

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	9/24/21
Establishment		License/Permit #		No. of Repeat Risk Factor/Intervention Violations	0	Time In	11:05am
Street Address		City/State		Permit Holder	Tara Mason/Amy Heiple		
City/State		ZIP Code		Purpose of Inspection	Routine		
Cindy B's		1068		Risk Category		I	
1110 Locust St.		Murphysboro, IL		62966			

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	Compliance Status		COS	R
Supervision							
1	<input checked="" type="radio"/> In <input type="radio"/> Out			15	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
2	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A			16	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A		
Employee Health							
3	<input checked="" type="radio"/> In <input type="radio"/> Out			17	<input checked="" type="radio"/> In <input type="radio"/> Out		
4	<input checked="" type="radio"/> In <input type="radio"/> Out			Time/Temperature Control for Safety			
5	<input checked="" type="radio"/> In <input type="radio"/> Out			18	<input type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input checked="" type="radio"/> N/O		
Good Hygienic Practices							
6	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O			19	<input type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input checked="" type="radio"/> N/O		
7	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O			20	<input type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input checked="" type="radio"/> N/O		
Preventing Contamination by Hands							
8	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/O			21	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
9	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O			22	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
10	<input checked="" type="radio"/> In <input type="radio"/> Out			23	<input checked="" type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input type="radio"/> N/O		
Approved Source							
11	<input checked="" type="radio"/> In <input type="radio"/> Out			24	<input type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input checked="" type="radio"/> N/O		
12	<input type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input checked="" type="radio"/> N/O			Consumer Advisory			
13	<input checked="" type="radio"/> In <input type="radio"/> Out			25	<input type="radio"/> In <input type="radio"/> Out <input checked="" type="radio"/> N/A		
14	<input type="radio"/> In <input type="radio"/> Out <input type="radio"/> N/A <input checked="" type="radio"/> N/O			Highly Susceptible Populations			
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	<input checked="" type="checkbox"/> Insects, rodents, and animals not present		
39	<input checked="" type="checkbox"/> Contamination prevented during food preparation, storage and display		<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/> 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	<input checked="" type="checkbox"/> 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: Cindy B's Establishment #: 1068

Water Supply: Public Private Waste Water System: Public Private

Sanitizer Type: Chlorine/Quat PPM: 50/200 Heat: N/A

TEMPERATURE OBSERVATIONS					
Item/Location	Temp		Item/Location	Temp	
grill make table AA	33				
o diced tomato	40				
Warmer walk in	40°				
Small cooler	40°				
Salad cooler	41°				
Frigidare cooler	41°				
pic cooler	41				

OBSERVATIONS AND CORRECTIVE ACTIONS		
Item Number	Violations cited in this report must be corrected within the time frames below.	Correct By
38	Replace door sweep of screen door at back of house (boh) to prevent the entrance of pests into the facility.	NPI
39	Refrain from storing tongs down in contact with bulk food product. Upon inspection tongs down in 5gal bucket of pickles with handle in contact with juice/pickles. This is a potential hand-contact contamination issue.	COS
47	Replace/Resurface all cutting boards that are have deep/dark cuts. No longer smooth/easily cleanable.	NPI
55	Clean floor under all cookline equipment and dish machine. Food debris/grime build-up noted.	↓
55	Clean FRP walls throughout kitchen, grease build-up/yellowing noted.	

CFPM Verification (name, expiration date, ID#):
on file at HD. Tara Mason (PIC)

HACCP Topic: 2, 8, 16, 20, 22, 24

Tara Mason 9/24/2021
 Person in Charge (Signature) Date

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