

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



Establish	ment: Pla	anet fitness		Date:	8	51/2	Page 1 of <b>2</b>	No. of Risk Factor/Intervention Violations
Address:	360 V	ow Highway.		Time	in2	30	Time out : 45	No. of Repeat Risk Factor/Intervention Violations
Owner/Pe	ermit Hold	er Plane + Fitness Assetto La	ے	Risk	Cate	gory:	E	Total Violations
Email:	_			Phon		<u> </u>		Inspection Status Green Yellow Red
Inspection	n Type:	Routine Re-inspection Pre-o	peration			Illne		
inopodio.	111900.	FOODBORNE ILLNESS RI	:		Z A BI		ss Investigation	Complaint Other
-		Circle designated compliance status (IN, OUT,						
				_				In appropriate box for COS and/or R
		IN = in compliance OUT= not in compliance NO	= not obs	serve	I N//A	\ = not	applicable COS =	corrected on-site R = repeat violation
Compliance	e Status		cos	R	J	Com	pliance Status	[cos   I
8		Supervision			4			Protection from Contamination
1 (1) 0	UT	Person in charge present, demonstrates knowledge and performs duties				15	IN OUT N/A NO	Food separated and protected
2 IN OI	UT (I/A)	Certified Food Protection Manager				16	IN DUT N/A	Food-contact surfaces cleaned and sanitized
		Employee Health				17	IN OUT (/A)	Proper disposition or returned, previously served, reconditioned & unsafe food
3 N)OL	UT	Management/food employees & conditional employee;		$\top$	1			Time / Temperature Control for Safety
4 IN OL	UT	knowledge, responsibilities and reporting  Proper use of restriction and exclusion	+-	-	-	18	IN OUT NANO	
5 IN)OL	-	Procedures for responding to vomiting and diarrheal events		+	1	19	IN OUT WANO	Proper cooking time and temperature  Proper reheating procedures for hot holding
		Good Hygiene Practices			-	20	IN OUT WA NO	Proper cooling time and temperatures
6 IN OU	JT (D)	Proper eating, tasting, drinking, or tobacco use		$\top$	1	21	IN OUT N/A NO	Proper hot holding temperatures
7 IN OL	TL (O)	No discharge from eyes, nose, mouth		+	1	22	IN OUT N/A NO	Proper cold holding temperatures
		Preventing Contamination by Hands			1	23	IN OUT N/A NO	Proper date marking and disposition
8 IN OL	JT (NO)	Hands clean & properly washed		T	1	24	IN OUT WANO	Time as a Public Health Control: procedures and records
9 IN OU	JT N/A (10)	No bare hand contact with RTE food	+	+	1			Consumer Advisory
10 (N QU		Adequate handwashing sinks properly supplied & accessible		$\vdash$	1	25	IN OUT (N/A)	Consumer advisory provided for raw/undercooked foods
		Approved Source			1	20	IN CO MUNICIPAL PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS O	Highly Susceptible Populations
11 IN DU	IT. TI	Food obtained from an approved source	T		1 1	26	IN OUT N/A	Pasteurized foods used; prohibited foods not offered
12 IN OU	T N/A IO	Food received at proper temperature	1		1			d / Color Additives and Toxic Substances
13 (IN)	IT	Food in good condition, safe & unadulterated		$\vdash$	1 1	27	IN OUT N/A	Food additives: approved and properly used
14 IN OU	N/A NO	Req. records available: shell stock tags, parasite destruction			1	28	IN DUT N/A	Toxic substances properly Identified, stored and used
Ris	sk factors ar	e improper practices or procedures identified as the	most		1	-	Co	onformance with Approved Procedures
Prev Inte	valent contr rventions a	e improper practices or procedures identified as the ibuting factors of foodbome illness or injury. Public He control measures to prevent foodbome illness or in	lealth			19	IN OUT NA	Compliance with variance/specialized process/HACCP
				When a				Compliance with variance operatized process/140-0F
		Good retail practices are preventative measure	GOOD R					
Mark "X" in	box if numb	pered item is not in compliance Mark "X" on a						and physical objects into foods.  ⇒corrected on-site during inspection R=repeat violation
								Telepeat violation
ompliance	Status	Safe Food and Water	cos	R		Compl	iance Status	COS R
30	Pasteurized s	aggs used where required			-	42 T		Proper Use of Utensils
		rom approved source	+-			43		Is properly stored
	_	tined for specialized processing methods	-		-	45		ipment & linens: properly stored, dried, & handled
-		Food Temperature Control		Щ	}	46	Gloves used	ngle-service articles; properly stored & used
33	Proper cooling	g methods used: adequate equipment for temp. control	T	$\overline{}$	ŀ	40	Gibves used	· · · · · · · · · · · · · · · · · · ·
		perly cooked for hot holding	1	$\vdash$	H	47 ·	Food and pag	Utensils, Equipment and Vending
		wing methods used			-	48		gned, constructed, & used
		s provided and accurate	+		-	49		: installed, maintained, & used: test strips
		Food Identification			ŀ		**************************************	Physical Facilities
37	Food properly	labeled: original container	T = T		ŀ	50 T	Hot & cold wa	ter available adequate pressure
		Prevention of Food Contamination			- 1-	51		alled, proper backflow devices
38	Insects, roden	ts, & animals not present			-	52		ste water properly disposed
39 (	Contamination	prevented during food preparation, storage & display			- 1-	53		properly constructed, supplied, & cleaned
	Personal clear		+		-	54		fuse properly disposed, facilities maintained
41 V	Wiping cloths:	property used & stored			一	55		ies installed, maintained, & clean
42 V	Washing fruits	& vegetables				56		tilation & lighting, designated areas used
Type of Op	peration:							License Posted:
Discussion	with Pers	on-in-Charge:						Follow-Up: Y (N)
								Follow-Up Date:
	_	1 1						
Signature o	of Person i	n Charge:						Date: 8/31/2021
Signature o	of Inspecto							Date: 8131/2021



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



Establishm	Beo ow Highw	ttess		Date: 8 (31 / 202   Page Z of Z				
Address:	geo Bon Hydra	00		Compliano	ce Achieved: 8[3] /20	21		
	Item / Location	Temp.	TEMPERATURE OBSERVAT	TIONS				
	ACCIDITY AND DELLOTE	Temp,	Item / Location	Тетр.	· Item / Location	Тетр		
					-			
		OB	SERVATIONS AND/OR CORRECTI	VE ACTIONS				
V Item Numbe	Section of Code		Description of V	iolation		Dated Corrected		
- Traines						or COS		
		no uto	lations observed	during law	e of lecoction	,		
			<u> </u>	401111	2 OF INSPECTION			
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-								
				***				
+			<u></u>					
-				<u> </u>				
_								
	Person in Charge:				Date: 8/31/2	1505		
ignature of I	nspector:	>-7/	1		Date: 8/31/2	ZUZ		



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



Es	tablishment: 🗘		Date   24/2\ Page			ge 1 of $Z$	No. of Risk Factor/Intervention Violations 2				
Ac	ldress: 🚜 🗸	Sur Higheron						No. of Repeat Risk Factor/Interven	ntion Viole		er
Ov	vner/Permit Hold	der Dus Highwany MODILE TIME -			Catego		,		———— Fotal Viola		-
En	nail:	the state of the s		Phone				Inspection Status: Green Yello		Red	
Ins	pection Type:	Routine Re-inspection Pre-or	peratio	nal	- ///	ness la	nvestigation	Complaint Other			
		FOODBORNE ILLNESS RIS	SK FA	CTORS	AND I	UBLI	C HEALTH II			-	
		Circle designated compliance status (IN, OUT, I						in appropriate box for COS and/or R			_
		IN = in compliance OUT= not in compliance NO =									
Con	npliance Status							The state of the s			
	inprior otatas	Supervision	[CO:	S R		mpila	nce Status	Protection from Contamination		cos	R
1	тибиі	Person in charge present, demonstrates knowledge and performs duties	T		1	5 ( IN	OUT N/A NO	Food separated and protected		T	T
2	IN DUT N/A	Certified Food Protection Manager	+-		1		DUT N/A	Food-contact surfaces cleaned and sanitized		+	$\vdash$
	0	Employee Health			1 1	- 13	OUT WANO	Proper disposition or returned, previously serve	ved,	+	+
2	(INDUT	Management/food employees & conditional employee;	_		-	,   ""		reconditioned & unsafe food		<u></u>	
3	INDUT	knowledge, responsibilities and reporting	4		- L			Time / Temperature Control for Safety			
5	INJOUT	Proper use of restriction and exclusion	+-		11		OUT N/A NO	Proper cooking time and temperature			
	TINOOT	Procedures for responding to vomiting and diarrheal events			19	_	OUT N/A NO	Proper reheating procedures for hot holding		<u> </u>	$oxed{oxed}$
6	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use	1	1 -	20	W-20	OUT N/A NO	Proper cooling time and temperatures		<u> </u>	┞-
7	IN OUT NO	No discharge from eyes, nose, mouth	-	+-	21	Water	DUT N/A NO	Proper hot holding temperatures			<u> </u>
		Preventing Contamination by Hands			22	-	OUT N/A NO	Proper cold holding temperatures			<u> </u>
В	IN OUT (NO)	Hands clean & properly washed	Т		24	-	OUT N/A NO	Proper date marking and disposition			-
9	IN OUT N/A/NO	No bare hand contact with RTE food	+	+-	=	114	OUTWAND	Time as a Public Health Control: procedures ar	nd records		
10	IN OUT	Adequate handwashing sinks properly supplied & accessible	+	-	25	TNI	OUT N/A	Consumer Advisory	Land Cont		
		Approved Source			= =		OUT INA	Consumer advisory provided for raw/undercook Highly Susceptible Populations	ked roods		
11	INDUT	Food obtained from an approved source		T	26	IN	DUT N/A	Pasteurized foods used; prohibited foods not of	ffered		
12	IN OUT N/A NO	Food received at proper temperature						d / Color Additives and Toxic Substance			
13	IN DUT	Food in good condition, safe & unadulterated			27	IN	OUT N/A	Food additives; approved and properly used			
14	IN OUT N/A NO	Req. records available: shell stock tags, parasite destruction			28	IN	DUT N/A	Toxic substances properly identified, stored and	used		
	Risk factors a	re improper practices or procedures identified as the n	nost				= Co	nformance with Approved Procedures			
	Interventions a	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	ealth jury,	J	19	IN		Compliance with variance/specialized process/H	HACCE		
		***************************************		RETAI	L PRAC			Provide Provid			_
		Good retail practices are preventative measures						nd physical objects into foods			
Mar	k "X" in box if num	bered item is not in compliance Mark "X" on ap							R=repeat vic	olation	$\dashv$
omi	oliance Status		cos	R	Con	nliane	e Status			200	
		Safe Food and Water	000	110	001	ipnanc	e Status	Proper Use of Utensils		cos	R
30	Pasteurized	eggs used where required			43		In-use utensils	s properly stored			$\exists$
31	Water & Ice	from approved source			44		Utensils, equi	pment & linens: properly stored, dried, & handled	d		$\neg$
32	Variance obt	tained for specialized processing methods			45		Single-use/sin	ngle-service articles: properly stored & used			$\neg$
		Food Temperature Control			46		Gloves used p	properly			7
33		ng methods used: adequate equipment for temp. control		$\perp$	-	-		Utensils, Equipment and Vending		-7	
34		operly cooked for hot holding		Ш	47		Food and non-	-food contact surfaces cleanable,			$\overline{A}$
35		awing methods used		-	48			ned, constructed, & used			
36	I hermomete	rs provided and accurate			49		Warewashing:	installed, maintained, & used: test strips			
37	Food propert	Food Identification y labeled: original container	<u> </u>	_		1		Physical Facilities			
	) sod propert	Prevention of Food Contamination	<u> </u>	<u> </u>	50	+-		ter available adequate pressure		$\rightarrow$	_
38	Insects, rode	nts, & animals not present		<u> </u>	52	-		alled, proper backflow devices			$\dashv$
39	-	n prevented during food preparation, storage & display		-	53	+		ste water properly disposed properly constructed, supplied, & cleaned			-
40	Personal clea				54	+		use properly disposed, facilities maintained			$\dashv$
41	Wiping cloths	: properly used & stored		$\Box$	55	<del> </del>		es installed, maintained, & clean		-+	$\dashv$
12	Washing fruit	s & vegetables			56	1		ilation & lighting, designated areas used		-	$\dashv$
F	- 60 "					-	<u> </u>				
	e of Operation:							License Posted:	CY		2
Disc	ussion with Pers	son-in-Charge:						Follow-Up:	Y	(N	1
			-					Follow-Up Date:		***************************************	
Sion	ature of Paras-	in Chargo:	<del>[                                    </del>		_			<u> </u>			4
	ature of Person		-				9	Date:			
sign	ature of Inspecto	or: >= /						Date: 81761	2075		



