

HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Esta	ablishment:	crty Hart		Date	24	1/2 P	age 1 of _2_	No. of Risk Factor/Intervention Violations
	ress 65 D	o Highway_		Time i	DD.2	Ti	me out[[No. of Repeat Risk Factor/Intervention Violations
Owi	ner/Permit Hold	er Leanist's petroleun Inc.		Risk (ateg	ory: n		Total Violations
Ema	ail:	321.01.20		Phone				Inspection Status: Green Yellow Red
Inst	ection Type:	Routine Re-inspection Pre-op				llness	Investigation	
		FOODBORNE ILLNESS RIS					- W	
		Circle designated compliance status (IN, OUT, N						
		IN = in compliance OUT= not in compliance NO =						in appropriate box for COS and/or R
		in a in compliance do 1 - not in compliance no -	· HOLOD	served	N/A -	not ab	plicable COS =	corrected on-site K = repeat violation
Com	pliance Status	G 314	COS	R		omplia	ance Status	cos
- (6	Supervision Person in charge present, demonstrates knowledge and			1 -	-		Protection from Contamination
1	LIN OUT	performs duties			J L	15 I	NOUT N/A NO	Food separated and protected
2	IN OUT N/A	Certified Food Protection Manager			1	16	OUT N/A	Food-contact surfaces cleaned and sanitized
		Employee Health			J	17 I	N OUT N/A NO	Proper disposition or returned, previously served, reconditioned & unsafe food
3	NOUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Time / Temperature Control for Safety
4	INOUT	Proper use of restriction and exclusion			1	18 I	N OUT N/A NO	Proper cooking time and temperature
5	INDUT	Procedures for responding to vomiting and diarrheal events				19 I	N OUT NA NO	Proper reheating procedures for hot holding
		Good Hygiene Practices			1 [20 I	N OUT N/A	Proper cooling time and temperatures
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use] [:	21 [N OUT N/A NO	Proper hot holding temperatures
7	IN OUT (10)	No discharge from eyes, nose, mouth				22 1	N OUT N/A (IO)	Proper cold holding temperatures
		Preventing Contamination by Hands			ļ [:	23	OUT N/A NO	Proper date marking and disposition
8	IN OUT (NO)	Hands clean & properly washed			L	24]	N OU NA NO	Time as a Public Health Control: procedures and records
9	IN OUT N/A NO	No bare hand contact with RTE food				·		Consumer Advisory
10	OUT	Adequate handwashing sinks properly supplied & accessible			2	25 [1	OUTNA	Consumer advisory provided for raw/undercooked foods
		Approved Source						Highly Susceptible Populations
11	D OUT	Food obtained from an approved source	-		2	26 11	N OUT N/A	Pasteurized foods used; prohibited foods not offered
12	IN OUT N/A 10	Food received at proper temperature	-		_			d / Color Additives and Toxic Substances
13	(IN OUT	Food in good condition, safe & unadulterated	1	-		-	N OUT N/A	Food additives: approved and properly used
14	IN OUT MANO	Req. records available: shell stock tags, parasite destruction		4		28 1	DUT N/A	Toxic substances properly identified, stored and used
	Risk factors a Prevalent cont	re improper practices or procedures identified as the n ributing factors of foodborne illness or injury. Public H are control measures to prevent foodborne illness or in	nost ealth		_		Co	onformance with Approved Procedures
	Interventions a	are control measures to prevent foodborne illness or in	jury.	1	1	9 11	NOUTANA	Compliance with variance/specialized process/HACCP
						ACTIC		
		Good retail practices are preventative measures						
Mark	X X in box if num	bered item is not in compliance Mark "X" on ap	propria	te box	for CC	OS and/	or COS =	-corrected on-site during inspection R=repeat violation
omp	liance Status		cos	R	Co	mpliar	nce Status	cos
		Safe Food and Water						Proper Use of Utensils
30	Pasteurized	eggs used where required			4	3	In-use utensi	s properly stored
31		from approved source		\sqcup	4	4	Utensils, equi	ipment & linens: properly stored, dried, & handled
32	Variance ob	tained for specialized processing methods		Щ	4		Single-use/si	ngle-service articles; properly stored & used
22	Div.	Food Temperature Control			4	6	Gloves used	
33	_	ng methods used: adequate equipment for temp, control	-				1	Utensils, Equipment and Vending
34		roperfy cooked for hot holding awing methods used		\vdash	4			n-food contact surfaces cleanable,
36	- 11	ers provided and accurate	-		41	_		gned, constructed, & used
30	THEIIIOIIIete	Food Identification			49	9	vvarewasning	: installed, maintained, & used: test strips
37	Food proper	y labeled: original container	ľ.		50	1	Hot & cold wa	Physical Facilities
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Prevention of Food Contamination		-	51			alled, proper backflow devices
38	Insects, rode	nts, & animals not present	Г		52	_		ste water properly disposed
39	Contamination	on prevented during food preparation, storage & display			53	_		s properly constructed, supplied, & cleaned
10	Personal cle			\Box	54		-	fuse properly disposed, facilities maintained
н	Wiping cloths	s: properly used & stored			55	5		ties installed, maintained, & clean
12	Washing fruit	ts & vegetables			56			tilation & lighting, designated areas used
	10							
Уре	of Operation:							License Posted: N
Disc	ussion with Per	son-in-Charge:						Follow-Up: Y N
			^					Follow-Up Date:
		A TO (C)				· · ·		, onow op bate.
igna	ature of Person	in Charge: Status Lann						Date:
3igna	ature of Inspect	or:) ')						Date: 12 / 2 / 2 / 2 / 2
	-							Date: 12/2//202)



HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Es	tablishmer	t: Ferry Mo	urk				Date	: 12/14 2021	Page _	Zo	Z
Ad	dress: 6	os Du Hic	ม _ก นาดป _ก				Corr	e: \2/14 \ ZóZ \ appliance Achieved: \2 L	21/202)	
			0		TEMPERATURE OBS	ERVATIONS					
		Item / Location		Temp.	Item / Location		Temp.	Item / Locut	ion		Temp.
			_								
				(OBSERVATIONS AND/OR COR	RECTIVE ACTION	IS				
V	Item Number	Section of Code			Descript	ion of Violation			1		orrected
	Hallibei									or C	05
	1										
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			100	o UIOK	ations observed	during tim	ru 1	of inspection -			
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Sign	ature of Po	erson in Charge:	Starle	Pa	ywe.			Date:			
	ature of In			5	27				1.0	1 - 0	
3'		oponor.	<u> </u>	-(/				Date. 12	11412	170	



HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Establishment: Heoonalds	Di	Date 2142 Page 1 of _		e 1 of _2_	No. of Risk Factor/Intervention Violations			
Address: 9 Dobson way	Ti	me in	tı:	.00	Time	e out[\'45	No. of Repeat Risk Factor/Intervention Violations	
Owner/Permit Holder: JBIC Managmen & LLC	-	isk Ca	8.5	-	_		Total Violations	
Email:	\rightarrow	none:		37-	سا		Inspection Status: Green Yellow Red	-
Inspection Type: Routine Re-inspection Pre-opera				lilnos	e In	vestigation		
FOODBORNE ILLNESS RISK F							Complaint Other	
Circle designated compliance status (IN, OUT, N/A,					DIOI C		in appropriate box for COS and/or R	
IN = in compliance OUT= not in compliance NO = not					anoli			
Compliance Status C Supervision	os	R	ŀ	Com	plian	ce Status	Protection from Contamination	<u> </u> R
1 Person in charge present, demonstrates knowledge and			1	15		OUT N/A NO	Food separated and protected	
performs duties			-		Jak		<u> </u>	-
			ŀ	16	-	OUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,	-
Employee Health Management/food employees & conditional employee;			-	17	IN	OUT (WA)NO	reconditioned & unsafe food	Щ
knowledge, responsibilities and reporting							Time / Temperature Control for Safety	
4 IN DUT Proper use of restriction and exclusion			-	18	-	OUT N/A(NO)	Proper cooking time and temperature	Ш
5 NOUT Procedures for responding to vomiting and diarrheal events			-	19	-	OUT N/A (IO)	Proper reheating procedures for hot holding	Ш
Good Hygiene Practices 6 IN OUT NO Proper eating, tasting, drinking, or tobacco use			-	20	-	OUT N/ANO	Proper cooling time and temperatures	+
6 IN OUT (NO) Proper eating, tasting, drinking, or tobacco use 7 IN OUT (NO) No discharge from eyes, nose, mouth			-	21	} •≺	OUT N/A NO	Proper hot holding temperatures Proper cold holding temperatures	+
Preventing Contamination by Hands			ŀ	23	hu/	OUT N/A NO	Proper date marking and disposition	+
8 IN OUT (O) Hands clean & properly washed			ŀ	24	1	ON A'N TU	Time as a Public Health Control: procedures and records	+
9 IN OUT N/A NO No bare hand contact with RTE food	\dashv	\neg	ŀ				Consumer Advisory	
10 INOUT Adequate handwashing sinks properly supplied & accessible			ľ	25	IN C	OUT (NA)	Consumer advisory provided for raw/undercooked foods	
Approved Source		. :			-		Highly Susceptible Populations	
11 INOUT Food obtained from an approved source				26		DUT N/A	Pasteurized foods used; prohibited foods not offered	
12 IN OUT N/A NO Food received at proper temperature	_						d / Color Additives and Toxic Substances	
13 INDUT Food in good condition, safe & unadulterated				27 (7	OUT N/A	Food additives: approved and properly used	Ш
