



NICOLE "NIKKI" FRIED
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Food Safety



Visit # 4092-6000-45
Bureau of Food Inspection
Attention: Business Center
3125 Conner Boulevard, C-26
Tallahassee, FL 32399-1650

FOOD SAFETY INSPECTION REPORT

Chapter 500, Florida Statutes
(850) 245-5520

Print Date: June 07, 2021

Food Entity Number: 30318
Food Entity Name: PINETTA MARKET
Date of Visit: June 07, 2021
Food Entity Address: 146 NE BELLVILLE RD PINETTA, FL 32350
Food Entity Mailing Address: PO Box 68 Pinetta, FL 32350-0068
Food Entity Type/Description: 123/Convenience Store Limited FS
Food Entity Owner: PINETTA MARKET

Owner Code:

INSPECTION SUMMARY - Met Inspection Requirements - Abridged Inspection

On June 07, 2021, PINETTA MARKET was inspected by KENNETH DAVIDSON, a representative of the Florida Department of Agriculture and Consumer Services. Any violations observed during this inspection must be corrected to be in 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 alternative method properly followed
8	IN	PREVENTING CONTAMINATION BY HANDS: 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	IN	PROTECTION FROM CONTAMINATION: Food-contact surfaces: cleaned and sanitized



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<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	N/O	TIME/TEMPERATURE CONTROL FOR SAFETY FOOD: Proper cooking time and temperatures
17	IN	TIME/TEMPERATURE CONTROL FOR SAFETY FOOD: Proper reheating procedures for hot holding
18	IN	TIME/TEMPERATURE CONTROL FOR SAFETY FOOD: Proper cooling time and temperatures
19	IN	TIME/TEMPERATURE CONTROL FOR SAFETY FOOD: Proper hot holding temperatures
20	IN	TIME/TEMPERATURE CONTROL FOR SAFETY FOOD: Proper cold holding temperatures
21	OUT	TIME/TEMPERATURE CONTROL FOR SAFETY FOOD: Proper date marking and disposition
22	N/A	TIME/TEMPERATURE CONTROL FOR SAFETY FOOD: Time as a public health control: procedures and records
23	N/A	CONSUMER ADVISORY: Consumer advisory provided for raw or undercooked foods
24	IN	EMPLOYEE HEALTH: Procedures for responding to vomiting and diarrheal events
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: Conformance with approved procedures
95	IN	SUPERVISION: Certified food protection manager

GOOD RETAIL PRACTICES

<u>Violation Number</u>	<u>Compliance Status</u>	<u>Violation Description</u>
33	OUT	FOOD TEMPERATURE CONTROL: Approved thawing methods used
46	OUT	UTENSILS, EQUIPMENT AND VENDING: Warewashing facilities: installed, maintained, and used; test strips
49	OUT	PHYSICAL FACILITIES: Plumbing installed; proper backflow devices
52	OUT	PHYSICAL FACILITIES: Garbage and refuse properly disposed; facilities maintained
53	OUT	PHYSICAL FACILITIES: Physical facilities installed, maintained, and clean
54	OUT	PHYSICAL FACILITIES: Ventilation and lighting; designated areas used

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

<u>Violation Number</u>	<u>Citation Description</u>	<u>COS Observation</u>
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INSPECTION: RISK BASED

**Violation
Number**

Citation Description

COS Observation

21

Refrigerated, ready-to-eat, time/temperature control for safety food prepared and held for more than 24 hours not clearly marked to indicate the date or day by which the food shall be consumed, sold or discarded when held at 41°F or less for a maximum of 7 days; or the day of preparation not counted as day 1. 3-501.17(A) Pf

BACK ROOM AREA - PREPARED ON SITE BAKED BEANS AND PULLED PORK IN THE WALK IN COOLER DID NOT CONTAIN A DATE MARK. DISCUSSED WITH MANAGEMENT. COS - BOTH PRODUCTS WERE IDENTIFIED WITH A PREPARATION DATE AND PROPERLY DATE MARKED DURING THE INSPECTION.

Pf

26

Poisonous or toxic materials for retail sale not stored or displayed to prevent contamination of food, equipment, utensils, linens, and single-service and single-use articles by separating the poisonous or toxic materials by spacing or partitioning, or locating the poisonous or toxic materials in an area that is not above food, equipment, utensils, linens, and single-service and single-use articles. 7-301.11 P

RETAIL AREA - BUG REPELLANT AND SPRAY ALONG WITH GREASED LIGHTNING DEGREASER WERE STORED OVER BOTTLED WATER. DISCUSSED WITH MANAGEMENT. COS - BOTTLED WATER WAS RELOCATED DURING THE INSPECTION.

P

INSPECTION: GRP

**Violation
Number**

Citation Description

COS Observation

33

Reduced oxygen packaged fish that bears a label indicating it is to be kept frozen until time of use not removed from the reduced oxygen environment prior to thawing under refrigeration, or prior to or immediately upon completion of thawing under cold running water. 3-501.13(E)

BACK ROOM AREA - IN THE WALK IN COOLER INSPECTOR OBSERVED THAWING REDUCED OXYGEN PACKAGED TILAPIA FISH IN ORIGINAL PACKAGE WITHOUT BEING OPENED PRIOR TO THAWING. DISCUSSED WITH MANAGEMENT. COS - PRODUCT WAS REMOVED FROM SERVICE.

46

Test kit or other device that accurately measures the concentration in MG/L of sanitizing solution not provided. 4-302.14 Pf

FOOD ESTABLISHMENT DOES NOT HAVE ANY CHEMICAL TEST STRIPS. TEST STRIPS WERE ORDERED DURING THE INSPECTION.

Pf

49

Plumbing system not maintained in good repair. 5-205.15(B)

BACK ROOM AREA - WARE WASH SINK HAS A LEAK AT THE FAUCET FIXTURE.



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<u>Violation Number</u>	<u>Citation Description</u>	<u>COS</u>	<u>Observation</u>
52	Outdoor storage surface for refuse, recyclables, and returnables not constructed of nonabsorbent material such as concrete or asphalt or is not smooth, durable, and sloped to drain. 5-501.11	<input type="checkbox"/>	OUTSIDE GROUNDS - ESTABLISHMENT'S DUMPSTER IS LOCATED DIRECTLY ON GRASS.
53	Physical facilities not maintained in good repair. 6-501.11	<input type="checkbox"/>	BACK ROOM AREA- CONDIMENT STORAGE AREA HAS DAMAGED FLOORING.
54	Adequate lighting not provided in a handwashing area, food processing or storage area, warewashing area, dressing or locker room, or toilet room. 5K-4.004(1)(b)4., F.A.C	<input type="checkbox"/>	FOOD SERVICE AREA - WALK IN COOLER DOES NOT HAVE ADEQUATE LIGHTING.

NOTICE OF FEES

To review your account balance or to renew your permit, please visit our Food Permit Center at <https://FoodPermit.FDACS.gov>.

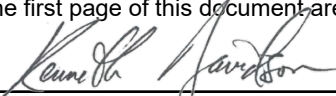
COMMENTS

Due to COVID-19, today's summarized inspection was conducted using risk-based methodology focusing on food safety parameters that are directly associated with sanitation and public health

Reducing Illness handout provided to the establishment.

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)

KENNETH DAVIDSON, ENVIRONMENTAL SPECIALIST I

(Signature of Representative)

WILLIAM WASHINGTON, OWNER

Print Name and Title