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



Latabilatilitie	it: Dw Highwa	y MODIC	Date:	Date: 812/202   Page 2 of 2			
Address: 46	8 ow Highwood	24		Complian	ce Achieved: 5 ( 26	1.7007	
			TEMPERATURE OBSERVAT	TIONS		V CC 2 )	
	Item / Location	Temp.	Item / Location	Temp.	· Item / Locatio	п.	Te
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		OP	CPDS/4#IONC 4ND/OD CONSTITUTE	Table 4 company			Щ.
V Item	0	VII.	SERVATIONS AND/OR CORRECTI			D. C. C.	
Number	Section of Code		Description of V	iolation		Dated	r COS
						-	
		al -					
+		No viola	actions observed dis	the sail ball	· Nestronia		
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			17//		Date:		
nature of Pen	son in Chame:						



## HEALTH DIVISION

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



Es	tablishment:	Date/(1/21 Page 1 of _2 No. of Risk Factor/Intervention \				/iolati	ons (	2				
Ad	dress: 6 Ho	unches ter Street				-			Risk Factor/Intervention V			2
		der: Thomas moore college		Risk 0					Total V			ろ
En	nail: Stando	DE @ thomas Horecollege . edu		Phone	<del></del>			Inspection Statu		Rec		_
	pection Type:	Routine Re-inspection Pre-or		nal		 Unes	s Investigation	Complain		-1100		_
		FOODBORNE ILLNESS RIS							it Other			_
		Circle designated compliance status (IN, OUT, N						in appropriate box	for COS and/or R			_
		IN = in compliance OUT= not in compliance NO =										_
Con	pliance Status								t Topode Violation			
<u> </u>	phance otatus	Supervision	cos	R	- 1	comp	liance Status	Dontar tion from	n Contamination	C	cos	R
1	NOUT	Person in charge present, demonstrates knowledge and	$\neg$	T	1	15	UNOUT N/A NO			-		
2	IN OUT N/A	Certified Food Protection Manager			1			Food separated and		$\rightarrow$		_
-	THE POST TOTAL		<del>_</del>		┨╟	16	UN DUT N/A		es cleaned and sanitized returned, previously served,	_	$\rightarrow$	_
	T	Employee Health			1	17	IN OUT WA NO	reconditioned & uns		$\perp$		
3	IN OUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Time / Temperatu	re Control for Safety			
4	UNCUT	Proper use of restriction and exclusion				18	IN OUT N/A(NO)	Proper cooking time	and temperature	T		
5	INDUT	Procedures for responding to vomiting and diarrheal events				19	IN OUT N/A NO	Proper reheating pro	ocedures for hot holding	$\neg$		_
	01000	Good Hygiene Practices			ļ	20	IN OUT N/A NO	Proper cooling time	and temperatures			
7	IN OUT TO	Proper eating, tasting, drinking, or tobacco use			1 -	21	IN OUT N/A NO	Proper hot holding te	mperatures			
	NO TUO NI	No discharge from eyes, nose, mouth			ł ⊢	22	IN DUT N/A NO	Proper cold holding t	<del></del>			
8	IN OUT NO	Preventing Contamination by Hands			l -	$\rightarrow$	(IN OUT N/A NO	Proper date marking				
9	IN OUT N/A NO	Hands clean & properly washed  No bare hand contact with RTE food	-	-		24	IN OUT N/A NO		alth Control: procedures and recor	ds		
10	IN OUT	Adequate handwashing sinks properly supplied & accessible	┼	+		- 1			Advisory			
	(III JOI	Approved Source				25	INJOUT N/A		provided for raw/undercooked food	ls		_
11	INDUT	Food obtained from an approved source	Т	$\top$	-	26	IN OUT (N/A)		ble Populations			$\dashv$
12	IN OUT N/A NO	Food received at proper temperature	<del> </del>	1	<u> </u> -	20			and Toxic Substances			-
13	TUQUIT	Food in good condition, safe & unadulterated	+	+	\ \_{2}	27	IN OUT (NA)		ved and properly used			-
14	IN OUT N/A 10	Req. records available: shell stock tags, parasite destruction		$\dagger \lnot \dagger$	_	$\rightarrow$	IN OUT N/A		perly identified, stored and used	-	+	$\dashv$
	Risk factors a	re improper practices or procedures identified as the m	nost				Co		pproved Procedures	-		۲
	Prevalent cont Interventions	re improper practices or procedures identified as the m tributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or inj	ealth			19	IN OUT WA		ince/specialized process/HACCP			٦
			OOD R	ENT A TI				Completice with valle	incerspecialized process/FACCP			-
		Good retail practices are preventative measures						and abusing objects int	a fanda			4
Mar	k "X" in box if num	bered item is not in compliance Mark "X" on ap						corrected on-site d		it viola	ition	-
omr	liance Status		cos	R	10-	- 17						4
		Safe Food and Water	1003	1 1	00	mpin	ance Status	Proper Use	of Literails	CO	S F	4
30	Pasteurized	eggs used where required		$\Box$	4	3	In-use utensil	s properly stored	OT CICIISIE	$\overline{}$		+
31	Water & Ice	from approved source			4	4			rly stored, dried, & handled	+-	+	+
32	Variance ob	tained for specialized processing methods			4:	5	Single-use/sin	ngle-service articles: pr	operly stored & used		$\top$	1
	-	Food Temperature Control			40	6	Gloves used p	property			$\neg$	1
33		ng methods used: adequate equipment for temp, control						Utensils, Equipme	ent and Vending		TI U	1
34		roperly cooked for hot holding			47	7 •	Food and non	-food contact surfaces	cleanable,			]
35 36		ewing methods used			48	_		ned, constructed, & us				
30	Thermomete	rs provided and accurate  Food Identification			45	9	Warewashing:	installed, maintained,		<u> </u>	丄	1
37	Food proper	y labeled: original container			50	· T	Liet 8 celeture	Physical F ter available adequate				-
		Prevention of Food Contamination		-	51	_		alled, proper backflow		+	+	-
38	Insects, rode	nts, & animals not present			52	-		ste water properly disp		+-	+	+
39	Contamination	on prevented during food preparation, storage & display			53	_		properly constructed,		+-	+	-
10	Personal de	anliness			54		1.	use properly disposed,		+	+	1
11	Wiping cloths	c: properly used & stored			55			es installed, maintaine		+	-	1
12	Washing fruit	s & vegetables			56		Adequate vent	ilation & lighting, desig	nated areas used	+	+	1
r <sub>un</sub> ,	of Opending											1
	of Operation:								License Posted:		N	
Disc	ussion with Per	son-in-Charge:							Follow-Up:	Υ	N	
									Follow-Up Date:			
ign:	ature of Person	in Charge: At 12 Miles										
									Date:			
ıgn	ature of Inspect	or:						_	Date: 8/11/2021		_	



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



Establishink	Thomas H	one college	Date:8/11(2021 Page Z of Z				
Address: 6	Manchester 5	treet		Compliance	Achieved: 8/	11202	
	Item / Location	Temp.	TEMPERATURE OBSERVATION	DNS			
	Atemy Location	1 cmp.	Item / Location	Temp.	Item / Locu	tion Tem	
		OB	SERVATIONS AND/OR CORRECTIVE	E ACTIONS			
V Item	Section of Code		Description of Vio			Dated Corrected	
Number			2003/6101010101			or COS	
-				<u> </u>			
		<u></u>					
		1120 11301 - 120	on Absorbed during	1 m a m f N as			
		100 GIGIALICE	on observed during	time of inste	<del>2(01)</del> .		
	<del> </del>	<del>*</del> * * * * * * * * * * * * * * * * * *	enew CFPM centific	CCHION .			
		*0	lorine tost strips.	<u> </u>			
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			-				
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				<u> </u>			
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gnature of P	erson in Charge: /	110 M	<b></b>		Date:		
gnature of Ir			(-			1 / mm n	
J					Date.	11/2021	



## HEALTH DIVISION

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



Es	tablishment:	Rincha		Dat &	12421	Pag	ge 1 of <u>2</u>	No. of Risk Factor/Intervention Vic	lations	1
Ad	dress:808	ontinental Brud		Time i	ספיזי	Tim	ne out 2:00	No. of Repeat Risk Factor/Intervention Vio	lations	25
Ov	vner/Permit Hol	der: ARinen . Inc.		Risk C	ategory			Total Vio	lations	1
En	nail:			Phone		Ť			Red	
Ins	pection Type:	Routine Re-inspection Pr	e-operati	ional	lline	ss Ir	vestigation	Complaint Other		
		FOODBORNE ILLNESS	-				-			
		Circle designated compliance status (IN, OI						in appropriate box for COS and/or R		
		IN ≈ in compliance OUT= not in compliance I	NO = not c	bserved	N/A = not	t appl	licable COS =	corrected on-site R = repeat violation		
Con	npliance Status		co	S R	Com	nliar	nce Status		COS	
		Supervision		, IX	1   0011	primi	roc otatus	Protection from Contamination	000	S
1	TUO'NT	Person in charge present, demonstrates knowledge an performs duties	d		15	N	OUT N/A NO	Food separated and protected		T
2	IN DUT N/A	Certified Food Protection Manager	-	_	16		DUT N/A	Food-contact surfaces cleaned and sanitized	-	+
		Employee Health			17	IN	OUT N/A TO	Proper disposition or returned, previously served,	+	+
3	INDUT	Management/food employees & conditional employee;				-		reconditioned & unsafe food		_
4	INOUT	knowledge, responsibilities and reporting  Proper use of restriction and exclusion		-	10	T 41.	44.5	Time / Temperature Control for Safety		_
5	INDUT	Procedures for responding to vomiting and diarrheal ev	ente	-	18	_	OUT N/A NO	Proper cooking time and temperature	+	-
		Good Hygiene Practices	ents		20	$\rightarrow$	OUT N// NO	Proper reheating procedures for hot holding  Proper cooling time and temperatures	+-	+
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use	-T		21		OUT N/A NO	Proper hot holding temperatures	+	+
7	IN OUT NO	No discharge from eyes, nose, mouth			22	-	OUT N/A NO	Proper cold holding temperatures	+	+
		Preventing Contamination by Hands			23		DUT N/A NO	Proper date marking and disposition	+	+
8 IN OUT NO Hands clean & properly washed 24 IN OUT N/A 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	INOUT	Adequate handwashing sinks properly supplied & acces	sible		25	IN	DUT N/A	Consumer advisory provided for raw/undercooked foods	T	T
		Approved Source						Highly Susceptible Populations		
11	IN OUT N/A (IO)	Food obtained from an approved source		+	26		OUT N/A	Pasteurized foods used; prohibited foods not offered		$\bot$
12	IN OUT N/A NUT	Food received at proper temperature				2.5		d / Color Additives and Toxic Substances		
14	IN OUT N/A NO	Food in good condition, safe & unadulterated  Req. records available: shell stock tags, parasite destructions.	otion	$\dashv$	27	10/	DUT N/A	Food additives: approved and properly used		+
		<u> </u>			20	LIN		Toxic substances properly identified, stored and used		
	Prevalent cor	are improper practices or procedures identified as tributing factors of foodborne illness or injury, Publ are control measures to prevent foodborne illness	ic Health	- 1	10		UT N/A	nformance with Approved Procedures	1	
	THE VEHICOIS	are control measures to prevent loodborne lintess			19			Compliance with variance/specialized process/HACCP		
		Cond soft senting			L PRACT					
Mar	k "X" iп box if nur	Good retail practices are preventative mean bered item is not in compliance Mark "X" of Ma	on appropr					ind physical objects into foods.  corrected on-site during inspection R=repeat	violatio	
								telegat	VIOIALIO	
omj	oliance Status	Safe Food and Water	cos	R	Comp	lianc	e Status	Th. NY MY7F	COS	R
30	Pasteurize	l eggs used where required			43	· _	In-use utaneil	Proper Use of Utensils s properly stored		1
31		from approved source		+-	44			pment & linens: properly stored, dried, & handled	+-	+
32	Variance of	ntained for specialized processing methods	$\neg   \neg$		45			ngle-service articles: properly stored & used	+-	+
		Food Temperature Control			46		Gloves used		+	+
33	Proper cool	ing methods used: adequate equipment for temp. control						Utensils, Equipment and Vending		
34	Plant food p	property cooked for hot holding			47 ·		Food and non	-food contact surfaces cleanable,		T
35		nawing methods used			48		Property desig	gned, constructed, & used		
36	Thermomet	ers provided and accurate			49		Warewashing	: installed, maintained, & used; test strips		
37	Food propo	Food Identification			-		L	Physical Facilities		_
31	rood prope	ly labeled: original container  Prevention of Food Contamination		+	50			ter available adequate pressure	<del></del>	┼
38	Insects rod	ents, & animals not present			51 52	$\overline{}$		alled, proper backflow devices	-	-
39		on prevented during food preparation, storage & display		1-1	53			ste water properly disposed properly constructed, supplied, & cleaned		Н
10	Personal cle		_	1	54			use properly disposed, facilities maintained	-	
11	Wiping cloth	s: properly used & stored			55			ies installed, maintained, & clean	<u> </u>	$\vdash \vdash$
2	Washing fru	its & vegetables			56			tilation & lighting, designated areas used	<b></b>	$\vdash$
	e of Operation:							License Posted:	Y)	N
Disc	ussion with Pe	son-in-Charge:						Follow-Up:	Y	N
								Follow-Up Date:		i
lier	atura of Desc.	in Charge	5 G					'		
	ature of Persor							Date:		
ign	ature of Inspec	tor:/w//	7					Date: 6/24/7021		- 1



