

#### **FOOD SAFETY INSPECTION REPORT**

Chapter 500, Florida Statutes (850) 245-5520

Visit # 3327-0005-40

Bureau of Food Inspection Attention: Records Section 3125 Conner Boulevard, C-26 Tallahassee, FL 32399-1650

Print Date: November 09, 2018

Food Entity Number:

58454

Food Entity Name:

**DOLLAR GENERAL # 0614** 

Date of Visit:

November 09, 2018

Food Entity Address:

2028 S Jefferson ST Perry, FL32348-5617

Food Entity Mailing Address:

100 Mission Rdg Goodlettsville, TN 37072-2171

Food Entity Type/Description:

152/ Minor Outlet with Perishables

Food Entity Owner:

**DOLGENCORP LLC (GN\$)** 

Owner Code:

GN\$

#### INSPECTION SUMMARY - Met Inspection Requirements; Check Back Needed

On November 09, 2018, DOLLAR GENERAL # 0614 was inspected by YOLANDA SYLVE, a representative of the Florida Department of Agriculture and Consumer Services. Violations observed during the inspection must be corrected to be in compliance with Chapter 500, Florida Statutes, and Rule 5K-4, Florida Administrative Code. A Department inspector will check-back to ensure compliance with Chapter 500, Florida Statutes, and Rule 5K-4, Florida Administrative Code.

#### PERMIT APPLICATION INFORMATION

The permit application information was verified with management or a qualified representative.

#### **COMPLIANCE KEY**

IN = In Compliance OUT = Not In Compliance N/O = Not Observed N/A = Not Applicable

### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

<u>Violation</u>	<u>Compliance</u>	
Number	<b>Status</b>	Violation Description
1	OUT	Supervision: Person in Charge present, demonstrates knowledge, and performs duties
2	N/A	Employee Health: Management, food employee and conditional employee; knowledge, responsibilities and reporting
3	IN	Employee Health: Proper use of restriction and exclusion
4	IN	Good Hygienic Practices: Proper eating, tasting, drinking, or tobacco use
5	IN	Good Hygienic Practices: No discharge from eyes, nose, and mouth
6	IN	Preventing Contamination by Hands: Hands clean and properly washed
7	N/A	Preventing Contamination by Hands: No bare hand contact with ready-to-eat foods or approved alternate method properly followed
8	IN	Preventing Contamination by Hands: Adequate handwashing sinks, properly supplied and accessible
9	IN	Approved Source: Food obtained from approved source
10	N/O	Approved Source: Food received at proper temperature
11	IN	Approved Source: Food in good condition, safe and unadulterated
12	N/A	Approved Source: Required records available: shellstock tags, parasite destruction
13	IN	Protection from Contamination: Food separated and protected
14	N/A	Protection from Contamination: Food-contact surfaces: cleaned and sanitized

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## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Violation Number 15	Compliance Status IN	<u>Violation Description</u> Protection from Contamination: Proper disposition of returned, previously served, reconditioned, and unsafe food
16	N/A	Potentially Hazardous Food Time/Temperature: Proper cooking time and temperature
17	N/A	Potentially Hazardous Food Time/Temperature: Proper reheating procedures for hot holding
18	N/O	Potentially Hazardous Food Time/Temperature: Proper cooling time and temperatures
19	N/A	Potentially Hazardous Food Time/Temperature: Proper hot holding temperatures
20	IN	Potentially Hazardous Food Time/Temperature: Proper cold holding temperatures
21	N/A	Potentially Hazardous Food Time/Temperature: Proper date marking and disposition
22	N/A	Potentially Hazardous Food Time/Temperature: Time as a public health control: procedures and records
23	N/A	Consumer Advisory: Consumer advisory provided for raw or undercooked loods
24	N/A	Highly Susceptible Populations: Pasteurized Foods, Prohibited Re-service, and Prohibited Foods*
25	N/A	Chemical: Food additives: approved and properly used
26	OUT	Chemical: Toxic substances properly identified, stored, and used
27	N/A	Conformance with Approved Procedures

### **GOOD RETAIL PRACTICES**

Violation Number 34	Compliance Status OUT	<u>Violation Description</u> Food Temperature Control: Thermometers provided and accurate used
48	OUT	Physical Facilities: Hot and cold water available; adequate pressure
	OUT	Physical Facilities: Plumbing installed; proper backflow devices
49		Physical Facilities: Toilet facilities: properly constructed, supplied, cleaned -
51	OUT	Physical Facilities. Tollet lacindes. Fire-tolled maintained and clean
53	OUT	Physical Facilities: Physical facilities installed, maintained, and clean
•		ACTIONS