14 IN OUT N/ANO Req. records available; shell stock tags, parasite destruction			ŀ	28	(IN)	DUT N/A	Toxic substances properly identified, stored and used	
Risk factors are improper 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.	1		-		_	-	onformance with Approved Procedures	
Interventions are control measures to prevent foodbome illness or injury	-			19	IN C	DUT(N/A)	Compliance with variance/specialized process/HACCP	
		TAIL						
Good retail practices are preventative measures to display the management of the same of t								
Mark "X" in box if numbered item is not in compliance Mark "X" on appro	priate	DOX	JI C	,03 a	HU/UI	CO3 -	=corrected on-site during inspection R=repeat violation	
	os	R	С	omp	lianc	e Status	cos	R
Safe Food and Water 30 Pasteurized eggs used where required			H	43		In use utensi	Proper Use of Utensils	
31 Water & Ice from approved source	\dashv	\dashv	_	44			ipment & linens: properly stored, dried, & handled	Н
32 Variance obtained for specialized processing methods	\dashv	\dashv	\vdash	45		1 1	ingle-service articles: properly stored & used	H
Food Temperature Control				46		Gloves used		\square
33 Proper cooling methods used: adequate equipment for temp, control							Utensils, Equipment and Vending	
34 Plant food properly cooked for hot holding				47 ·		Food and no	n-food contact surfaces cleanable,	
35 Approved thawing methods used			L	48		Properly desi	gned, constructed, & used	
36 Thermometers provided and accurate		_		49		Warewashing	r installed, maintained, & used: test strips	
Food Identification		_					Physical Facilities	
37 Food properly labeled: original container Prevention of Food Contamination		_	\vdash	50			ater available adequate pressure talled, proper backflow devices	-
38 Insects, rodents, & animals not present		-	-	52			aste water properly disposed	\vdash
39 Contamination prevented during food preparation, storage & display	\dashv	\dashv	\vdash	53			s properly constructed, supplied, & cleaned	
40 Personal cleanliness		\dashv	\vdash	54			fuse properly disposed, facilities maintained	\dashv
41 Wiping cloths: properly used & stored			1	55	×		ties installed, maintained, & clean	
42 Washing fruits & vegetables			~	56		Adequate ver	ntilation & lighting, designated areas used	
T								
Type of Operation:							License Posted: (Y)	N
Discussion with Person-in-Charge:							Follow-Up: Y	N
							Follow-Up Date:	
Signature of Person in Charge: () A / A 2							Date: 12/6/262	\dashv
							1-1-1-2-2-1	\dashv
Signature of Inspector:							Date: 12 / 6 / 102\	



HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Est	ablishmer	it McDona	ld S				Date: [2] 6 202	Page _2_ of _2/
	iress: 👊	Dobson u					Compliance Achieved:	
			4		TEMPERATURE OBSER			
		Item / Location	-	Temp.	Item / Location	Tex	np. Item/L	ocation Temp.
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		- -			··			
		···						
				0	BSERVATIONS AND/OR CORRE	ECTIVE ACTIONS		
V	Item Number	Section of Code			Description	of Violation		Dated Corrected or COS
			Kitchan	. !				
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C	55	6-501 195 .	HOOD	8tick	y frequency con	xpined. 1	ast service.	May 2021
			00 9	ob O	y frequency, con	start com	pany for home	1 service.
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Sign	ature of D	erson in Charge:	Lata	5/2	<u> </u>		Date:	12/6/01
_			-xy me	5	<u> </u>	-		/ 9
Sign	ature of Ir	rspector:	in L	-/	1		Date:	121612021



