



ADAM H. PUTNAM
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Food Safety



Visit # 9999-7182-1243-13
Bureau of Food Inspection
Attention: Records Section
3125 Conner Boulevard, C-26
Tallahassee, FL 32399-1650

FOOD SAFETY INSPECTION REPORT

Chapter 500, Florida Statutes
(850) 245-5520

Print Date: November 30, 2018

Food Entity Number: 253970
Food Entity Name: JIMMIE'S AUTO/TRUCK PLAZA & THE RED ONION GRILL
Date of Visit: November 30, 2018
Food Entity Address: 1-10 EXIT # 38 STATE RD 255 LEE, FL32059
Food Entity Mailing Address: 6025 S State Road 53 Madison, FL 32340-5947
Food Entity Type/Description: 124/ Convenience Store Significant FS AND/OR Packaged Ice
Food Entity Owner: JIMMIE & LATRELLE RAGANS
Owner Code:

INSPECTION SUMMARY - Met Inspection Requirements; Check Back Needed

On November 30, 2018, JIMMIE'S AUTO/TRUCK PLAZA & THE RED ONION GRILL was inspected by LEONEL GARCIA, 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 Number</u>	<u>Compliance Status</u>	<u>Violation Description</u>
1	IN	Supervision: Person in Charge present, demonstrates knowledge, and performs duties
2	IN	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	IN	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	IN	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	OUT	Protection from Contamination: Food-contact surfaces: cleaned and sanitized



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FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

<u>Violation Number</u>	<u>Compliance Status</u>	<u>Violation Description</u>
15	IN	Protection from Contamination: Proper disposition of returned, previously served, reconditioned, and unsafe food
16	IN	Potentially Hazardous Food Time/Temperature: Proper cooking time and temperature
17	IN	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	IN	Potentially Hazardous Food Time/Temperature: Proper hot holding temperatures
20	IN	Potentially Hazardous Food Time/Temperature: Proper cold holding temperatures
21	IN	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	OUT	Consumer Advisory: Consumer advisory provided for raw or undercooked foods
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

<u>Violation Number</u>	<u>Compliance Status</u>	<u>Violation Description</u>
45	OUT	Utensils Equipment and Vending: Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used
50	OUT	Physical Facilities: Sewage and waste water properly disposed
53	OUT	Physical Facilities: Physical facilities installed, maintained, and clean

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 Number</u>	<u>Citation Description</u>	<u>COS</u>	<u>Observation</u>	
14	Equipment or utensils not clean to sight and touch. 4-601.11(A) Pf	<input checked="" type="checkbox"/>	KITCHEN AREA. ACCUMULATION OF SOIL AND OLD DRIED FOOD RESIDUE ON FOOD CONTACT SURFACES OF MEAT SLICER AND CAN OPENER. UNITS CLEANED AND SANITIZED CHECKED AND VERIFIED.	Pf
23	Animal foods that are raw, undercooked, or not otherwise processed to eliminate pathogens, served or sold as ready-to-eat or as an ingredient in another ready-to-eat food without an effective written consumer advisory to disclose such food and remind consumers of associated health risks. 3-603.11 Pf	<input type="checkbox"/>	RESTAURANT AREA. MANAGEMENT HAS NOT MET THE DISCLOSURE PORTION OF THIS REGULATION ON THEIR MENU. CHECKBACK WILL BE CONDUCTED IN 90DAYS TO VERIFY COMPLIANCE.	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	<input checked="" type="checkbox"/>	KITCHEN AREA. CHEMICAL PRODUCTS FOUND OVER PREP TABLE BY DISHWASHER AND ON SHELF WHERE CLEAN EQUIPMENT IS STORED. COS. ITEMS RELOCATED TO A SUITABLE STORAGE LOCATION.	P

INSPECTION: GRP

<u>Violation Number</u>	<u>Citation Description</u>	<u>COS</u>	<u>Observation</u>
45	Non food-contact surfaces not free of unnecessary ledges, projections, and crevices or not designed and constructed to allow easy cleaning to facilitate maintenance. 4-202.16	<input type="checkbox"/>	FOOD ENTITY. CRATES AND CRATE STYLE PLATFORMS USED AS PERMANENT STORAGE PLATFORM FOR VARIOUS FOOD ITEMS.



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INSPECTION: GRP

<u>Violation Number</u>	<u>Citation Description</u>	<u>COS</u>	<u>Observation</u>
50	Direct connection exists between the sewage system and a drain originating from equipment in which food, portable equipment, or utensils are placed. 5-402.11	<input type="checkbox"/>	KITCHEN AREA. DRAINLINES OF WAREWASH SINK AND PREP SINK NOT EQUIPPED WITH AN AIR GAP. CHECKBACK WILL BE CONDUCTED IN 90DAYS TO VERIFY COMPLIANCE.
53	Physical facilities not maintained in good repair. 6-501.11	<input type="checkbox"/>	KITCHEN AREA. WALL SHELF LAMINATE SURFACE SEPARATING FROM FOUNDATION.
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	<input type="checkbox"/>	BACKROOM AREA. ACCUMULATION OF VARIOUS ITEMS IN DRY STORAGE ROOM OBSTRUCTING EASY ACCESS.

COMMENTS

A check back inspection will be conducted on or about 90 days from the date of this inspection to verify that all direct connection plumbing violations have been corrected or documentation has been provided stating that the local plumbing authority having jurisdiction allows or requires the subject direct connections. Corrective actions, including the issuance of a stop use order for equipment and/or food service may be taken if the corrections have not been made before the 90 day check back inspection occurs. Please call 1-850-245-5520 to request a check back inspection if the corrections have been made before the scheduled 90 day check back inspection.

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)

LEONEL GARCIA, SANITATION AND SAFETY SPECIALIST

MS. EBONIE MCDANIELS, MANAGER

Print Name and Title