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



	ent: Winen			Date: 8	24 (2021	Page 2 of	
Address:	OB Contine	intal give.			Compliar	ice Achieved:	
	Item / Location	Tem		TURE OBSERVATIONS			
law fil				/ Location	Temp.	Item / Locat	tion '
1000 A11			TOUR CALLER	1 1 noone - N	40		
			ORSERVATIONS AN	D/OR CORRECTIVE A	CTIONS		
v Item	Section of Code		02023(11110.10.201				Dated Com
Number	Occion of Code			Description of Violatio	on 		or CO:
		kittien:					
PF 16	4 -601-11	+ interior	enutes/ trape	+ ice macus	e soiled	clear out	Caritize
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nature of P	erson in Charge		truvas9	<u> </u>		Data	
		7.0				Date:	
gnature of Ir	ispector:	<u> </u>				Date: Pl2	912021



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



Es	stablishment: 👝		Date:8/23/21 Page 1 of 2			age 1	of <b>Z</b>	2. No. of Risk Factor/Intervention Violations			
		ow Highway_		Time i	in <b>įď</b> ; [	ST	Time ou	Ar.oC	No. of Repeat Risk Factor/Intervention Viol	ations	
		dericharics piner UC			Catego				Total Viol		-
	nail:		-	– Phone		7.				Red	حر
Ins	spection Type:	Routine Re-inspection Pre-op					- Income	Unntine		Ken	
-		FOODBORNE ILLNESS RIS						tigation	Complaint Other		
		Circle designated compliance status (IN, OUT, N							in appropriate box for COS and/or R		
		IN = in compliance OUT= not in compliance NO =									
	- Honor Status								Corrected on-site K = repeat violation		
Con	npliance Status	Supervision	cos	R	C	ompl	liance S	tatus	Provide Control of	cos	3 F
1	IN OUT	Person in charge present, demonstrates knowledge and			1				Protection from Contamination		
2		performs duties	+	-	<b>∤</b>	_	IN DUT		Food separated and protected		
-	IN OUT N/A	Certified Food Protection Manager			1  -		INJOUT		Food-contact surfaces cleaned and sanitized  Proper disposition or returned, previously served,	-	$\perp$
		Employee Health			1	7	IN OUT	N/A NO	reconditioned & unsafe food		
3	INDUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting						1	Time / Temperature Control for Safety		
4	TUOUT	Proper use of restriction and exclusion			11	8	IN OUT	N/A(NO)	Proper cooking time and temperature		T
5	INDUT	Procedures for responding to vomiting and diarrheal events			11	9	IN OUT	N/A NO	Proper reheating procedures for hot holding		
-	IN OUT	Good Hygiene Practices			20	_	IN OUT		Proper cooling time and temperatures		
7	IN OUT NO	Proper eating, tasting, drinking, or tobacco use	+	-	2	- 1	IN OUT		Proper hot holding temperatures		$\perp$
_	IN COT CNO	No discharge from eyes, nose, mouth  Preventing Contamination by Hands			22	-	TUOUT		Proper cold holding temperatures		4
8	IN OUT NO	T	1	23		INOUT		Proper date marking and disposition	-	+	
9	IN DUT N/A NO	Hands clean & properly washed  No bare hand contact with RTE food	+	+	24	<u> </u>	TUQ NI	N/A NO	Time as a Public Health Control: procedures and records	L.,	
10	IN OUT	Adequate handwashing sinks properly supplied & accessible	+	1	25		I TUCIVII	N/A	Consumer Advisory  Consumer advisory provided for raw/undercooked foods		
		Approved Source				<u> </u>	10011	WALL TO THE PARTY OF THE PARTY	Highly Susceptible Populations		
11		Food obtained from an approved source	$\Box$	$\Box$	26	3 (	IN OUT	N/A	Pasteurized foods used; prohibited foods not offered	· · · · ·	T
12	IN OUT N// NO	Food received at proper temperature						Foor	d / Color Additives and Toxic Substances		
13	IN OUT	Food in good condition, safe & unadulterated			27	,	IN OUT	NIA	Food additives: approved and properly used		T
14	IN OU N/A IO	Req. records available: shell stock tags, parasite destruction			28		I TUC NI	V/A	Toxic substances properly identified, stored and used		
	Risk factors a	re improper practices or procedures identified as the n tributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or inj	10St		_			Co	nformance with Approved Procedures		
	Interventions a	are control measures to prevent foodborne illness or inj	ury,	- 1	19	1	IN OUT	VA)	Compliance with variance/specialized process/HACCP		
		G	OOD R	ETAI	L PRA	CTIC	ES				-
		Good retail practices are preventative measures						nemicals, a	nd physical objects into foods.		
Mai	rk "X" in box if num	bered item is not in compliance Mark "X" on ap	propria	te box	for COS	S and	d/or	COS =	corrected on-site during inspection R=repeat v	iolation	1
Com	pliance Status		cos	R	Con	nplia	ınce Sta	atus		cos	R
		Safe Food and Water	T		_				Proper Use of Utensils		
30		eggs used where required from approved source		-	43	_			s properly stored		Ш
32		tained for specialized processing methods	<del> </del>	$\vdash$	44	-	$\rightarrow$		pment & linens: properly stored, dried, & handled		$\vdash$
	vanalice op	Fund Temperature Control		-	45	-		ves used p	ngle-service articles; properly stored & used		₩
33	Proper cooli	ng methods used; adequate equipment for temp, control			40		Gio	ves used p	Utensils, Equipment and Vending		
34	Plant food p	roperly cooked for hot holding			47		Foo	od and non-	-food contact surfaces cleanable,		$\Box$
35	Approved the	awing methods used			48				ned, constructed, & used		$\vdash$
36	Thermomete	rs provided and accurate			49		Wa	rewashing:	installed, maintained, & used: test strips		П
		Food Identification							Physical Facilities		
37	Food proper	y labeled: original container		Щ	50				ter available adequate pressure		Ш
38	Incode rode	Prevention of Food Contamination			51	+			alled, proper backflow devices		Ш
39		on prevented during food preparation, storage & display			52	+-			ste water properly disposed		Ш
40	Personal clea				54	+			properly constructed, supplied, & cleaned use properly disposed, facilities maintained		
41		s: properly used & stored			55	+			es installed, maintained, & clean		$\vdash$
42	Washing fruit	s & vegetables		$\neg$	56	-	<del></del>		ilation & lighting, designated areas used		
	e of Operation:								License Posted;		N
Disc	cussion with Per	son-in-Charge:							Follow-Up:	7	N)
									Follow-Up Date:		
Qi	atura of D	in Charge: Salka Rokela	01	0-	<del></del>						$\dashv$
- ugr	eaule of Ferson	in chaile. After the sale	الكار	O					Date: 8 23 2 4		
Sigr	nature of Inspect	or: / ~ ) 7 7							Date: 8/23/202\		



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



Es	tablishme	it charlies Ho	mesture Dir	Date: 8 (25/ 202) Page 4 of 3				
Ad	dress:	o Du Highwa	ч_		Compliano			
				TEMPERATURE OBSERVAT				
		Item / Location	Тетр.	Item/Location	Тетр.	· Item / Locat	ion	Temp
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Po	rectos /	Het mold ( na	40°					
		-1						
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			ORSI	ERVATIONS AND/OR CORRECTI	VE ACTIONS			
.,	Item		7270			****	Dated	Corrected
V	Number	Section of Code		Description of V	iolation 			COS
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			NO WIOL	ations operand di	oftny time o	<u>inspoction</u>	, ,	
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lian	ature of Po	erson in Charge:	114 CON D.	A / ()		Data. Al	22/63	
viAl (	atore or Pe	ason in Orlaige.	ucco in			Date: 3	23/74	
sign	ature of In	spector:		`		Date: 81	13/2021	



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



ES	tablishment:		Date: 9	12/21	Pag	e 1 of <u>Z</u>	No. of Risk Factor/Intervention Violations	$\varnothing$	
Ad	dress:1406		Time in	loige	Tim	e out: [1:00	No. of Repeat Risk Factor/Intervention Violations	0	
		ler: Little sproots LLC.		Risk Ca	ategory	6		Total Violations	Ś
	nail:	0 11 - 0 10 010 000	-	Phone:				Inspection Status: Green Yellow Red	_
Ins	pection Type:	(Routine) Re-inspection Pre-oper			Illee		vestigation		
-	poolion Typo.	FOODBORNE ILLNESS RISK					-	Complaint Other	
	·	Circle designated compliance status (IN, OUT, N/A						In appropriate box for COS and/or R	
		IN = in compliance OUT= not in compliance NO = no				t annli			
	-11							corrected off-site K = repeat violation	
Com	pliance Status	Supervision	COS	R	Com	nplian	ce Status	Protection from Contamination	R
1	INOUT	Person in charge present, demonstrates knowledge and		7	15	5	OUT N/A NO		
2	IN OUT N/A	Performs duties  Certified Food Protection Manager			-	-		Food separated and protected	+-
_	111001(111	Employee Health			16	-	OUT N/A	Food-contact surfaces cleaned and sanitized  Proper disposition or returned, previously served,	-
_		Management/food employees & conditional employee;			17	114	OUT N/A NO	reconditioned & unsafe food	$\perp$
3	IN OUT	knowledge, responsibilities and reporting						Time / Temperature Control for Safety	
5	IN DUT	Proper use of restriction and exclusion			18	_	OUT N/A (O	Proper cooking time and temperature	<del> </del>
	DIVIDUI	Procedures for responding to vomiting and diarrheal events  Good Hygiene Practices			19	-	OUT N/A NO	Proper reheating procedures for hot holding	+
6	IN OUT NO	Proper eating, testing, drinking, or tobacco use			21		OUT N/A NO	Proper cooling time and temperatures  Proper hot holding temperatures	+
7	IN OUT NO	No discharge from eyes, nose, mouth		1 1	22	-10-	OUT N/A NO	Proper cold holding temperatures	+
		Preventing Contamination by Hands			23		OUT N/A NO	Proper date marking and disposition	+
в	IN OUT (NO)	Hands clean & properly washed		T	24	IN (	OUT N/A NO	Time as a Public Health Control: procedures and records	$\vdash$
9	IN OUT N/A NO	No bare hand contact with RTE food				2		Consumer Advisory	
10	IN DUT	Adequate handwashing sinks properly supplied & accessible			25	IN	DUT N/A	Consumer advisory provided for raw/undercooked foods	
	(Co.)	Approved Source			-	$\nearrow$		Highly Susceptible Populations	
11	IN OUT N/(NO)	Food obtained from an approved source		+	26		DUT N/A	Pasteurized foods used; prohibited foods not offered	
13	OUT	Food received at proper temperature  Food in good condition, safe & unadulterated			27	LINIZ	DU EN/A	d / Color Additives and Toxic Substances	
14	IN OUT N/A NO	Req. records available: shell stock tags, parasite destruction			28	-	DUT N/A	Food additives: approved and properly used  Toxic substances properly identified, stored and used	$\vdash\vdash$
			et e					enformance with Approved Procedures	Н
	Prevalent cont Interventions a	re improper practices or procedures identified as the mos ributing factors of foodbome illness or injury. Public Heal are control measures to prevent foodborne illness or injur	th		19	INIC	DUF N/A	Compliance with variance/specialized process/HACCP	
				RETAIL		Щ.		Compliance with variance/specialized process/14CCP	
		Good retail practices are preventative measures to						and physical phiects into foods	_
Mar	k "X" in box if num	bered item is not in compliance Mark "X" on appre						соггесted on-site during inspection R=repeat violation	$\exists$
omi	oliance Status	C	OS	R	Come	liane	e Status	cos	R
		Safe Food and Water	-	1.0	001111	2110110	o otatao_	Proper Use of Utensils	-
30	Pasteurized	eggs used where required			43		In-use utensil	s properly stored	П
31	Water & Ice	from approved source			44		Utensils, equi	ipment & linens: properly stored, dried, & handled	
32	Variance obt	tained for specialized processing methods			45		Single-use/sir	ngle-service articles: properly stored & used	
22	D	Food Temperature Control			46		Gloves used		
33		ng methods used: adequate equipment for temp. control roperly cooked for hot holding		+	47 ·		East and and	Utensils, Equipment and Vending	
35		awing methods used			48	-		gned, constructed, & used	$\dashv$
36		rs provided and accurate			49	_		: installed, maintained, & used: test strips	$\dashv$
		Food Identification						Physical Facilities	
37	Food properl	y labeled: original container			50		Hot & cold wa	ter available adequate pressure	
		Prevention of Food Contamination			51		Plumbing insta	alled, proper backflow devices	
38		nts, & animals not present			52			ste water properly disposed	
39		on prevented during food preparation, storage & display			53			properly constructed, supplied, & cleaned	_
40	Personal dea	anliness s: properly used & stored			54			fuse properly disposed, facilities maintained lies installed, maintained, & dean	$\dashv$
42		s & vegetables		$\overline{}$	56			tilation & lighting, designated areas used	$\dashv$
Тур	e of Operation:							License Posted:	1
Disc	ussion with Pers	son-in-Charge:						Follow-Up: Y	77
		. 10 %						Follow-Up Date:	7
<b>3</b> 1 –	atura (CD	N DYTHIA						C do lat	
	ature of Person							Date: 8 20 21	
Sign	ature of Inspect	or:						Date: 8/20/1/2071	
		6 6							_