HEALTH DIVISION 432 Daniel Wehster Highway Merrimack NH, 03054 (603) 420-1730



Est	ablishn	nent: Bi	te Me Kupcakt		Date:	2/9/2	Pag	e 1 of <u>Z</u>	No. of Ris	k Factor/Intervention	Violation	15
	dress: ,		ond coort	1	Time i	11:50	Tim	e out:(2 , 3 (No. of Repeat Ris	k Factor/Intervention	Violation	1S (1)
Ov	ner/Pe	rmit Hold	er: Bik he Kopcakes LLC		Risk C	ategory				Total	Violation	15 17
Em					Phone				Inspection Status:	Green Yellow	Red	
⊢	pection	Tupor	(Routine) Re-inspection Pre-ope								1100	
1113	pecuon	туре.	Routine Re-inspection Pre-ope					vestigation	Complaint	Other		
			Circle designated compliance status (IN, OUT, N/	_			BLIC			000		
<u> </u>					-		hI		in appropriate box for			
			IN = in compliance OUT= not in compliance NO = r	TOL OD:	served	N/A = nc	it appi	icable COS =	corrected on-site K =	repeat violation		
Con	pliance	Status		cos	R	Con	nplian	ice Status			CC	OS R
	FX		Supervision Person in charge present, demonstrates knowledge and			-	-		Protection from (ontamination		
1	IN DU		performs duties			15	IN.	DI NIA NO	Food separated and pr	otected		
2	(IN DU	T N/A	Certified Food Protection Manager	<u>L_</u>		16	~	OUT N/A	Food-contact surfaces			\perp
			Employee Health			17	IN	OUT N/A NO	reconditioned & unsafe	turned, previously served, food		
3	(IN)bu	ΙT	Management/food employees & conditional employee; knowledge, responsibilities and reporting					1	Time / Temperature	Control for Safety		
4	IN DU		Proper use of restriction and exclusion			18	IN	OUT N/ANO	Proper cooking time an	d temperature		\top
5	IN OU	Т	Procedures for responding to vomiting and diarrheal events			19	IN	OUT N/A NO	Proper reheating proce	dures for hot holding		
		F	Good Hygiene Practices			20		OUT N/A VO	Proper cooling time and	l temperatures		
6	IN OU		Proper eating, tasting, drinking, or tobacco use	ļ		21		OUT N/A(NO)	Proper hat holding temp			
7	IN ON	T (NO)	No discharge from eyes, nose, mouth	<u> </u>		22	\rightarrow	DUT N/A NO	Proper cold holding term			
8	(INOU	T NO	Preventing Contamination by Hands	T	1	23	-	OUT N/A NO	Proper date marking an			
9		T N/A NO	Hands clean & properly washed No bare hand contact with RTE food	-	+	24	IN	ON NA TUO		Control: procedures and rec	ords	
10	(INCOU		Adequate handwashing sinks properly supplied & accessible			25	12	OUT N/A	Consumer A	vided for raw/undercooked for	ada T	
	(II)		Approved Source	ļ		23		POTEN	Highly Susceptible		ous	
11	ÎN)OU	т _	Food obtained from an approved source			26	IN	OUT N/A		prohibited foods not offered		
12	IN OU	T N/A NO	Food received at proper temperature					Foo	d / Color Additives a			
13	IN OU	т	Food in good condition, safe & unadulterated			27	IN	OUT N/A	Food additives: approve	d and properly used		
14	IN OU	(N/A)NO	Req. records available; shell stock tags, parasite destruction			28	N	DUT N/A	Toxic substances proper	ly identified, stored and use	d	
	Ris	k factors a	re improper practices or procedures identified as the m ributing factors of foodbome illness or injury. Public He ire control measures to prevent foodborne illness or inju	ost				C	onformance with App	proved Procedures		
	Inte	rventions a	re control measures to prevent foodborne illness or inju	ury.		19	IN	OUT N/A	Compliance with variance	e/specialized process/HACC	.p	
			G	DOD I	RETAI	PRAC	TICES	3				
			Good retail practices are preventative measures									
Mai	k "X" in	box if num	bered item is not in compliance Mark "X" on app	proprie	ite box	or COS	and/o	r COS	corrected on-site dur	ing inspection R=rep	eat violat	ion
om	pliance	Status		cos	R	Com	pliano	e Status			COS	S R
			Safe Food and Water				1	1.5	Proper Use of	Utensils		
30	 		eggs used where required		+	43	+		ils properly stored			\dashv
31	-		from approved source tained for specialized processing methods		+	44	+	-	ipment & linens: properly		-	-
J.E	ll	Variance ob	Food Temperature Control			46	+	Gloves used	ngle-service articles: prop	erly stored & used	_	
33		Proper cooli	ng methods used: adequate equipment for temp, control				1	010700 0000	Utensils, Equipmen	t and Vending		
34			roperty cooked for hot holding			47 -	T -	Food and no	n-food contact surfaces cl		$\overline{}$	\top
35		Approved th	awing methods used			48	1	Properly des	igned, constructed, & use	d		
36		Thermomete	ers provided and accurate			49		Warewashing	g: installed, maintained, &	used: test strips		
	,		Food Identification						Physical Fac			
37		Food proper	ly labeled; original container		Щ	50	-	_	ater available adequate pr		_	4
20	т.		Prevention of Food Contamination			51	-		talled, proper backflow de		\rightarrow	
38			on prevented during food preparation, storage & display			52	-		aste water properly dispos s properly constructed, su		-+	+
40		Personal de			++	54	+	1	fuse properly disposed, fa			-
41	-		s: properly used & stored			55	+		ities installed, maintained,		_	-
42	_		ts & vegetables			56			ntilation & lighting, designa			+
								·				
Тур	e of Op	peration:								License Posted:	<u>(Y)</u>	N
Dis	cussion	with Per	son-in-Charge:							Follow-Up:	Y	
				Λ						Follow-Up Date:		
QIA-	nature :	of Doron-	in Charge:	4						Date:		
			107							Date:	a 1	
Sig	nature o	of Inspect	or: / m///							Date: 12/9/20	171	



HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Establishme	ent: 131tc He 160	plakez		Date: [2	19/1021	Page <u>2</u> of <u>2</u>
Address: 🗸	4 Mound Cou			Compliar	ice Achieved: 12/9	1021
			TEMPERATURE OBSERVAT	IONS		
	Item / Location	Temp.	Item / Location	Temp.	Item / Location	оп Тетр
		OBS	ERVATIONS AND/OR CORRECTIV	VE ACTIONS		
V Item Number	Section of Code		Description of Vi	olation		Dated Corrected or COS
						5, 555
	 					
		No on	ovations obscived di	cina time a	+ inspection	
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	+					
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	 	. /				
		W/p				
		Mai	111			
ignature of	Person in Charge:	MAUL	401		Date:	·
Signature of		-109				19/2021
ARTIGIUIE OI	morocion.		7		Date. 12	19/602



HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Est	ablishment: 2	te Aid #1090		Date:	7/9/21	Page	e 1 of _2.	No. of Risk Factor/Intervention Violation	1S 25
Add	dress: 416 Pt	N Highway_	i	Time i	n11:00	Time	out[t40	No. of Repeat Risk Factor/Intervention Violation	is Ø
		er like Ard of New Hampenin	۰.		ategory			Total Violation	_
Em		SISC 76-0 DE NOO ROUTESTITI		Phone				Inspection Status: Green Yellow Red	790
		Parinanastian Dec							
ms	pection Type:		peratio				restigation	Complaint Other	
		FOODBORNE ILLNESS RE				BLIC			
		Circle designated compliance status (IN, OUT, I						in appropriate box for COS and/or R	
		IN = in compliance OUT= not in compliance NO	not ob	served	N/A = not	t applic	cable COS =	corrected on-site R = repeat violation	
Com	pliance Status		COS	R	Com	pliano	e Status	CC	S R
		Supervision						Protection from Contamination	
1	INOUT	Person in charge present, demonstrates knowledge and performs duties			15	IN	UT N/A NO	Food separated and protected	
2	IN OUT N/A	Certified Food Protection Manager	_	+	16	INC	DUT N/A	Food-contact surfaces cleaned and sanitized	+
		Employee Health			17		ON AVA TUC	Proper disposition or returned, previously served,	
3	FROUT	Management/food employees & conditional employee;	Т	1		1		reconditioned & unsafe food	
	IN OUT	knowledge, responsibilities and reporting						Time / Temperature Control for Safety	
4	INDUT	Proper use of restriction and exclusion		-	18	_	ON AND TUC	Proper cooking time and temperature	
5	INDUT	Procedures for responding to vomiting and diarrheal events			19	_	OUT TO NO	Proper reheating procedures for hot holding	_
_	- C-V	Good Hygiene Practices			20		OUT NAMO	Proper cooling time and temperatures	\rightarrow
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use	-	-	21	-	DUT (VANO	Proper hot holding temperatures	\rightarrow
7	IN OUT (NO)	No discharge from eyes, nose, mouth			22	1	ON AN TUC	Proper cold holding temperatures	_
		Preventing Contamination by Hands		-	23	$\overline{}$	OUT N/A NO	Proper date marking and disposition	
8	IN OUT (NO)	Hands clean & properly washed			24	INC	DUT WANO	Time as a Public Health Control; procedures and records	
9	IN OUT N/A NO	No bare hand contact with RTE food		_	11.4		10	Consumer Advisory	
10	(N) PUT	Adequate handwashing sinks properly supplied & accessible			25	IN O	uf N/A)	Consumer advisory provided for raw/undercooked foods	
44	Z. January	Approved Source				1		Highly Susceptible Populations	