**OBSERVATIONS AND CORRECTIVE ACTIONS** 

COS = Corrected on Site

P = Priority Citation

Pf = Priority Foundation Citation

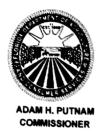
(Directly Associated with Foodborne Illnesses)

(Supports or Leads to a Priority Citation)

INSPECTION: RISK BASED

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**INSPECTION: RISK BASED** 

<u>Violation</u> <u>Number</u>	Citation Description	cos	<u>Observation</u>	
1	Person in charge or food establishment employee is not a certified food protection manager who has passed a test through a recognized accredited certification program as specified in the FDA Food Code, 2-102.11(B) or as specified in 5K-4.021. F.A.C. (Recognized accredited certification programs include: National Registry of Food Safety Professionals (FSP Certificate) (800) 446-0257, Website: www.nrfsp.com; Prometric (800) 624-2736 Website: prometric.com; National Restaurant Association Education Foundation, SERVESAFE Program (800) 765-2122, Website: www.servesafe.com; 360 TRAINING (888) 360-8764, Website: www.360training.com or AboveTraining/StateFoodSafety.com, (801) 494-1416. 2-102.11(B)Pf		RETAIL - NO CERTIFIED FOOD MANAGER AVAILABLE.	Pf
26	Poisonous or toxic materials not stored to prevent contamination of food, equipment, utensils, linens, and single-service and single-use articles by separation or location. 7-201.11 P		BACK AREA - CHEMICALS STORED WITH FOODS ON CLEARANCE RACK - COS - CHEMICALS RELOCATED.	Р

**INSPECTION: GRP** 

<u>Violation</u> <u>Number</u>	Citation Description	cos	Observation	
34	Food temperature measuring device with a suitable small diameter probe not provided and readily accessible for assessing food temperatures as specified in the FDA Food Code. 4-302.12 Pf		RETAIL - NO THERMOMETER AVAILABLE TO CHECK PERISHABLE FOOD ITEMS.	Pf
48	Water under pressure not provided to all fixtures, equipment, and nonfood equipment that are required to use water except as specified in the FDA Food Code. 5-103.12 Pf		BACK AREA - NO HOT WATER PROVIDED TO MOP SINK AND RESTROOM HANDWASHING SINKS.	Pf

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<u>Violation</u> <u>Number</u>	<u>Citation Description</u>	cos	<u>Observation</u>
49	Plumbing system not maintained in good repair. 5-205.15(B)		BACK AREA - LEAK AT BOTTOM PIPES OF HANDWASHING SINK IN RESTROOM.BACK AREA - RESTROOM COMMODE NOT OPERATIVE.
51	Plumbing fixtures including but not limited to handwashing sinks, toilets and urinals not cleaned as often as necessary to keep them clean. 6-501.18		BACK AREA - RESTROOM FIXTURES, HAND SINKS AND COMMODES HAVE FOREIGN SUBSTANCE, RESIDUE BUILDUP AND FOUL ODOR.
51	Toilet room used by females not provided with a covered receptacle for sanitary napkins. 5-501.17		BACK AREA - NO COVER ON TRASH RECEPTACLE IN RESTROOM USED BY FEMALES.
53	Physical facilities not maintained in good repair. 6-501.11		BACK AREA - WALL SURFACES IN DISREPAIR, DISREPAIR IN RESTROOMS, AND DAMAGED AND MISSING FLOOR TILES.
53	Premises not free of litter and items that are unnecessary to the operation or maintenance of the establishment such as equipment that is nonfunctional or no longer used. 6-501.114		BACK STORAGE AREA - DUST, RESIDUE BUILD UP ON FLOORS, AND STORAGE OF UNNECESSARY CLUTTER.EMPLOYEE BREAK ROOM - DUST, RESIDUE BUILD UP, OLD FOOD PARTICLES.

#### **COMMENTS**

Failure to provide hot water and/or mop sink in 30 days will result in administrative actions.

Establishment can call 850-245-5520 when corrections have been made to request verification visit if hot water is available prior to 30 days.

Food establishment will be given 30 days to complete repairs to restroom: commode and hand washing sink.

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#### **ACKNOWLEDGMENT**

I acknowledge receipt of a copy of this document, and I further acknowledge that I have verified the location and mailing addresses on the first page of this document are correct, or I have written the correct information on the first page of this document.

(Signature of FDACS Representative)

(Signature of Representative)

YOLANDA SYLVE, SENIOR SANITATION AND SAFETY SPECIALIST

DEIDRE LEPIERRE, MANAGER

Krister Thes

Print Name and Title

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