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



Es	tablishme	nt: Little Sp	routs				Date: 81	2012021	Page _	2_ of _2_
Ac	idress: 🏋	6 Milford	road					e Achieved: 812		
					TEMPERATU	RE OBSERVATION	NS .			
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	1 15 -	1		OBS	ERVATIONS AND	OR CORRECTIVE	ACTIONS			
V	Item Number	Section of Code				Description of Violat	ion		D	ated Corrected
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		rson in Charge:	DUNDO	1				Date: 8		
igna	ature of Ins	pector:	in		1			Date: 😩	120 1202	,1



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



Es	tablishment: 3	upble Bee Hilk Tea		Dates	3/19	121	Pag	e 1 of <u>Z</u>	No. of R	isk Factor/Int	ervention V	iolations	<b>8</b>
		miom bothet Blud. #694		Time	in <b>z</b> ;	00	Tim	e out 2:30	No. of Repeat R	isk Factor/Int	ervention V	iolations	1
Ov	vner/Permit Hol	der Easy kitchen inc.		Risk (	Cate	gory:	ิด				Total Vi	iolations	
	nail:				_			906	Inspection Status	Green	Yellow	Red	
Ins	pection Type:	Routine Re-inspection Pre-op			10			vestigation	Complaint	Othe		- 100	
		FOODBORNE ILLNESS RIS			AN					Olik			
		Circle designated compliance status (IN, OUT, I							in appropriate box for	r COS and/or	R		
		IN = in compliance OUT= not in compliance NO =	not ob	served	N/A	= not	appi	icable COS =	corrected on-site R	= repeat violati	on		
Com	pliance Status		cos		_							Land	
0011	S C	Supervision	JCUS	R	1	Com	риап	ce Status	Protection from	Conteminatio	an.	COS	SR
1	DOUT	Person in charge present, demonstrates knowledge and	$\top$		1	15	IN	BUT N/A NO	Food separated and		122		T
2	INOUT N/A	performs duties  Certified Food Protection Manager	+-	+	$\dashv$	16		OUT N/A			-141	+	
Ē		Employee Health			1	17	-	OUT N/ANO	Food-contact surface Proper disposition or			+	+
	()	Management/food employees & conditional employee;			-		IIN		reconditioned & unsa	e food			
3	OUT	knowledge, responsibilities and reporting		+-	1	<u> </u>		-	Time / Temperatur	Control for S	afety		
5	TUOUT	Proper use of restriction and exclusion	-		١.	18	-	OUT N/A NO	Proper cooking time a			$\dashv$	
5	INDUT	Procedures for responding to vomiting and diarrheal events  Good Hygiene Practices	<u> </u>		-	19	+	OUT N/A (O)	Proper reheating proc		Iding		+
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use				20	-	OUT N/A NO	Proper cooling time a				+
7	IN OUT NO	No discharge from eyes, nose, mouth	+	+	1	22	1-	DUT N/A NO	Proper hot holding ter	· · · · · · · · · · · · · · · · · · ·			+-
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Preventing Contamination by Hands	-		1	23	100	OUT N/A NO	Proper cold holding to Proper date marking a			-	+
8	IN OUT NO	Hands clean & properly washed		T	1	24	_	OUTNANO	Time as a Public Hea		fures and recor	ele.	+
9	IN OUT N/A NO	No bare hand contact with RTE food	<del> </del>	+	1 1		,,,,		Consumer		TOTOS ATTO TOTOS	45	
10	IN OUT	Adequate handwashing sinks properly supplied & accessible	+-		1	25	INK	OUT N/A	Consumer advisory pr		dercooked food	is T	
		Approved Source			1				Highly Susceptil				-
11	TUCKI	Food obtained from an approved source			] [	26		OUT N/A	Pasteurized foods use				
12	IN OUT N/A NO	Food received at proper temperature						Foo	d / Color Additives	and Toxic Sub	stances		
13	IN DUT	Food in good condition, safe & unadulterated				27		DUT N/A	Food additives: approv	ed and properly	used		
14	IN OUT N/A DO	Req, records available; shell stock tags, parasite destruction				28		OUT N/A	Toxic substances prop	erly identified, sto	red and used		
	Risk factors a	are improper practices or procedures identified as the r tributing factors of foodbome illness or injury. Public H are control measures to prevent foodbome illness or ir	nost				_	Co	informance with A	proved Proce	lures		
	Interventions	are control measures to prevent foodborne illness or in	ijury.			19	IN C	OUT N/A	Compliance with varian	ce/specialized pr	ocess/HACCP		11
			00D I	RETAI	L PI	RACT	ICES	;					
		Good retail practices are preventative measure	s to conti	rol the a	dditio	n of pa	thoge	ns, chemicals, a	and physical objects into	foods.			
Mar	k "X" in box if nun	bered item is not in compliance Mark "X" on a	opropria	ate box	for 0	COS a	ınd/oı	COS =	corrected on-site du	ring inspection	R=repea	at violatio	'n
omi	oliance Status		cos	R	- 10	Comp	lianc	e Status				cos	R
		Safe Food and Water				110			Proper Use o	f Utensils			
30	Pasteurized	eggs used where required				43		In-use utensil	ls properly stored				
31		from approved source		4		44			ipment & linens: proper				
32	Variance ob	tained for specialized processing methods	<u> </u>	Щ	-	45		1	ngle-service articles; pro	perly stored & us	ed		Ш
00		Food Temperature Control	Ϋ		-	46		Gloves used					Щ
33		ng methods used: adequate equipment for temp. control			-	12		1	Utensils, Equipme		<u> </u>		
34 35		roperly cooked for hot holding awing methods used	-	+-	_ <u> -</u>	47 ·			n-food contact surfaces			+	+
36		awing memous used ers provided and accurate		+	-	48			gned, constructed, & us : installed, maintained,			+-	+
		Food Identification			-	70		T	Physical F	<u>-</u>			
37	Food proper	ly labeled: original container	T .		ŀ	50		Hot & cold wa	iter available adequate				
		Prevention of Food Contamination				51			alled, proper backflow d			+-	$\vdash$
38	Insects, rode	ents, & animals not present		$\Box$		52		Sewage & wa	ste water properly dispo	sed		1	$\Box$
39	Contaminati	on prevented during food preparation, storage & display				53		Toilet facilities	properly constructed, s	upplied, & deane	d		$\Box$
40	Personal de	anliness				54		Garbage & ref	fuse properly disposed,	acilities maintain	ed		
41	Wiping cloth	s: properly used & stored				55		Physical facilit	ties installed, maintaine	, & clean			
42	Washing frui	ts & vegetables	L			56		Adequate vent	tilation & lighting, design	ated areas used			
Tvr	e of Operation:									License Pos	tod:	(3)	N
											ilea:		N
UISC	cussion with Per	son-in-Charge:								Follow-Up:		Υ (	(N)
										Follow-Up D	ate:		
Sian	ature of Person	in Charge: WW			-					Date: % /	19/202	1	
C1	ature of Inspec												$\dashv$
oign	lature of Inspec	01.								Date: 81	19/202	1	
		4											



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



stablishment: Bubble	BER MILK TEA-	Date: 8/19 12021 Page _ 2	Z_ of _2					
ddress: 80 Premiur	n outlet Blud. #694	Compliance Achieved: Q1912021						
	TEMPERATURE OBSER	EVATIONS						
Item / Location	Temp, Item/Location	Temp. Item / Location	Te					
Item Continue (O. )	OBSERVATIONS AND/OR CORRI							
Number Section of Code	Description	· OI VIOLULIOII	or COS					
			0, 000					
			_					
	2.0.2.1012-02.100.1.0							
	The morations observed di	uring time of inspection.						
ature of Person in Charge:	y way	Date: 8/19/2021	/					
ature of Inspector	1016							
		Date: Q/ 19 1202 1						



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



Est	tablishm	nent:	r lady of	Ole Tour		Dat 🕵	/ıa l	21	Page 1 of _2,	No. of Ris	sk Factor/Inte	ervention Viol	ations	d
				ke poud				_		No. of Repeat Ris				7
Ow	ner/Per	mit Hold	er	the Education	100	Risk C				Tros of tropoder in	711 0000171110			N/A
Em	ail:		SUF LOW	ay of Herry church	ח			Oly.	<u> </u>			Total Viol		<u> </u>
		T				Phone			<u> </u>	Inspection Status:	Green		Red	
Ins	pection	rype:	Routine		operatio				s Investigation	Complaint	Othe	r		
			Circle design	FOODBORNE ILLNESS R							000 1/ 1			
				nated compliance status (IN, OUT,						in appropriate box for				
_			IN = in compi	iance OUT= not in compliance NO	= not of	served	N/A =	= not	applicable COS =	corrected on-site R =	repeat violation	on		_
Com	pliance	Status			COS	S R	1	Comp	oliance Status				cos	F
	7			iupervision			-			Protection from	Contaminatio	n		
1 (	IN OU	Ť	performs duties	present, demonstrates knowledge and				15	IN DUT N/A NO	Food separated and pr	otected			
2	IN On.	T(N/A	Certified Food Pro	tection Manager				16	IN OUT N/A	Food-contact surfaces	cleaned and sar	itized	_	$\top$
			Emp	ployee Health				17	IN OUT N/A YO	Proper disposition or re reconditioned & unsafe		ly served,		T
3	(HA DU	T		employees & conditional employee;						Time / Temperature		Cata		-
4	TD SU		1	nsibilities and reporting riction and exclusion	+	+-	}	18	IN OUT N/A NO			шау		_
5	(IN OUT			ponding to vomiting and diarrheal event			-	19	IN OUT N/A NO	Proper cooking time an Proper reheating proce		dina	+-	+-
_				ygiene Practices	-		<del> </del>	20	IN OUT N/ANO	Proper cooling time and		aing		+
6	IN OUT	r (NO)		ing, drinking, or tobacco use		1	l  -	21	IN OUT N/A NO	Proper hot holding term			+-	+
7	IN OUT			eyes, nose, mouth	+		l  -	22	IN OUT N/A NO	Proper cold holding terr			+	
	-			ntamination by Hands			l ⊢	23	IN OUT N/A NO	Proper date marking an	· · · · · · · · · · · · · · · · · · ·		+-	+
8	IN OUT	NO	Hands clean & prop			T	H	24	IN OUT NANO	Time as a Public Health		ures and records	+	$\vdash$
9	IN OUT	N/A NO	No bare hand conta							Consumer A		al oo al la l'obbles		_
10	- IN OUT		Adequate handwas	thing sinks properly supplied & accessib	le			25	IN OUT NA	Consumer advisory pro-		dercooked foods	T	
				roved Source						Highly Susceptibl				-
11/	TUO IN	]	Food obtained from	an approved source		$\top$		26	IN OUT N/A	Pasteurized foods used			T	T
12	TUO OUT	N/A(NO)	Food received at pr	oper temperature					Foo	d / Color Additives at	nd Toxic Subs	fances		
13	IN DUT		Food in good condi	tion, safe & unadulterated			- [7	27	IN OUT N/A	Food additives: approve	d and properly i	sed	T	
14	IN OU	N/A/NO	Req. records availa	ble: shell stock tags, parasite destructio	n			28	IN OUT N/A	Toxic substances proper	ly identified, sto	red and used		
	Risk	factors a	re improper practic	çes or procedures identified as the	most				Co	nformance with App	roved Proced	ures		
	Inter	ventions a	ributing factors of ire control measur	ces or procedures identified as the foodborne illness or injury. Public es to prevent foodborne illness or	Heattn injury.		.	19	IN OUT NA	Compliance with variance	e/specialized pro	ocess/HACCP		
			-		GOOD 1	RETAI	L PR	ACT	ICES					
			Good	retail practices are preventative measur						and physical objects into f	oods,			
Mar	k "X" in b	ox if num	bered item is not i							=corrected on-site duri		R=repeat	violation	
omp	oliance S	Status	·		cos	R	IC	ompl	lance Status				cos	R
			Safe Fe	ood and Water		1		···· p·		Proper Use of	Utensils		1000	- 1
30	Р	asteurized	eggs used where red	juired			4	13	In-use utensi	ls properly stored				
31	V	Vater & Ice	from approved source	8			4	14	Utensils, equ	Ipment & linens: properly	stored, dried, &	handled		
32	V	ariance obt	ained for specialized	processing methods			4	5	Single-use/si	ngle-service articles: prop	erly stored & us	eď		
			Food Tem	perature Control			4	16	Gloves used	properly				
33				equate equipment for temp. control		1				Utensils, Equipmen	t and Vendin	5		
34	_		operly cooked for ho	t holding		-	-	7 ·		n-food contact surfaces cl				
35			awing methods used			+	$\vdash$	8		gned, constructed, & used			$\square$	_
36		hermomete	rs provided and accu				4	.9	Warewashing	: installed, maintained, &				_
37	T E	and proped	y labeled: original co	dentification	1		ŀ		The second	Physical Fac				_
31	1.5	ood properi		Food Contamination	+	-	5			iter available adequate pr				
38	In	sects rade	nts, & animals not pro			$\vdash$	5:	-+		alled, proper backflow de				$\dashv$
39				pod preparation, storage & display	-	+	5:	$\rightarrow$		ste water properly dispos s properly constructed, su		-		$\dashv$
40		ersonal clea		you proparation, and ago a dioping	+		5	$\rightarrow$		fuse properly disposed, fa				
41	_		: properly used & sto	red	+		5:	-		ties installed, maintained,				$\dashv$
42	-		s & vegetables		+		56			tilation & lighting, designa				$\dashv$
Type of Operation:											License Pos	ted: (	Y) h	
Disc	ussion	with Pers	son-in-Charge:		à	_				77	Follow-Up:		Y (	<b>I</b>
				0 1//	1	-/-				l i	Follow-Up D	ate:		
0:				/ / // // / /	10	1		>						_
			in Charge:	mas of mil	90	01	~				Date: 14	AUGZ	02/	
Sign	ature of	f inspect	or:	- (	-						Date: 6	10171		



