

Food Establishment Inspection Report

Pursuant to Title 25-A of the District of Columbia Municipal Regulations

Bureau of Community Hygiene • Food Safety & Hygiene Inspection Services Division • 899 North Capitol Street, NE-8th Floor • Washington, DC 20002 • food.safety@dc.gov

Establishment Name Clothing Store #2
Address
City/State/Zip Code WASHINGTON, DC 20015
Telephone E-mail address
Date of Inspection 05 / 11 / 2015 Time In 10 : 20 AM Time Out 11 : 15 AM
License Holder
License/Customer No.
License Period 11 / 26 / 2014 - 12 / 26 / 2014 Type of Inspection Routine

Critical Violations	1	COS	1	R	0
Noncritical Violations	0	COS	0	R	0
Certified Food Protection Manager (CFPM)					
CFPM #:					
CFPM Expiration Date: / /					
D.C. licensed trash or solid waste contractor: <u>LAND LORD</u>					
D.C. licensed sewage & liquid waste transport contractor: <u>LAND LORD</u>					
D.C. licensed pesticide operator/contractor: <u>LAND LORD</u>					

Establishment Type: Food Products Risk Category 1 2 3 4 5

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS					
Compliance Status		Demonstration of knowledge		COS	R
<u>IN</u>	<u>OUT</u>	<u>N/A</u>	1. Correct response to questions	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health					
<u>IN</u>	<u>OUT</u>		2 Management awareness; policy present	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		3 Proper use of restriction and exclusion	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices					
<u>IN</u>	<u>OUT</u>	<u>N/O</u>	4 Proper eating, tasting, drinking, or tobacco use	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/O</u>	5 No discharge from eyes, nose, and mouth	<input type="checkbox"/>	<input type="checkbox"/>
Preventing Contamination by Hands					
<u>IN</u>	<u>OUT</u>	<u>N/O</u>	6 Hands clean and properly washed	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	7 No bare hand contact with ready-to-eat foods or approved	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		8 Adequate handwashing sinks properly supplied and accessible	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source					
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	9 Food obtained from approved source	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	10 Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		11 Food in good condition, safe, unadulterated	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	12 Required records available: shellstock tags, parasite destruction	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination					
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	13 Food separated and protected	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/A</u>	14 Food-contact surfaces: cleaned & sanitized	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		15 Proper disposition of returned, previously served, reconditioned, and unsafe food	<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food (TCS Food)					
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	16 Proper cooking time and temperatures	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	17 Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	18 Proper cooling time & temperatures	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	19 Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	20 Proper cold holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	21 Proper date marking & disposition	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	22. Time as a public health control: procedures & records	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory					
<u>IN</u>	<u>OUT</u>	<u>N/A</u>	23. Consumer advisory provided for raw or undercooked foods	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations					
<u>IN</u>	<u>OUT</u>	<u>N/A</u>	24 Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>
Chemical					
<u>IN</u>	<u>OUT</u>	<u>N/A</u>	25 Food additives: approved & properly used	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>	<u>N/A</u>	26. Toxic substances properly identified, stored, used	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures					
<u>IN</u>	<u>OUT</u>	<u>N/A</u>	27. Compliance with variance, specialized process, and HACCP plan	<input type="checkbox"/>	<input type="checkbox"/>

GOOD RETAIL PRACTICES					
Compliance Status		Safe Food and Water		COS	R
<u>N</u>	<u>OUT</u>	<u>N/A</u>	28. Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		29. Water & Ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>
<u>N</u>	<u>OUT</u>	<u>N/A</u>	30. Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control					
<u>IN</u>	<u>OUT</u>		31. Proper cooling methods used; adequate equipment for temperature control	<input type="checkbox"/>	<input type="checkbox"/>
<u>N</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	32. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>
<u>N</u>	<u>OUT</u>	<u>N/A</u> <u>N/O</u>	33. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		34. Thermometers provided & accurate	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification					
<u>IN</u>	<u>OUT</u>		35. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination					
<u>IN</u>	<u>OUT</u>		36. Insects, rodents, & animals not present	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		37. Contamination prevented during food preparation, storage, & display	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		38. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		39. Wiping cloths: properly used & stored	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		40. Washing fruits & vegetables	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils					
<u>IN</u>	<u>OUT</u>		41. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		42. Utensils, equipment & linens: properly stored, dried, & handled	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		43. Single-use/single-service articles: properly stored & used	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		44. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment, and Vending					
<u>IN</u>	<u>OUT</u>		45. Food and nonfood-contact surfaces cleanable, properly designed, constructed, & used	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		46. Warewashing facilities: installed, maintained, & used; test strips	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		47. Nonfood-contact surfaces clean	<input type="checkbox"/>	<input type="checkbox"/>
Physical Facilities					
<u>IN</u>	<u>OUT</u>		48. Hot & cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		49. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		50. Sewage & waste water properly disposed	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		51. Toilet facilities: properly constructed, supplied, & cleaned	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		52. Garbage & refuse properly disposed, facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		53. Physical facilities: installed, maintained, & clean	<input type="checkbox"/>	<input type="checkbox"/>
<u>IN</u>	<u>OUT</u>		54. Adequate ventilation & lighting; designated areas used	<input type="checkbox"/>	<input type="checkbox"/>

IN = in compliance OUT = not in compliance N/O = not observed
N/A = not applicable COS = corrected on-site R = repeat violation

Establishment Name [REDACTED]

Establishment Address [REDACTED]

OBSERVATIONS	25 DCMR	CORRECTIVE ACTIONS
26 - CHEMICALS NOT STORED PROPERLY (Corrected On Site)	3400 1	Poisonous or toxic materials shall be stored so they cannot contaminate food, equipment, utensils, linens, and single-service and single-use articles by: (a) Separating the poisonous or toxic materials by physically separating or partitioning by a wall or structure; and (b) Locating the poisonous or toxic materials in an area that is not above food, equipment, utensils, linens, and single-service or single-use articles. This paragraph does not apply to equipment and utensil cleaners and sanitizers that are stored in warewashing areas for availability and convenience if the materials are stored to prevent contamination of food, equipment, utensils, linens, and single-service and single-use articles.

TEMPERATURES							
Item/Location	Temp	Item/Location	Temp	Item/Location	Temp	Item/Location	Temp
(Refrigerator - beverage)	38.9F						

Inspector Comments:
 NO CRITICAL VIOLATIONS WERE OBSERVED. IF YOU HAVE ANY QUESTIONS PLEASE CALL AREA SUPERVISOR MR. RONNIE TAYLOR AT 202-442-9037.

Person-in-Charge (Signature) [REDACTED] (Print)	05/11/2015 Date
Inspector (Signature) VICTOR CURRIE (Print)	088 Badge #
	05/11/2015 Date