11	TUO NI IN OUT N/(NO)	Food obtained from an approved source	-	-	26	TINC	OUT(N/A)	Pasteurized foods used; prohibited foods not offered	\perp
12	<u></u>	Food received at proper temperature	+-	-		T		d / Color Additives and Toxic Substances	
13	TNOUT NAMO	Food in good condition, safe & unadulterated	-	-	27	10	ארער (ארער	Food additives: approved and properly used	
14		Req, records available; shell stock tags, parasite destruction			28	INYC	OUT N/A	Toxic substances properly identified, stored and used	
	Risk factors a Prevalent conf	re improper practices or procedures identified as the tributing factors of foodbome illness or injury. Public I- are control measures to prevent foodbome illness or i	most lealth		-		7	onformance with Approved Procedures	
	Interventions a	are control measures to prevent foodborne illness or i	njury.		19	INO	U(N/A)	Compliance with variance/specialized process/HACCP	
			GOOD !	RETAI	L PRACI	TICES			
		Good retail practices are preventative measure	s to con	trol the a	ddition of pa	athogen	ns, chemicals, a	and physical objects into foods.	
Mar	'k "X" in box if num	nbered item is not in compliance Mark "X" on a	ppropri	ate box	for COS a	and/or	COS	corrected on-site during inspection R=repeat violat	ion
omi	pliance Status		cos	R	Comr	oliance	Status	co	S R
		Safe Food and Water	1					Proper Use of Utensils	
30	Pasteurized	eggs used where required			43		In-use utensi	ils properly stored	
31	Water & Ice	from approved source			44		Utensils, equ	ripment & linens: properly stored, dried, & handled	
32	Variance ob	tained for specialized processing methods			45		Single-use/si	ingle-service articles: properly stored & used	
		Food Temperature Control			46		Gloves used	properly	
33	Proper cooli	ing methods used: adequate equipment for temp, control			- 1			Utensils, Equipment and Vending	1.7
34	Plant food p	roperly cooked for hot holding			47 -		Food and no	n-food contact surfaces cleanable,	
35	Approved th	awing methods used			48		Properly desi	gned, constructed, & used	
36	Thermomete	ers provided and accurate			49		Warewashing	g: installed, maintained, & used: test strips	
		Food Identification						Physical Facilities	
37	Food proper	ly labeled: original container		Щ	50		Hot & cold wa	ater available adequate pressure	\perp
		Prevention of Food Contamination			51		Plumbing ins	talled, proper backflow devices	
38	Insects, rode	ents, & animals not present	ļ	\perp	52			aste water properly disposed	\perp
39		on prevented during food preparation, storage & display	-	\perp	53		Toilet facilitie	s properly constructed, supplied, & cleaned	\perp
40	Personal de		1	$\perp \perp \mid$	54	\sqcup	-	fuse properly disposed, facilities maintained	\perp
41		s: properly used & stored			55			ities installed, maintained, & clean	
42	Washing frui	its & vegetables			56		Adequate ver	ntilation & lighting, designated areas used	
Tvn	e of Operation:							License Posted:	N.
	· · · · · · · · · · · · · · · · · · ·	tOl							173
Disc	cussion with Per	rson-in-Charge:						Follow-Up: Y	(N)
								Follow-Up Date:	
Sigr	nature of Person	in Charge: Many Tollen	\					Date: 12/9/2021	
	nature of Inspec							Date: (2/9/202)	
2'		1 1						1211602	
		L							



HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



	nt: 12ite Aid			Date: 12/9	12021	Page _2 of _Z
Address: 👍	6 PW Hique	NOW		Compliance	Achieved: 12/9	1/2021
			TEMPERATURE OBSERVA	LLIUNS		
	Item / Location	Temp.	Item / Location	Temp.	Item / Locati	on Temp
						
Itom		OBSERV.	ATIONS AND/OR CORRECT	FIVE ACTIONS		
V Item Number	Section of Code		Description of	Violation		Dated Corrected or COS
				<u> </u>		
-						
		<u>luo violation</u>	ns observed don	ng time of ins	ection '	
-						
					<u> </u>	
		= 1- 				
	-					
	erson in Charge:	11 6 11 1			r/	1917001
		al Fallan			Date: 2	/ / / 2 - /
ignature of Ir	spector:	-)//			Date:	1912021



HEALTH DIVISION 432 Daniel Wehster Highway Merrimack NH, 03054 (603) 420-1730



Establishment: HAUA		Date	12/	15/21	Pag	ge 1 of _)	No. of F	Risk Factor/Intervention Vio	olation	s 2
Address: 4 (entirental BWC)			·	7:00		ne out. 60		Risk Factor/Intervention Vic		
Owner/Permit Holder: Hana UC / Patchana	_			tegory	מיי			Total Vic		-
Email:	_	Phor			_	H H H 44 2	Inspection Statu		Red	3
Inspection Type: (Routine) Re-inspection Pre-ope			_			vestigation	Complain		Reu	
FOODBORNE ILLNESS RISH			S A					Other		
Circle designated compliance status (IN, OUT, N/							in appropriate box f	or COS and/or R		
IN = in compliance OUT= not in compliance NO = r					t appl					
Compliance Status								Topodi Tiolation		
Supervision	cos	R		Con	npiiar	nce Status	Protection from	Contamination	co:	S R
1 Person in charge present, demonstrates knowledge and	T	T	7	15	IN	ON AN TUC	Food separated and			$\neg \neg$
performs duties 2 IN OUT N/A Certified Food Protection Manager	-	+	\dashv	16	-	OUT N/A		·	+	+
Employee Health			\dashv		\sim	OUT N/A NO		s cleaned and sanitized returned, previously served.	+-	+
		_	+	17	IIN		reconditioned & unsa	fe food		
knowledge, responsibilities and reporting		1	_				Time / Temperatur	e Control for Safety		
Proper use of restriction and exclusion Procedures for responding to varieting and diarrheal events.	<u> </u>	+-	4	18	_	OUT N/A NO	Proper cooking time	and temperature		
	1	Ш.	_	19	-	OUT N/A(NO)		cedures for hot holding		+
Good Hygiene Practices 6 IN OUT NO Proper eating, tasting, drinking, or tobacco use	Т	1	4	20	_	OUT N/A NO	Proper cooling time a	· · · · · · · · · · · · · · · · · · ·	-	
7 IN OUT NO No discharge from eyes, nose, mouth	_	+	17	22	_	OUT N/A NO	Proper hot holding te Proper cold holding to	<u> </u>	+	+
Preventing Contamination by Hands	1		1	23	-	OUT N/A NO	Proper date marking	· · · · · · · · · · · · · · · · · · ·	+	+
8 NOUT NO Hands clean & properly washed	<u> </u>	T	1	24	-	OUT N/ANO		Ith Control: procedures and record		+
9 INDUT N/A NO No bare hand contact with RTE food	_	\top					Consumer			
10 IN(OUT) Adequate handwashing sinks properly supplied & accessible			1	25	(IN)	OUT N/A		rovided for raw/undercooked foods		T
Approved Source							Highly Suscepti	ble Populations		
11 NOUT Food obtained from an approved source		_	-	26		OUT N/A	Pasteurized foods use	ed; prohibited foods not offered		
12 IN OUT N/A O Food received at proper temperature 13 IN DUT Food in good condition, safe & unadulterated		-	-		1			and Toxic Substances		
13 INDUT Food in good condition, safe & unadulterated 14 INDUT N/A NO Req. records available: shell stock tags, parasite destruction		-	-	27	100	OUT N/A		ved and properly used	-	
The state of the s	not.		1	20	ישו			erly identified, stored and used		
