

Food Establishment Inspection Report

Jackson County Health Department PO Box 307 - 415 Health Department Rd Murphysboro IL 62966		(618) 684-3143 ext. 128	No. of Risk Factor/Intervention Violations 0	Date 1/8/19
Establishment Arnie's Sandwiches		License/Permit # 0812	No. of Repeat Risk Factor/Intervention Violations 0	Time In 11:40
Street Address 2031-B South Illinois Avenue		City/State Carbondale Illinois	Permit Holder Sarah Lingle Kroelein	Time Out 12:40
City/State		ZIP Code 62922	Risk Category II	Purpose of Inspection Routine

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
IN=in compliance **OUT**=not in compliance **N/O**=not observed **N/A**=not applicable
 Mark "X" in appropriate box for COS and/or R
COS=corrected on-site during inspection **R**=repeat violation

Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance Status	COS	R
Supervision		
1 In Out		
2 In Out, N/A		
Employee Health		
3 In Out		
4 In Out		
5 In Out		
Good Hygienic Practices		
6 In Out, N/O		
7 In Out, N/O		
Preventing Contamination by Hands		
8 In Out, N/O		
9 In Out, N/A, N/O		
10 In Out		
Approved Source		
11 In Out		
12 In, Out, N/A, N/O		
13 In Out		
14 In, Out, N/A , N/O		

Compliance Status	COS	R
Protection from Contamination		
15 In Out, N/A, N/O		
16 In Out, N/A		
17 In Out		
Time/Temperature Control for Safety		
18 In, Out, N/A , N/O		
19 In, Out, N/A , N/O		
20 In, Out, N/A , N/O		
21 In, Out, N/A , N/O		
22 In Out, N/A, N/O		
23 In Out, N/A, N/O		
24 In, Out, N/A , N/O		
Consumer Advisory		
25 In Out, N/A		
Highly Susceptible Populations		
26 In, Out, N/A		
Food/Color Additives and Toxic Substances		
27 In, Out, N/A		
28 In Out, N/A		
Conformance with Approved Procedures		
29 In, Out, N/A		

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.
 Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R **COS**=corrected on-site during inspection **R**=repeat violation

Compliance Status	COS	R
Safe Food and Water		
30		
31		
32		
Food Temperature Control		
33		
34		
35		
36		
Food Identification		
37		
Prevention of Food Contamination		
38		
39		
40		
41 <input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
42		

Compliance Status	COS	R
Proper Use of Utensils		
43		
44		
45		
46		
Utensils, Equipment and Vending		
47		
48		
49		
Physical Facilities		
50		
51		
52		
53		
54		
55		
56		
Employee Training		
57		
58		

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Establishment: Arnie's Sandwich Shop Establishment #: 0812

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Chlorine corrected to PPM: 50 Heat: N/A

TEMPERATURE OBSERVATIONS					
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
Randell 2 door fridge	40.4°F				
3 door walk in cooler - bottom	39.4°F				
" " " " TOP					
Tuna	33.3°F				
Sliced tomatoes	35.5°F				
Bar-B-Q	35.9°F				
Chicken Salad	35.4°F				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number	Violations cited in this report must be corrected within the time frames below.
41	Provide 50 ppm for wiping cloths in Sanibuckets. Observed at < 10 ppm. Corrected to 50 ppm.

CFPM Verification (name, expiration date, ID#):
Sarah Kroelein
#172-73364
Exp. 12/17/2023

HACCP Topic: Sanitizer concentration, Handwashing

Person in Charge (Signature): [Signature] Date: 1/8/19

Inspector (Signature): [Signature] Follow-up: Yes No (Check one) Follow-up Date: _____