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



Complia	3 ( Lq   202   ance Achieved: B/ Lq Item / Location	12021	
13			
Тетр.	· Item / Location	ri .	
			Te
			$\perp$
	<u> </u>		
ACTIONS			
on			Correc
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	C of introd	LIKIN	
FLICE TOWN	AL OF HONCH	[[07]]	
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	5		_
			> 3
	ACTIONS on	Date: 19	on Dated



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



Est	ablisi	hment: <b>دن</b>	thoms C	ering			ate <b>B/</b>	10/2	1 Pag	ge 1 of _ <b>2</b>	No. of Risk Factor/Intervention Viol	ations	(2)
		326 0		Т	ime in	) OC.	Tim	e ouiZ'O	No. of Repeat Risk Factor/Intervention Viol	ations	Ø		
			er.60TNacw			R	lisk Cat	tegor	y: C.		Total Viol	ations	0
Em							hone:		1		Inspection Status: Green Yellow	Red	7
Ins	pectio	on Type:	Routine	Re-inspection P	re-opera	tion	al	IIIn	ess In	vestigation	Complaint Other		
			(1.50	FOODBORNE ILLNES									
			Circle design	ated compliance status (IN, C							in appropriate box for COS and/or R		
			iN = in compli	ance OUT= not in compliance	NO = not	obse	erved N/	<b>A</b> = n	ot appl		corrected on-site R = repeat violation		
Com	nlian	ce Status	-			os	R	Co	- Ila	ice Status		cos	l R
5011	pitari	ce Status	S	upervision		03	IN	0.0	IIIpitat	ice Status	Protection from Contamination	003	1 1
1		DUT	Person in charge p	resent, demonstrates knowledge a	nd			15	70	OUT N/A NO	Food separated and protected	T	T
2		DUT N/A	performs duties  Certified Food Pro	ection Manager				16		OUT N/A	Food-contact surfaces cleaned and sanitized	+-	+
Ì				loyee Health				17	_	OUT N/ANO	Proper disposition or returned, previously served,	+	+-
_		\		employees & conditional employee				''	IIN		reconditioned & unsafe food		
3	M		knowledge, respon	sibilities and reporting							Time / Temperature Control for Safety		
4	(N)			ction and exclusion				18		OUT N/ANO	Proper cooking time and temperature	┼	+
5	(IN)	DUT		ponding to vomiting and diarrheal e	vents	-		19	_	OUT N/A TO	Proper reheating procedures for hot holding	+	+
6	INC	DUT NO	T .	ygiene Practices ng, drinking, or tobacco use				20	_	OUT N/A NO	Proper bot holding tomperatures		+
7	INC	$\rightarrow$	No discharge from				$\vdash$	22	_	OUT N/A NO	Proper hot holding temperatures  Proper cold holding temperatures	+	-
-	114 0	701 (10)		ntamination by Hands				23		OUT N/A NO	Proper date marking and disposition	+-	+
8	INC	DUT (10)	Hands clean & prop					24		OUT N/A NO	Time as a Public Health Control: procedures and records	+	+
9	₩	UT N/A NO	No bare hand conta					-	1		Consumer Advisory		
10	(IN d			hing sinks properly supplied & acce	ssible			25	IN	OUT(N/A)	Consumer advisory provided for raw/undercooked foods	Τ	7
			Аррі	oved Source							Highly Susceptible Populations		
11	TRO O	ΨT	Food obtained from	an approved source				26	JN	OUT N/A	Pasteurized foods used; prohibited foods not offered	T	
12	ТИΟ	OUT N/A NO	Food received at pr	oper temperature						Foo	od / Color Additives and Toxic Substances		
13	(N)	DUT	Food in good condi	ion, safe & unadulterated				27	ΙN	OUTWA	Food additives; approved and properly used		
14	IN O	ON AND TU	Req. records availa	ole: shell stock tags, parasite destru	uction			28	1	OUT N/A	Toxic substances properly identified, stored and used		
	R	isk factors a	re improper practic	ces or procedures identified as foodbome illness or injury, Pul es to prevent foodborne illnes	the most			-			onformance with Approved Procedures		
	Ini	terventions a	are control measur	es to prevent foodborne illnes	or injury.			19	IN	OUT	Compliance with variance/specialized process/HACCP		
					G00	D Ri	ETAIL	PRAC	CTICES	5			
- 1				retail practices are preventative me									
Mar	K "X" I	n box if num	bered item is not i	n compliance Mark "X"	on appro	priate	e box for	rCOS	and/o	r COS	=corrected on-site during inspection R=repeat	violation	_
Comp	lianc	e Status			CC	S	R	Соп	npliano	e Status		cos	R
				od and Water				1			Proper Use of Utensils		
30			eggs used where rec					43	-		ils properly stored		$\vdash$
31			from approved source			-		44	+	-	ulpment & linens; properly stored, dried, & handled		$\vdash$
32		variance ob	tained for specialized	perature Control			$\dashv$	46	+	Gloves used	ingle-service articles: properly stored & used	┼	$\vdash \vdash$
33		Proper cooli	<del></del>	equate equipment for temp, control			_	40		Gitves used	Utensils, Equipment and Vending	نــــا	
34		· ·	roperly cooked for ho			$\dashv$	$\dashv$	47	1	Food and no	n-food contact surfaces cleanable.		
35			awing methods used		-	$\dashv$	$\neg$	48	-	+	igned, constructed, & used	$\Box$	$\Box$
36		Thermomete	ers provided and accu	rate		$\neg$		49		1	g: installed, maintained, & used: test strips		
			Food 1	dentification							Physical Facilities		
37		Food proper	ly labeled: original co	ntainer				50		Hot & cold wa	ater available adequate pressure		
			Prevention of	Food Contamination	1			51		Plumbing inst	talled, proper backflow devices		
38		Insects, rode	ents, & animals not pr	esent		_		52		Sewage & wa	aste water properly disposed		
39				ood preparation, storage & display	-	_		53		+	s properly constructed, supplied, & cleaned		Ш
40		Personal cle				_		54	+		efuse properly disposed, facilities maintained		$\vdash$
41			s: properly used & sto	red		$\dashv$	$\dashv$	55	+	<del>  - '</del>	ities installed, maintained, & clean	$\vdash$	$\vdash$
42		wasning frui	ts & vegetables					56		Adequate ver	ntilation & lighting, designated areas used		
Тур	e of C	Operation:									License Posted:	Y) I	N
		•	son-in-Charge:								Follow-Up:	V C	N)
			Olinigo.		1/						Follow-Up Date:		
				yny VIR	16						T OBOW-Op Date.		_
			in Charge:	Gruy VIR							Date: 8/10 / 20	2)	
Sign	ature	e of Inspect	ior:	25://	~		_	_			Date: 8/ to 1707.1		



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



Es	tablishmer	L Dw Higner	catering	Date:	Date: 8/10/2021 Page Z of 2						
Ad	dress: 32	L Dw Highus	244		Compli	Compliance Achieved: 8/Lo/102					
				TEMPERATURE OBSERVAT	IONS						
_		Item / Location	Temp.	Item / Location	Temp.	Item / Location		Temp			
	•							-			
	Item	<u> </u>	OR	SERVATIONS AND/OR CORRECTI	VE ACTIONS						
V	Number	Section of Code		Description of Vi	iolation		I	d Corrected or COS			
						·					
_											
_					<u> </u>						
_											
			1002 ml ma	Loons observed the	Seet all man	c in-archina					
			the atotas	trons observed du	THE THE &	- inspection.					
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			Ful VI					61			
		rson in Charge:		<u> </u>		Date: 8	10/20	21			
igna	ature of Ins	spector:	1. //			Date: 6 / Lo	1702				



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



Es	tablis	hment: 🛵	nd+ chocol	pite #449		Date:2	1512	Pag	ge 1 of	No. of R	lisk Factor/Inf	ervention Viol	lations (	7
Ac	idres	BO Pr	enzium od	tict 81 upl. 4=361					ne out <b>z:</b>					_
				sprungli (USA) inc		Risk Ca		_				Total Viol	- +	_
	nail:					Phone:		_	424 6549	Inspection Status	Green		Red	0
Ins	pecti	on Type:	Routine	Re-inspection Pre-o	peratio				vestigation	Complaint			100	_
				FOODBORNE ILLNESS RI					9		Olik	71		
			Circle design	ated compliance status (IN, OUT,						in appropriate box for	or COS and/or	 R		
			IN = in compli	ance OUT= not in compliance NO	= not ob	served N	<b>I/A</b> = no	t app						
Con	nplian	ce Status			lcos				nce Status				laca	1 -
	_		S	upervision	. 1000	3 1 1	0011	rpitat	ice Status	Protection from	Contamination	)7I	COS	_ F
1	lly	OUT	Person in charge p	resent, demonstrates knowledge and			15	(IN	OUT N/A NO	Food separated and			1	Т
2	IN	PUT N/A	Certified Food Pro	ection Manager	+	+	16	IN	A/N TUC	Food-contact surface	s cleaned and sa	nitized	+	╁
			Emp	loyee Health			17	1	OUT N/A NO	Proper disposition or	returned, previous		+-	H
3	(IN	DUT		employees & conditional employee;	T	<del></del>		1		reconditioned & unsai		4		_
4	*	DUT		sibilities and reporting ction and exclusion	-	+	40	Liv		Time / Temperatur		afety		
5		UT		conding to vomiting and diarrheal events	-		18	-	OUT WAND	Proper cooking time a			+	1
				ygiene Practices			20		OUT N/A NO	Proper reheating proc Proper cooling time a		Iding	-	⊬
6	IN (	OUT (NO		ng, drinking, or tobacco use			21	+	OUT N/A NO	Proper hot holding ter			+	⊬
7	IN 0	OUT NO	No discharge from	eyes, nose, mouth			22	$\rightarrow$	DUT N/A NO	Proper cold holding te	<del>`</del>		+	H
		×	Preventing Co	ntamination by Hands			23	İN	DUT N/A NO	Proper date marking a			+	-
8	IN C	OUT NO	Hands clean & prop	erly washed		T	24	IN	OUT VANO	Time as a Public Heal	th Control: proces	lures and records	+	
9		OUT N/A NO	No bare hand conta	ct with RTE food						Consumer	Advisory			
10	(IŃ S	JUT		ning sinks properly supplied & accessible			25	IN	OUT N/A	Consumer advisory pr	ovided for raw/un	dercooked foods		Г
44	(ÎN)			oved Source	1			_		Highly Susceptil	le Population			
11		OUT N/A(NO)		an approved source	-		26		OUT N/A	Pasteurized foods use				
12	IN		Food received at pre		-					d / Color Additives				
14	<b>\</b>	OU N/A NO		on, safe & unadulterated	-	+-	27		OUT N/A	Food additives; approv			$\perp$	_
17				ple: shell stock tags, parasite destruction	1		28	UN)	DUT N/A	Toxic substances prop				-
	Pi	evalent cont	re improper praction ributing factors of t	es or procedures identified as the toodborne illness or injury. Public hes to prevent foodborne illness or i	most lealth		-			onformance with A				
	ın	terventions a	measur		_		19		OUT (VA)	Compliance with variar	nce/specialized pr	ocess/HACCP		
						RETAIL								
Mai	k "X" i	n box if num	bered item is not in	retail practices are preventative measure n compliance Mark "X" on a						and physical objects into corrected on-site du		R=repeat v	inlation	_
`om	olinna	e Status						a i a i	100		ing inoposion	TE-TOPCAL V		
20111	Pilalic	e otatus	Safe Fo	od and Water	cos	R	Comp	liano	e Status	Proper Use o	f Hamalla		cos	R
30	T	Pasteurized	eggs used where req			1	43	<u> </u>	In-use utensil	Is properly stored	i Utensus			_
31		Water & Ice	from approved source	,		1	44			ipment & linens: properl	v stored, dried, &	handled		_
32		Variance obt	ained for specialized	processing methods			45			ngle-service articles: pro				$\neg$
			Food Tem	perature Control			46		Gloves used					
33		Proper coolin	ig methods used; ade	quate equipment for temp, control						Utensila, Equipme	nt and Vendin	5		
34	<u> </u>		operly cooked for hot	holding	_	1	47		Food and nor	n-food contact surfaces	deanable,			
35			wing methods used		-		48		Properly design	gned, constructed, & use	ed			
36		Thermomete	rs provided and accur			1	49		Warewashing	: installed, maintained, &	<u>-</u>			
37		Food propert	y labeled: original con	lentification	T			····	I II . a I .	Physical Fa		-		_
3,		r ood properi		ood Contamination	Ь	-	50			iter available adequate p				$\dashv$
38		Insects, rode	nts. & animals not pre		T		52			alled, proper backflow d ste water properly dispo			$\rightarrow$	$\dashv$
39				od preparation, storage & display			53			properly constructed, s		-		$\dashv$
40		Personal dea					54			fuse properly disposed,				$\dashv$
41		Wiping cloths	: properly used & stor	ed			55			ies installed, maintained				$\dashv$
42		Washing fruit	s & vegetables				56		Adequate vent	tilation & lighting, design	ated areas used		-	┪
Tue	0 06 0	)norotion:											-	
		peration:									License Pos	ted:	Y ) N	
Disc	cussic	n with Pers	on-in-Charge:								Follow-Up:		P (N	1
				7,						[	Follow-Up D	ate:		1
Sign	ature	of Person	in Charge:		2						Date: 🖇	1 7:</td <td></td> <td><math>\dashv</math></td>		$\dashv$
		of Inspect			and it	-						1/1-1		4
oigr	ature	ormspectr	~ /								Date: 81	12021		