Risk factors are improper practices or procedures identified as the me Prevalent contributing factors of foodborne illness or injury. Public Hea Interventions are control measures to prevent foodborne illness or inju	alth			10				pproved Procedures		
			L	19		OUT N/A	Compliance with varia	nce/specialized process/HACCP		
Good retail practices are preventative measures t			-	PRACI			-4.5			
Mark "X" in box if numbered item is not in compliance Mark "X" on app							corrected on-site di		violatic	30
Safe Food and Water	cos	R	1	Com	olianc	e Status	Proper Use	of Literails	COS	R
30 Pasteurized eggs used where required				43	T	In-use utensil	s properly stored	TO COLUMNIA	Т	\top
31 Water & Ice from approved source				44		Utensils, equi	pment & linens: proper	ly stored, dried, & handled	1-	+-1
32 Variance obtained for specialized processing methods				45		Single-use/sir	ngle-service articles: pr	operly stored & used		\Box
Food Temperature Control				46		Gloves used	properly			
Proper cooling methods used; adequate equipment for temp. control		<u> </u>					Utensila, Equipme			
34 Plant food properly cooked for hot holding 35 Approved thawing methods used				47	-		-food contact surfaces		 	\perp
36 Thermometers provided and accurate		-	G	48	X		gned, constructed, & us		-	
Food Identification				43		wasning	installed, maintained,			\perp
37 Food properly labeled: original container				50		Hot & cold wa	ter available adequate		1	\top
Prevention of Food Contamination				51			elled, proper backflow of		+	1-1
3B Insects, rodents, & animals not present				52		Sewage & was	ste water properly dispo	osed	\top	11
39 Contamination prevented during food preparation, storage & display			ĺ	53		Toilet facilities	properly constructed, a	supplied, & cleaned		
40 Personal cleanliness				54		Garbage & ref	use properly disposed,	facilities maintained		
41 Wiping cloths: properly used & stored		-		55			ies installed, maintaine	<u> </u>		
42 Washing fruits & vegetables				56		Adequate vent	tilation & lighting, design	nated areas used		
Type of Operation:								License Posted:	(V)	N
Discussion with Person-in-Charge:								Follow-Up: 10 days	*	NI NI
and the second of the second o										IN
								Follow-Up Date:		
Signature of Person in Charge:			_					Date:		
Signature of Inspector:	AA							Date: [2] 15/2021		



HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



		THANA				D	ate: 11	Page 7_0	of _2_
Ad	dress: 📭	continenta	1 Blud		ompliance Achieved:				
		Item / Location		70	TEMPERATURE OBSERVAT				H
		Item / Location		Temp.	Item / Location	Temp	Item / Locution		Temp.
					OBSERVATIONS AND/OR CORRECTI	STE ACTRIONIC			
17	Item		1					Detect/	Corrected
V	Number	Section of Code			Description of V	iolation		,	COS
			Kitchen	1					
PS-	10	B-205 - []		_	sant Hackard I., chan	1+	t to a lubusus sebaration	, * m	e pecut
		8-203-11			sink blocked by stoo			-	states (O)
			1		Hound stake most be			-	
<u>_</u>	48	4-201-11	Observe.	d for	od stored in tupperwa	K Plact	ic containers , not		
			food c	rade	containers. Disconti	MUC OJE	store food only		
					ide containers.				
D	22	3 - 50 -					inhe l sr'	1	
		3-1011119	ALL To	T POL	d must be kept at	On ALCO	YEAR OF DD.	-	
			Partic	FOO	d must be kept at	ther hel	ow . \		
									
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Signa	ature of Pe	erson in Charge:		1			Date:	-	
	ature of In		115		Pallan		Date: \ 2 15	2021	
			-/-		NYM		(4)	W61	