## Food Facility Inspection Report

**Facility Name:** Crossroads Deli
**Address:** 2415 Berdahl

### In = In compliance  N/O = Not observed  N/A = Not applicable  COS = Corrected on-site  MAJ = Major violation  OUT = Out of compliance

### Demonstration of Knowledge

1. Food safety certificate
   - **Food Safety Certificate Name:** [Name]
   - **Expiration Date:** [Date]

2. Communicable disease reporting, restrictions & exclusions
   - **Requirement:** [Details]
3. No discharge from eyes, nose & mouth
4. Proper eating, tasting, drinking or tobacco use
5. Hands clean & properly washed; gloves properly used
6. Adequate hand washing facilities supplied & accessible
7. Proper hot and cold holding temperatures
8. Time as a public health control: procedures & records
9. Proper cooling methods
10. Proper cooking time & temperatures
11. Proper reheating procedures for hot holding

### Supervision

24. Person in charge present & performs duties
25. Personal cleanliness & hair restraints

### General Food Safety Requirements

26. Approved thawing methods, frozen food
27. Food separated & protected
28. Fruits & vegetables washed
29. Toxic substances properly identified, stored & used

### Food Storage/Service/Display

30. Food storage containers identified
31. Consumer self-service
32. Food properly labeled & honestly presented

### Equipment/Utensils/Linen

33. Nonfood-contact surfaces clean
34. Warewashing facilities: installed, maintained & used; test strips
35. Equipment & utensils: approved, installed & clean; good repair; capacity
36. Equipment, utensils & linen: properly used & stored
37. Vending machines
38. Adequate ventilation & lighting; designated areas, use
39. Thermometers: provided & accurate
40. Wiping cloths: properly used & stored

### Physical Facilities

41. Plumbing: proper backflow devices; leaks
42. Garbage & refuse: properly disposed; facilities maintained
43. Toilet facilities: properly constructed, supplied & cleaned
44. Premises: personal cleaning items; vermin-proofing

### Permanent Food Facilities

45. Floors, walls & ceilings: built, maintained & cleaned
46. No unapproved private homes/living or sleeping quarters

### Signs/Requirements

47. Signs posted; last inspection report available

### Compliance & Enforcement

48. Plan review
49. Permits available
50. Impoundment
51. Permit suspension

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See reverse side for the code sections and general requirements that correspond to each violation listed above.

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**Received by (print):** [Signature]
**Received by (signature):** [Signature]
**Title:** [Title]

**Specialist (print):** [Signature]
**Specialist (signature):** [Signature]
**Phone:** [Phone]

**Reinspection Date:** [Date]
## Temperature Control

<table>
<thead>
<tr>
<th>Type of Food</th>
<th>Temp. (°F)</th>
<th>Violation (P)</th>
<th>Process/ Holding Location</th>
<th>Food Discarded (amount)</th>
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## Observations & Corrective Actions

1. Observed food handler grab a chicken drumstick and eat it in the kitchen. Employee was reminded to wash hands before returning to handle food or utensils.

2. Clean the floor of cookline where Budgett ovens are located. Accumulation of liquid waste observed.

Reviewed employee knowledge of final cooking temps for ground beef and chicken was sufficient.