

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	1	Date	2/14/19
Establishment		License/Permit #	No. of Repeat Risk Factor/Intervention Violations	0	Time In	1:50
Street Address			Permit Holder	Imad Samarah	Risk Category	II
City/State		ZIP Code	Purpose of Inspection			
Pita Alley		921	Routine			
1711 W Main		62901				

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		
Person in charge present, demonstrates knowledge, and performs duties			
2	(In) Out, N/A		
Certified Food Protection Manager (CFPM)			
Employee Health			
3	(In) Out		
Management, food employee and conditional employee; knowledge, responsibilities and reporting			
4	(In) Out		
Proper use of restriction and exclusion			
5	(In) Out		
Procedures for responding to vomiting and diarrheal events			
Good Hygienic Practices			
6	(In) Out, N/O		
Proper eating, tasting, drinking, or tobacco use			
7	(In) Out, N/O		
No discharge from eyes, nose, and mouth			
Preventing Contamination by Hands			
8	(In) Out, N/O		
Hands clean and properly washed			
9	(In) Out, N/A, N/O		
No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			
10	(In) Out		
Adequate handwashing sinks properly supplied and accessible			
Approved Source			
11	(In) Out, N/A, N/O		
Food obtained from approved source			
12	In, Out, N/A, N/O		
Food received at proper temperature			
13	(In) Out		
Food in good condition, safe, and unadulterated			
14	In, Out, N/A, N/O		
Required records available: shellstock tags, parasite destruction			

Compliance Status		COS	R
Protection from Contamination			
15	(In) Out, N/A, N/O		
Food separated and protected			
16	In, Out, N/A		
Food-contact surfaces; cleaned and sanitized			
17	(In) Out		
Proper disposition of returned, previously served, reconditioned and unsafe food			
Time/Temperature Control for Safety			
18	(In) Out, N/A, N/O		
Proper cooking time and temperatures			
19	(In) Out, N/A, N/O		
Proper reheating procedures for hot holding			
20	(In) Out, N/A, N/O		
Proper cooling time and temperature			
21	(In) Out, N/A, N/O		
Proper hot holding temperatures			
22	(In) Out, N/A, N/O		
Proper cold holding temperatures			
23	(In) Out, N/A, N/O		
Proper date marking and disposition			
24	In, Out, N/A, N/O		
Time as a Public Health Control; procedures & records			
Consumer Advisory			
25	(In) Out, N/A		
Consumer advisory provided for raw/undercooked food			
Highly Susceptible Populations			
26	In, Out, N/A		
Pasteurized foods used; prohibited foods not offered			
Food/Color Additives and Toxic Substances			
27	In, Out, N/A		
Food additives: approved and properly used			
28	(In) Out, N/A		
Toxic substances properly identified, stored, and used			
Conformance with Approved Procedures			
29	In, Out, N/A		
Compliance with variance/specialized process/HACCP			

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	Pasteurized eggs used where required		
31	Water and ice from approved source		
32	Variance obtained for specialized processing methods		
Food Temperature Control			
33	Proper cooling methods used; adequate equipment for temperature control		
34	Plant food properly cooked for hot holding		
35	Approved thawing methods used		
36	Thermometers provided & accurate		
Food Identification			
37	Food properly labeled; original container		
Prevention of Food Contamination			
38	Insects, rodents, and animals not present		
39	Contamination prevented during food preparation, storage and display		
40	Personal cleanliness		
41	Wiping cloths: properly used and stored		
42	Washing fruits and vegetables		

Compliance Status		COS	R
Proper Use of Utensils			
43	In-use utensils: properly stored		
44	Utensils, equipment & linens: properly stored, dried, & handled		
45	Single-use/single-service articles: properly stored and used		
46	Gloves used properly		
Utensils, Equipment and Vending			
47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used		
48	Warewashing facilities: installed, maintained, & used; test strips		
49	Non-food contact surfaces clean		
Physical Facilities			
50	Hot and cold water available; adequate pressure		
51	Plumbing installed; proper backflow devices		
52	Sewage and waste water properly disposed		
53	Toilet facilities: properly constructed, supplied, & cleaned		
54	Garbage & refuse properly disposed; facilities maintained		
55	Physical facilities installed, maintained, and clean		
56	Adequate ventilation and lighting; designated areas used		
Employee Training			
57	All food employees have food handler training		
58	Allergen training as required		

Food Establishment Inspection Report

Establishment: Pita Alley Establishment #: 921
 Water Supply: Public Private Waste Water System: Public Private
 Sanitizer Type: Bleach PPM: 50 ppm Heat: N/A

TEMPERATURE OBSERVATIONS					
Item/Location	Temp		Item/Location	Temp	
Walkin	39°F		Warming Unit	160°F	
Pizza make table	38°F		Soup	160°F	
2-Door Standing	41°F		Rice	160°F	
Single Door home style	40°F				
2-Door Home style	39°F				
Make table (main kitchen)	40°F				
Waitress	40°F				

OBSERVATIONS AND CORRECTIVE ACTIONS

Item Number: _____ Violations cited in this report must be corrected within the time frames below.

- 16 Provide adequate hot water (120°F or greater) for 3-comp sink @ pizza area. Upon inspection no hot water present. Without proper hot water you can not wash/rinse/sanitize dishes properly. 2/15/19
- 49 Clean areas that are hard to reach @ make table in main kitchen. Food noted.
- 9 22 Clean "clean" pans below rice/soup area. Food debris noted on pans.
- 9 22 Clean sides of all equipment on cook's line. Food debris/oil/grease noted.
- 49 Clean black mats on floor throughout facility. Excessive food debris noted.
- 55 Clean floors, under equipment, throughout facility. Food debris noted.
- 56 Eliminate gaps in filters @ vent hood.
*Note
• More deep cleaning must be performed on a more routine basis. ✓

CFPM Verification (name, expiration date, ID#):
Riaz Shah (PIC)
160582 x 3/22

HACCP Topic: 16/21/22

Person in Charge (Signature) _____ Date 2/15/19

Inspector (Signature) _____ Follow-up: Yes No (Check one) Follow-up Date: 2/15/19



JACKSON COUNTY HEALTH DEPARTMENT
RECHECK INSPECTION/NOTICE TO CORRECT

Establishment	Pita Alley
Orig. Inspection Date	2/15/19
Owner/Operator	Nirav Shah

Items below identify violations of the Jackson County Food Service Sanitation Ordinance and State Food Service Regulations that you were ordered to correct:

Item	Correction Date
* Corrected Violations:	
16, 49, 49, 49, 55, 56	2/22/19
* Note:	
◦ New hot water heater installed. Hot water functioning properly.	
◦ All cleaning issues addressed. Continue w/ more routine cleaning on a more routine basis.	

Date 2/22/19

Time 2:50

Received by [Signature]

Sanitarian [Signature]

NOTICE TO CORRECT VIOLATIONS

You are hereby ordered to correct the above noted violations of the Jackson County Food Service Ordinance by _____. Failure to correct the violations within the time allotted may result in suspension and removal of your food service permit. Continued operation of the food service establishment without the permit will result in issuance of a citation and may result in a fine of up to \$500. Each day upon which such violation occurs shall constitute a separate violation.

If the above violations are not corrected within time allotted, a mandatory hearing may be scheduled at the Jackson County Health Department.

Date Issued: _____

Owner/Operator: _____

Sanitarian: _____