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



Establishme	EUR LINCHE CHO	colate =	#447		D	late: 8/5 / 2021	Page _2 of _2_
Address: 8	DEMION	orstie+	Blud	#F361	C	ompliance Achieved: 815	12021
				TEMPERATURE OB	SERVATIONS		
	Item / Location		Temp.	Item / Location	Tem	p. Item / Loca	tion Temp
				DBSERVATIONS AND/OR CO	DDECTIVE ACTIONS		
. Item							2001
Number	Section of Code			Descri	otion of Violation		Dated Corrected or COS
		·					
_							
		13.7	0 07.70	attons observed	disting 15-10	1 :	
		100	ا حال	ations observed	CIGHTHE C	St III HECHON.	
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		29/		2			
gnature of P	erson in Charge:	F1/4	WY/			Date:	15/21
ignature of Ir	nspector:	06-				Date: Q1	5/2011
- "	·	The same of the sa					771200



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

Est	tablishment: 🐴	titude Trampoline Park		Date	15/21	Pag	e 1 of	No. of Ri	sk Factor/Intervention	Violation	ns 💉
Ad	dress: 360	PW Highway # 101		Time i	11:00	Time	e out:II: #D		sk Factor/Intervention		
		der Autitude Transpoline park LLC	_		ategory					Violation	
		ititudemerromacy.com		Phone		-	3073	Inspection Status		Red	7
	pection Type:		peratio		-		vestigation	Complaint	Other		
		FOODBORNE ILLNESS RIS					9		Other		
		Circle designated compliance status (IN, OUT, I						in appropriate box for	r COS and/or R		
		IN = in compliance OUT= not in compliance NO =		<u> </u>		t appli					
	pliance Status										
JOIT	ipiiance Status	Supervision	cos	R	Соп	ıplian	ce Status	Protection from	Contomination	CC	OS F
1	INOUT	Person in charge present, demonstrates knowledge and	Т.		15	V IN	BUT N/A NO	T T			
2	IN OUT NA	performs duties	+		l			Food separated and p		$-\!$	+
	114 COTHWAY	Certified Food Protection Manager			16	$\overline{}$	OUT N/A		eturned, previously served,	-	$\rightarrow$
		Employee Health  Management/food employees & conditional employee;		_	17		OUTNIANO	reconditioned & unsafe			
3	INOUT	knowledge, responsibilities and reporting						Time / Temperature	Control for Safety		
4	LINDUT	Proper use of restriction and exclusion			18	IN	OUT N/A TO	Proper cooking time a	nd temperature		
5	TUQUI	Procedures for responding to vomiting and diarrheal events			19	IN	OUT(N/A)NO	Proper reheating proce	adures for hot holding		
		Good Hygiene Practices			20	_	OUT WA NO	Proper cooling time an	d temperatures		
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use		$\bot$	21	100	OI AW JUO	Proper hot holding terr	peratures		
7	IN OUT (NO)	No discharge from eyes, nose, mouth			22	-	ON AIN TU	Proper cold holding ter	nperatures		
		Preventing Contamination by Hands			23	_	DUT N/A NO	Proper date marking a			
8	IN OUT NO	Hands clean & properly washed		$\perp$	24	IN 0	OUT NIA NO		h Control; procedures and re-	cords	
9	IN OUT N/A (10	No bare hand contact with RTE food		$\perp$			(~)	Consumer			
10	IN DUT	Adequate handwashing sinks properly supplied & accessible		1	25	IN C	DUT N/A		ovided for raw/undercooked for	ods	
11	INDUT	Approved Source			- 00	1 100	NUT (III)	Highly Susceptib		. 1	
12	JN OUT N/A NO	Food obtained from an approved source	+-	+-	26	INC	DUT(NA)		d; prohibited foods not offered		
13	NOUT	Food received at proper temperature  Food in good condition, safe & unadulterated	+-	+	27	T INL	DUTINA		and Toxic Substances		
14	IN OUT N/A NO	Reg. records available; shell stock tags, parasite destruction	+-	+-	28	2.33	DUT N/A	Food additives: approve	ed and properly used orly identified, stored and use		+
				-	20			onformance with Ap		u	
	Prevalent conf	are improper practices or procedures identified as the r tributing factors of foodborne illness or injury. Public H are control measures to prevent foodborne illness or in	nost ealth	ľ		Τ					· · · ·
	Interventions a				19		DUT (A)	Compliance with varian	ce/specialized process/HACC	.Р	
				<del></del>	PRAC	_					
Mar	k "X" in box if num	Good retail practices are preventative measures shered item is not in compliance Mark "X" on a						and physical objects into =corrected on-site du		eat violat	ion
								CONTOUR ON ONE GU	mg mopeonom 14-rep		
omi	oliance Status	Safe Food and Water	cos	l R	Comp	olianc	e Status	Thomas II	C 17	COS	SR
30	Pasteurized	eggs used where required	<u> </u>		43	Τ.	In-use utensi	Proper Use of	Utensiis		_
31		from approved source	-	+-	44	$\vdash$			y stored, dried, & handled		-
32		tained for specialized processing methods	+	+	45	$\vdash$		ngle-service articles: pro			
		Food Temperature Control	-	_	46	$\vdash$	Gloves used		, , , , , , , , , , , , , , , , , , , ,		_
33	Proper cooli	ng methods used: adequate equipment for temp. control	T					Utensils, Equipmen	at and Vending		
34	Plant food p	roperly cooked for hot holding		$\Box$	47 ·		Food and no	n-food contact surfaces of		$\neg$	$\top$
35	Approved th	awing methods used		$\Box$	48		Property desi	gned, constructed, & use	ıd		$\top$
36	Thermomete	ers provided and accurate			49		Warewashing	: installed, maintained, 8	used: test strips		
		Food Identification		_				Physical Fa	cilities		
37	Food proper	ly labeled: original container			50		Hot & cold wa	iter available adequate p	ressure		
		Prevention of Food Contamination			51		Plumbing inst	alled, proper backflow de	evices		
38		ants, & animals not present	↓		52		Sewage & wa	iste water properly dispo-	sed		
39		on prevented during food preparation, storage & display	-		53		Toilet facilitie:	s properly constructed, si	upplied, & cleaned		
40	Personal de		<u> </u>		54	$\square$		fuse property disposed, f			
41		s: property used & stored	<u> </u>		55	$\vdash$		ties installed, maintained		$\rightarrow$	$\perp \!\!\! \perp \!\!\! \perp$
\$2	Washing frui	is & vegetables			56		Adequate ver	tilation & lighting, design	ated areas used		4
Гур	e of Operation:								License Posted:	(Y)	N
	cussion with Per	son-in-Charge							Follow-Up:	<del></del>	(N)
		out at official			and the second					1	9
			- Carried State St	Name of Street, or other Desirements					Foliow-Up Date:		
Sign	ature of Person	in Charge:	g-a-						Date: 8/5/2		
Sjar	ature of Inspect	tor: C - C	-						Date: 8/5/202	1	$\neg$
3.	op300								8,3,00	1	



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



[5   202  Page 2 of
ance Achieved: 8/5 [262]
- Item / Location
Dated Cor
31 00
1
inspection.
77.



### **HEALTH DIVISION**

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



		FOOD ESTA	ABLI	SHN	IEN'	ГП	NSPECTION	REPORT	
Estab	lishment: ףב	ortotino		Date	3/4/	21	Page 1 of <u>2</u>	No. of Risk Factor/Intervention Violation	ons 😢
Addre	SS: 458 D	w Highway_		Time	in[ :3	b	Time out2:30	No. of Repeat Risk Factor/Intervention Violation	ons (7
		er. Giblianna Davidson	1	Risk	Catego	ory:		Total Violatio	ons (7
Email				Phon	e:/ , _ :	, , , , ,	124-4010	Inspection Status: (Green ) Yellow Rec	
Inspec	ction Type:	Routine Re-inspection Pre-op					ss Investigation	Complaint Other	
		FOODBORNE ILLNESS RIS							
		Circle designated compliance status (IN, OUT, N						in appropriate box for COS and/or R	
		IN = in compliance OUT= not in compliance NO =	not ob:	served	N/A =	not			
Compli	ance Status					-			
DOMPH	ance Status	Supervision	cos	R	-    -	om	pliance Status	Protection from Contamination	cos
1 7	IN OUT	Person in charge present, demonstrates knowledge and performs duties	T	T	1	15	IN OUT N/A NO	Food separated and protected	T
2 (	IN DUT N/A	Certified Food Protection Manager	+	$\top$	1	16	IN OUT N/A	Food-contact surfaces cleaned and sanitized	
		Employee Health			1	17	IN OUT N/ NO	Proper disposition or returned, previously served,	
3	TUOUT	Management/food employees & conditional employee;	1	1	1  -		,	reconditioned & unsefe food Time / Temperature Control for Safety	
<b>—</b>	TUQUI	knowledge, responsibilities and reporting  Proper use of restriction and exclusion	+	+-	1  -	18	IN OUT N/ANO	Proper cooking time and temperature	
	NOUT	Procedures for responding to vomiting and diarrheal events	+	+	4 H	19	IN OUT N/A NO	Proper reheating procedures for hot holding	$\rightarrow$
, , ,		Good Hygiene Practices			1   2	20	IN OUT N/A (O)	Proper cooling time and temperatures	$\rightarrow$
6 1	NOUT TO	Proper eating, tasting, drinking, or tobacco use	Т	T	1   2	21	IN OUT N/A (O)	Proper hot holding temperatures	
7	N OUT NO	No discharge from eyes, nose, mouth				22	IN OUT N/A NO	Proper cold holding temperatures	
		Preventing Contamination by Hands				23	ON AN TUO	Proper date marking and disposition	
8 (1	NO TUEN	Hands clean & properly washed			] [2	24	IN OUT NA NO	Time as a Public Health Control: procedures and records	
9 (1	N DUT N/A NO	No bare hand contact with RTE food				11.		Consumer Advisory	
10	N DUT	Adequate handwashing sinks properly supplied & accessible			2	25	IN DUT N/A	Consumer advisory provided for raw/undercooked foods	
		Approved Source			1			Highly Susceptible Populations	
	TUQUI	Food obtained from an approved source	<del> </del>	<u> </u>	2	26	IN DUT N/A	Pasteurized foods used; prohibited foods not offered	
	N OUT N/A	Food received at proper temperature	$\perp$	ļ	<u> </u>			d / Color Additives and Toxic Substances	
_	NOUT	Food in good condition, safe & unadulterated	$oxed{oxed}$			27	IN OUT WA	Food additives: approved and properly used	
14 JI	N OUT (N/A NO	Req. records available: shell stock tags, parasite destruction	<u> </u>		2	8	IN OUT N/A	Toxic substances properly identified, stored and used	
	Risk factors a Prevalent cont	re improper practices or procedures identified as the m ributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or inj	iost ealth		f			onformance with Approved Procedures	
	Interventions a					9	IN OUT N/A	Compliance with variance/specialized process/HACCP	
			OOD R						
Mark "	₹" in how if num	Good retail practices are preventative measures bered item is not in compliance Mark "X" on ap							-41
IVIGIN	A III DOX II HUIII	bered item is not in compliance Mark "X" on ap	propria	ile box	. IOI CC	/ <b>5</b> a	ilid/ol COS -	corrected on-site during inspection R=repeat viol	300n
Complia	nce Status	CLAIR I THE	cos	R	Co	mp	liance Status		OS R
30	Pacta wired	Safe Food and Water eggs used where required		<u> </u>	4:	2	I to consistenci	Proper Use of Utensils Is properly stored	
31		from approved source		1	4	-		ipment & linens: properly stored, dried, & handled	
32		tained for specialized processing methods	_	$\vdash$	45	-		ngle-service articles: properly stored & used	
		Food Temperature Control			46	-	Gloves used		
33	Proper cooli	ng methods used: adequate equipment for temp, control		T		-		Utensils, Equipment and Vending	
34		roperly cooked for hot holding		<u> </u>	47	7 -	Food and nor	n-food contact surfaces cleanable,	
35		awing methods used			48	-		gned, constructed, & used	
36		ers provided and accurate			49	$\rightarrow$		; installed, maintained, & used: test strips	$\neg$
-		Food Identification						Physical Facilities	
37	Food proper	ly labeled: original container			50	5	Hot & cold wa	ater available adequate pressure	
		Prevention of Food Contamination			51	1		alled, proper backflow devices	+-
38	Insects, rode	ents, & animals not present		П	52	2		iste water properly disposed	$\overline{}$
39	Contamination	on prevented during food preparation, storage & display			53	3		s properly constructed, supplied, & cleaned	
40	Personal clea	anliness			54		Garbage & re	fuse properly disposed, facilities maintained	$\top$
41	Wiping cloths	s; properly used & stored			55	;	Physical facili	ties installed, maintained, & clean	$\neg$
42	Washing fruit	ts & vegetables			56	5		tilation & lighting, designated areas used	
_						_			
	of Operation:							License Posted: (Y	<u> </u>
Discus	sion with Per	son-in-Charge:						Follow-Up: Y	(N)
	will Ban							Follow-Up Date:	
Signati	ure of Person	h Charge:						Date: 8/4/2021	
		- <del>-   -   -   -   -   -   -   -   -   -</del>				_		90.11	
Signati	ure of Inspect	or: July						Date: 8/4/202	



