FMPF-642 NSF and Berg sandwich block coder Intertek.

Inspected by Annica N. Creech RSN	R.S./SIT # ASB	License # Hamilton City 1785-2081
Received by [Signature]	Title VP	Phone (C) 513-805-5271

Critical Control Point Inspection

Authority: Chapter 3717 Ohio Revised Code

Name of facility All Eight up	License number 429	Date 8/22/18
Address 23 N. Third St. Hamilton OH 45011	Category/Descriptive Class 4 - 25,000 sf	
License holder Tony Brown	Inspection time (min) 15 min	Travel time (min) 10 min

Comments:

Note: No violations observed at time of inspection. Discussed cooking, cooling, and date marking of time/temperature controlled for safety foods (TCS).

Temperature Log

Food item	Indicate state food is in (receiving, storage, preparation, cooling, holding, reheating, etc.)	Temperature	Food item	Indicate state food is in (receiving, storage, preparation, cooling, holding, reheating, etc.)	Temperature
chicken breast	holding	37°F	cheese pizza	holding	137°F
hamburger (steak)	thawing	33°F	spaghetti	storage	41.3°F
turkey	storage	41.9°F	cooked potatoes	storage	37.9°F
sausage	holding	36°F	cooked potatoes	cooling	74.1°F
tomatoes	holding	38°F	meat pizza	holding	136°F
salad mix	holding	41°F	meatballs	holding	37.2°F
mozzarella / provolone	holding	33°F			
Inspected by Annica N. Creech	R.S. SIT# 2756	License Hamilton City L 785/7081			
Received by Tony Brown	Title VP	Phone (615) 713-865-5271			