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



Establishment: Portogno  Address: 458 DW Hignway  TEMPERATURE OBSERVATIONS  Item/Location  Temp. Item/Location  Cut Ictuse in him 41  Cut Ictuse in him 40  OBSERVATIONS AND/OR CORRECTIVE ACTIO  V Item Number Section of Code Description of Violation	Compliar Temp.	Item/Locati		Temp
Item/Location Temp. Item/Location  Cut letter in - Nino 41  Cut chirlen welk-in 40  OBSERVATIONS AND/OR CORRECTIVE ACTIO	Temp.			Тетр
OBSERVATIONS AND/OR CORRECTIVE ACTIO		Item / Locati	ion	Temp
OBSERVATIONS AND/OR CORRECTIVE ACTIO	NS			-
OBSERVATIONS AND/OR CORRECTIVE ACTIO	NS			-
V Item Section of Code Page Violation	NS			1
V Item Section of Code Page Violation	NS			1
V Item Section of Code Pascription of Violation	NS			+
V Item Section of Code Pascription of Violation	IA9			
V Section of Code 1 Becommission of Michelen				
				Corrected COS
to usolations observed during ti	me of	inspection		
4				
,		·		
			i	
	<del></del> -			
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		,		
		<u></u>		
Signature of Person in Charge:		Date:		
Signature of Inspector:		Date: 😂 🗸	11702.L	



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



ESI	tablishment: M	crimcul Hoose of pizzen		Date 8 19 21 Page 1 of					No. of Risk Factor/Intervention Violations 2				
Adı	dress: <b>\$63</b> (	MANUEY ,	1	Time	in	P130	Tim	e out <b>\\'.3</b> C	No. of Repeat Ris	sk Factor/Intervention V	iolations	Ø	
		er: Reac said		Risk	Car	legory	-			Total V	iolations	2	
Em			_					300 <u>3</u>	Inspection Status:		Red		
Inc	pection Type:	(Routine) Re-inspection Pre-op									7100		
1115	pection type.				C1 A1			vestigation	Complaint	Other			
		FOODBORNE ILLNESS RIS					BLIC			000 11 0			
		Circle designated compliance status (IN, OUT, N							in appropriate box for				
	<u> </u>	IN = in compliance OUT= not in compliance NO =	not obs	serve	d N	A = not	t appli	icable COS =	corrected on-site R =	repeat violation			
Com	pliance Status		cos	R	T	Com	plian	ce Status			cos	R	
		Supervision							Protection from	Contamination			
1	(N)DUT	Person in charge present, demonstrates knowledge and performs duties				15	(N	GUT N/A NO	Food separated and p	rotected			
2	IN OUT N/A	Certified Food Protection Manager			7	16	ÎN	OUT N/A	Food-contact surfaces	cleaned and sanitized	$\neg$	+	
		Employee Health				17	IN	OUT MATO		eturned, previously served,			
3	Nout	Management/food employees & conditional employee;	Τ.	_	$\exists$				reconditioned & unsafe		-		
4	-	knowledge, responsibilities and reporting	+	+-	4		T	$\overline{}$	Time / Temperature				
5	TUONT	Proper use of restriction and exclusion	+	-	4	18	_	OUT N/A NO	Proper cooking time ar			-	
2	I (III 201	Procedures for responding to vomiting and diarrheal events  Good Hygiene Practices			-	19	-	OUT N/A NO	Proper reheating proce		-	+	
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use		_	4	21	_	OUT N/A NO	Proper cooling time and Proper hot holding tem	<del></del>		+	
7	IN OUT NO	No discharge from eyes, nose, mouth	+	+	$\dashv$	22	-	DUT N/A NO	Proper cold holding ten			+	
-	111 001 00	Preventing Contamination by Hands			+	23	-	DUT N/A NO	Proper date marking ar	<u>'</u>		-	
8	INOUT NO	Hands clean & properly washed	Т	Т	$\exists$	24		OUT N/ANO		Control: procedures and recor	de	+	
9	NOUT N/A NO	No bare hand contact with RTE food	+		-	24	1114	OU INVANO	Consumer A		as		
10	(N)OUT	Adequate handwashing sinks properly supplied & accessible	+	+	╣	25	TIND	DUT N/A		vided for raw/undercooked food	n	7	
	100001	Approved Source			-	20	٣	portwa	Highly Susceptibl		5		
11	О оит	Food obtained from an approved source	Τ.	Т	1	26	KIN	DUT N/A		; prohibited foods not offered		_	
12	IN OUT N/AND	Food received at proper temperature	+-	+	1					nd Toxic Substances		-	
13	INOUT	Food in good condition, safe & unadulterated		+	1	27	INC	OUT V/A	Food additives; approve			T	
14	IN OUT W/ NO	Req. records available; shell stock tags, parasite destruction	1	1	1	28	-	OUT N/A		rly identified, stored and used	+	+	
	Risk fectors a	re improper practices or procedures identified as the m	ıost		1			Co	onformance with Ap	proved Procedures			
	Prevalent cont	re improper practices or procedures identified as the rr tributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or inj	alth		L	19	INI	OUT (A)		ce/specialized process/HACCP		$\top$	
	THE TOTAL OF			- F100 A					Compilance with variation	erspecialized processi i Moor			
				_		PRACI							
Маг	k "X" in box if num	Good retail practices are preventative measures bered item is not in compliance Mark "X" on ap							corrected on-site dur		at violation		
					_		-						
om	oliance Status	Safe Food and Water	cos	R	-	Comp	ilianc	e Status	Proper Use of	T T74	cos	R	
30	Pasteurized	eggs used where required		Т	1	43	T	In-use utensii	Is properly stored	Utensiis	1		
31		from approved source		+-	1	44	$\vdash$			stored, dried, & handled	_	+	
32		tained for specialized processing methods		<del>                                     </del>	1	45	<del>                                     </del>		ngle-service articles: pro		_	+	
		Food Temperature Control			1	46		Gloves used			+	Н	
33	Proper cooli	ng methods used: adequate equipment for temp. control		1	1	-			Utensils, Equipmen	t and Vending	-		
34	Plant food p	roperly cooked for hot holding			1	47 -		Food and nor	r-food contact surfaces c		1		
35	Approved th	awing methods used			1	48		Property desi	gned, constructed, & use	d		$\Box$	
36	Thermomete	ers provided and accurate		1	1	49		Warewashing	: installed, maintained, &	used: test strips		$\Box$	
		Food Identification			]				Physical Fa	cilities			
37	Food proper	ly labeled; original container				50		Hot & cold wa	ater available adequate p	ressure			
		Prevention of Food Contamination				51		Plumbing inst	alled, proper backflow de	vices			
38	Insects, rode	ents, & animals not present				52		Sewage & wa	iste water properly dispos	sed			
39	Contamination	on prevented during food preparation, storage & display				53		Toilet facilities	s properly constructed, su	rpplied, & cleaned		Ш	
40	Personal cle	anliness			_	54		Garbage & re	fuse property disposed, f	acilities maintained		Ш	
41	Wiping cloth	s: properly used & stored			(2	36	X	Physical facilit	ties installed, maintained	, & clean		Ш	
42	Washing frui	ts & vegetables				56		Adequate ven	tilation & lighting, design	ated areas used		Ц	
Tyrs	Orne of Operations												
	e of Operation:									License Posted:		N	
Disc	cussion with Per	son-in-Charge:								Follow-Up: 10 days	<b>Y</b>	N	
		11.44								Follow-Up Date:			
Sion	nature of Person	in Charge: H								Date: 9 11- 5	> 1	-	
										Date: 8-4-2			
Sign	nature of Inspect	or,								Date: 8/4/202	J		



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



Establishm	ent: Mentimod	K HOOSE	of Piz		Date: 8 [ 4   202   Page 7 of 7					
Address: 6	63 pw Hta	hway					e Achieved:			
					RE OBSERVATIONS	7				
	Item / Location		Cemp.	Item / L	ocation	Temp.	ltem / Loca	tion	Temp.	
CO-1 TOM	ato/in-line	<u> </u>	10.							
		<u> </u>								
		-							+	
									-	
			OR	SERVATIONS AND/	OR CORRECTIVE A	CTIONS				
V Item	Section of Code	T	0.23					Dat	ed Corrected	
Numbe	Section of Code				Description of Violation	on —			or COS	
		Kitchen:	<u> </u>					-		
C 55	6-501.1Z	+ accumule	x-tion	of grease	en floor/w	all below fr	Neulestors, ci	EUD.		
C 55				aroe mixer.			_			
				THE .	MORRE CE LOTTE	CALCOMORAL	OH OF GED	113. (3(0)4)		
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	1									
<u> </u>										
	-									
1										
		HM.		<u> </u>						
	Person in Charge:			/				3-4-2	<u>,(                                    </u>	
Signature of	Inspector:	~ >-/	//				Date: 🥱	14-12071		



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



Es	lablishment: 🔑	efford Road Baptist unview		Date	te 22		ge 1 of No. of Risk Factor/Intervention Violations					
		edford Road		Time in	1:00	Tim	e ou <b>(::30</b>	No. of Repeat Risk Factor/Intervention Violations	7			
	ner/Permit Holo			Risk C	ategory	0	-	Total Violations	75			
Em	ail:			Phone:				Inspection Status: Green Yellow Red	S			
-	pection Type:	(Routine) Re-inspection Pre-or							_			
1110	pection Type.	Re-inspection Pre-op  FOODBORNE ILLNESS RIS					vestigation	Complaint Other				
$\vdash$		Circle designated compliance status (IN, OUT, I				DLIU		in appropriate box for COS and/or R				
_		IN = in compliance OUT= not in compliance NO =		·		l and						
		14 - II complance of 1- not in compliance No -	- HOL OL	Served I	WAY - NO	appli	icable CO3 ~	corrected on-site K = repeat violation				
Corr	pliance Status	C	COS	S R	Com	plian	ce Status	cos	R			
	12	Supervision  Person in charge present, demonstrates knowledge and				13		Protection from Contamination				
1	N OUT	performs duties			15	A IN	DUT N/A NO	Food separated and protected				
2	IN OUT N/A	Certified Food Protection Manager			16	10	OUT N/A	Food-contact surfaces cleaned and sanitized	_			
		Employee Health			17	IN	OUT N/A NO	Proper disposition or returned, previously served, reconditioned & unsafe food				
3	INOUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Time / Temperature Control for Safety				
4	TUCUIT	Proper use of restriction and exclusion		$\neg \neg$	18	IN	OUT N/A NO	Proper cooking time and temperature	T			
5	TUQUI	Procedures for responding to vomiting and diarrheal events			19	IN-	OUT N/ANO	Proper reheating procedures for hot holding				
		Good Hygiene Practices			20	IN	OUT N/A 10	Proper cooling time and temperatures				
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use		$\perp$	21	IN:	OUT N/A NO	Proper hot holding temperatures	T			
7	IN OUT (NO)	No discharge from eyes, nose, mouth			22 (		OUT N/A NO	Proper cold holding temperatures				
	-	Preventing Contamination by Hands			23		OUT N/A NO	Proper date marking and disposition				
8	IN OUT NO	Hands clean & properly washed		$\perp$	24	IN	OUT N/A NO	Time as a Public Health Control: procedures and records				
9	IN OUT N/A NO	No bare hand contact with RTE food	4_	1				Consumer Advisory				
10 (	INDUT	Adequate handwashing sinks properly supplied & accessible			25	IN C	DUT(N/A)	Consumer advisory provided for raw/undercooked foods				
11	INDUT	Approved Source				Lasta		Highly Susceptible Populations				
11	IN OUT N/A NO	Food obtained from an approved source	+		26	IN	OUT (V/A)	Pasteurized foods used; prohibited foods not offered				
13	NOUT	Food received at proper temperature	-	+		1111	4 1	d / Color Additives and Toxic Substances				
14	IN OUT NA NO	Food in good condition, safe & unadulterated  Req. records available: shell stock tags, parasite destruction	+	+	27	_	OUT N/A	Food additives: approved and properly used	-			
14					20			Toxic substances properly identified, stored and used	-			
	Prevalent con	re improper practices or procedures identified as the r tributing factors of foodborne illness or injury. Public H are control measures to prevent foodborne illness or in	nost ealth					onformance with Approved Procedures	_			
	Interventions				19	<u>.                                    </u>	DU MA	Compliance with variance/specialized process/HACCP				
				RETAIL								
Mar	k "X" in box if num	Good retail practices are preventative measure abered item is not in compliance Mark "X" on a						and physical objects into foods.  =corrected on-site during inspection R=repeat violation				
		The state of the s			31 000 0	11(0)(0)		TA-Tapeat Volation	'			
om	oliance Status	Safe Food and Water	cos	R	Comp	lianc	e Status	cos	R			
30	Paetaurizad	eggs used where required	Ť		43		T in one otensi	Proper Use of Utensils	_			
31		from approved source	+	+	44		+	ils properly stored  ipment & linens: properly stored, dried, & handled	-			
32		tained for specialized processing methods	1	+	45			ingle-service articles; properly stored & used	$\vdash$			
		Food Temperature Control			46		Gloves used		Н			
33	Proper cool	ng methods used; adequate equipment for temp, control	T			L		Utensils, Equipment and Vending				
34	Plant food p	roperly cooked for hot holding	1		47 -		Food and nor	n-food contact surfaces cleanable,				
35	Approved th	awing methods used			48		Properly desi	gned, constructed, & used	П			
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			50		Hot & cold wa	ater available adequate pressure				
		Prevention of Food Contamination	т	,	51		Plumbing inst	alled, proper backflow devices				
38	<del></del>	ents, & animals not present	-	$\vdash$	52		<del></del>	iste water properly disposed				
39		on prevented during food preparation, storage & display	-		53			s properly constructed, supplied, & cleaned	$\square$			
40	Personal de			-	54			fuse properly disposed, facilities maintained				
41		s: properly used & stored	-	$\vdash$	55			ties installed, maintained, & clean	-			
42	wasning iru	ts & vegetables			56		Adequate ven	tilation & lighting, designated areas used				
Тур	e of Operation:							License Posted:	N			
		son-in-Charge:						Follow-Up; Y	M			
		- / 1							7			
		- Variand	1	Das	M			Follow-Up Date:				
Sign	ature of Person							Date: 8-2-21	7			
	ature of Inspec							Pate: 0 / - /2021	$\dashv$			
7,91	- or mappe							Date: 8 (2 (292)				



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



	EUR REOLONG IN		t choren	Date: 8/	262021	Page Z of Z
Address:	7 Bedford Ro	ad		Compliance	Achieved: 8/2	1262
	Item / Location	Temp.	TEMPERATURE OBSERVA			
	THE THE BEING	T. CIVED:	Item / Location	Temp.	Item / Locati	ion Tem
		O.D.C.	EDW/MYASA (STEAD GATERIO	19 Y 19 4 6 19 19 19 19 19 19 19 19 19 19 19 19 19		
, Item		UBS	ERVATIONS AND/OR CORRECT			
V Number	Section of Code		Description of	Violation		Dated Correcte or COS
			<u> </u>			
		no oto	vations observe	d doring tin	e of his	hec + 10/
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		man of 6	c) ann			
anoture of P		- year			- 6	2 - 21
	erson in Charge:	( ' )			Date: 8	
ignature of In	spector:	>/ (/			Date: 8(	1/201



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



Es	tablishment: 🙌	brence Fish and Fish		Date	13/21	Page	1 of 2	No. of Risk Factor/Intervention Violations		
		veens ford road		$\overline{}$		_		No. of Repeat Risk Factor/Intervention Viol		X
		ler. Hustoe Fish & Gars Club			ategory	-		Total Viol		レベ
	ıail:			Phone:	1603	7 42	a plac		Red	
Ins	pection Type:	Routine Re-inspection Pre-op					estigation	Complaint Other		—
	,	FOODBORNE ILLNESS RIS					_			
	·	Circle designated compliance status (IN, OUT, N						in appropriate box for COS and/or R		_
		IN = in compliance OUT= not in compliance NO =				t applic				
	mlianas Status							- Indicate of the February of		
COIT	pliance Status	Supervision	cos	R	Com	pliance	e Status	Bustostin for Contactoria	cos	R
1	TUQUI	Person in charge present, demonstrates knowledge and	T	77	45	7,010	OT N/A NO	Protection from Contamination	1	Τ-
<u> </u>		performs duties	-	$\perp$	15	-		Food separated and protected		
2	IN OUT (N/A)	Certified Food Protection Manager			16	$\overline{}$	UT N/A	Food-contact surfaces cleaned and sanitized		<u> </u>
		Employee Health			17	IN O	UTNANO	Proper disposition or returned, previously served, reconditioned & unsafe food		
3	INDUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Time / Temperature Control for Safety		
4	UNGUT	Proper use of restriction and exclusion	_		18	INO	UT N/A NO	Proper cooking time and temperature	T	П
5	INDUT	Procedures for responding to vomiting and diarrheal events			19	IN O	UT WAND	Proper reheating procedures for hot holding		$\vdash$
		Good Hygiene Practices			20	IN O	UT N/A YO	Proper cooling time and temperatures		$\vdash$
6	IN OUT (NO	Proper eating, tasting, drinking, or tobacco use			21	IN OI	UTNANO	Proper hot holding temperatures		
7	IN OUT NO	No discharge from eyes, nose, mouth			22	IN OIL	UT N/A NO	Proper cold holding temperatures		
		Preventing Contamination by Hands			23	(IN )I	UT N/A NO	Proper date marking and disposition		
8	IN OUT (NO)	Hands clean & properly washed			24	IN OI	JT(N/A)IO	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	IN OUT	Adequate handwashing sinks properly supplied & accessible			25	IN OL	JT i(A)	Consumer advisory provided for raw/undercooked foods		
		Approved Source						Highly Susceptible Populations		
11 (	IN OUT	Food obtained from an approved source			26	INO	JT (NA)	Pasteurized foods used; prohibited foods not offered		
12	IN OUT N/A NO	Food received at proper temperature					Foo	d / Color Additives and Toxic Substances		
13	IN OUT	Food in good condition, safe & unadulterated			27	IN OF	JT(N/A)	Food additives: approved and properly used		
14	IN OU N/A NO	Req. records available: shell stock tags, parasite destruction			28	NO N	JT N/A	Toxic substances properly identified, stored and used		
	Risk factors a	re improper practices or procedures identified as the marbuting factors of foodborne illness or injury. Public Heare control measures to prevent foodborne illness or inj	ost		<u> </u>		Co	onformance with Approved Procedures		
	Interventions a	are control measures to prevent foodborne illness or inj	ury.		19	IN OL	JTN/A	Compliance with variance/specialized process/HACCP		
		G	OOD R	ETAIL	PRACI	TCES				
		Good retail practices are preventative measures	to contr	ol the add	dition of pa	athogens	, chemicals, a	and physical objects into foods.		
Mar	k "X" in box if num	bered item is not in compliance Mark "X" on ap	ргоргіа	te box fo	or COS a	and/or	COS =	corrected on-site during inspection R=repeat v	iolation	
om	oliance Status		cos	R	Comp	oliance	Status		cos	R
		Safe Food and Water						Proper Use of Utensils	000	
30	Pasteurized	eggs used where required			43		In-use utensil	ls properly stored		
31	Water & Ice	from approved source			44		Utensils, equi	pment & linens: properly stored, dried, & handled		
32	Variance ob	tained for specialized processing methods			45		Single-use/sir	ngle-service articles; properly stored & used		
		Food Temperature Control			46		Gloves used	properly		
33	Proper cooli	ng methods used; adequate equipment for temp. control		Ш				Utensils, Equipment and Vending		
34	Plant food p	roperty cooked for hot holding			47 ·		Food and nor	-food contact surfaces cleanable,		
35		awing methods used		Ш	48		Properly design	gned, constructed, & used		_
36	Thermomete	rs provided and accurate			49		Warewashing	: installed, maintained, & used: test strips		$\exists$
27		Food Identification						Physical Facilities		_
37	Food proper	ly labeled: original container		Щ	50	<del></del>		ter available adequate pressure	-	4
20	leanete	Prevention of Food Contamination			51	<del></del>		alled, proper backflow devices		4
38		onts, & animals not present on prevented during food preparation, storage & display			52			ste water properly disposed		-
40	Personal cle				53			properly constructed, supplied, & cleaned		
41		s: properly used & stored		_	54			fuse properly disposed, facilities maintained		
42		is & vegetables			55 56			ies installed, maintained, & dean tilation & lighting, designated areas used	-	$\dashv$
					1 00 1		madanta von	meson a ngrang, acognition arous used		
Тур	e of Operation:							License Posted:	Y N	П
Disc	ussion with Per	son-in-Charge:						Follow-Up:	r (N	7
		$\alpha = \alpha / \alpha$	/					Follow-Up Date:		1
		1/1-1-1						<u></u>		$\Box$
	ature of Person		-					Date: 8-3-80	)	
Sign	ature of Inspect	or: 3 - 9						Date: \$2-2-1011		



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



Establishme	ent: Hoyshoc	fish au	d Gard	C (10)	Da	mpliance Achieved: &	Page 2 of	f.Z_
Address: 4	44 Greens	Pond 12	$\infty$ d		Co	mpliance Achieved: 2	-3-2021	
				TEMPERATURE OBSER	VATIONS			
	Item / Location		Temp.	Item / Location	Temp.	Item/L	ocation	Temp.
		.,		OBSERVATIONS AND/OR CORRI	ECTIVE ACTIONS			
V Item Number	Section of Code			Description	n of Violation		Dated Co	
T G M B G							or C	,03
					_			
		1						
		4	010 00	lations observed d	uring time	of inspection		
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<del> </del>								
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	3 (- (3) -	11.10	- / - /	Hu.			8.2 0021	
	erson in Charge:	My	De Car	<i>y</i>			8.3-2021	
Signature of I	nspector:	_ > _ /		~		Date:	8-3-1021	1



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



Est	ablishment: 00	una stop		Date	313121	Page 1 of 2	age 1 of _2 No. of Risk Factor/Intervention Viola				
Add	ress 554 c	w Highway		Time	inti:co	Time out	No. of Repeat Risk Factor/Intervention Viol	No. of Repeat Risk Factor/Intervention Violations			
Ow	ner/Permit Hold	er: Aymam Souleiman		Risk (	Category		Total Viol	ations 📉			
Ema				Phone	e:		Inspection Status: Green Yellow	Red			
Insp	ection Type:	Routine Re-inspection Pre-o	peratio	nal	lilne	ss Investigati	on Complaint Other				
Ħ.		FOODBORNE ILLNESS RI	4								
		Circle designated compliance status (IN, OUT,					"X" in appropriate box for COS and/or R				
		IN = in compliance OUT= not in compliance NO	= not ol	served	N/A = no	applicable CO	S = corrected on-site R = repeat violation				
Com	oliance Status		cos			pliance Status		COS   R			
		Supervision		- I	1 00	phance otatus	Protection from Contamination	CO3   N			
1	INOUT	Person in charge present, demonstrates knowledge and performs duties			15	IN DUT N/A N	O Food separated and protected				
2	IN OUT N/A	Certified Food Protection Manager	$\top$		16	IN OUT N/A	Food-contact surfaces cleaned and sanitized	+			
		Employee Health			17	IN OUT N/A	Proper disposition or returned, previously served,	<del>                                      </del>			
3	INOUT	Management/food employees & conditional employee;		-			Time / Temperature Control for Safety				
4	INDUT	knowledge, responsibilities and reporting  Proper use of restriction and exclusion	+		18	IN OUT N/A		1			
5	IN DUT	Procedures for responding to vomiting and diarrheal events		-	19	IN OUT N/A	<u> </u>	+			
		Good Hygiene Practices			20	IN OUT N/A N					
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use		Ì	21	IN OUT N/A N	O Proper hot holding temperatures				
7	IN OUT (NO)	No discharge from eyes, nose, mouth			22	ÎN DUT N/A N	O Proper cold holding temperatures				
		Preventing Contamination by Hands			23	IN DUT N/A N	O Proper date marking and disposition				
8	IN DUT NO	Hands clean & properly washed			24	IN OUT (N/A)	O Time as a Public Health Control: procedures and records				
9	INJOUT N/A NO	No bare hand contact with RTE food		-	100		Consumer Advisory				
10	INDUT	Adequate handwashing sinks properly supplied & accessible  Approved Source	2		25	IN OUT N/A	Consumer advisory provided for raw/undercooked foods				
11	IN OUT	Food obtained from an approved source			26	IN OUT N/A	Highly Susceptible Populations  Pasteurized foods used; prohibited foods not offered	Т			
12	IN OUT N/A(NO	Food received at proper temperature	1				Food / Color Additives and Toxic Substances				
13	IN OUT	Food in good condition, safe & unadulterated			27	IN OUT N/A	Food additives: approved and properly used	T			
14	IN OUT N/A 10	Req, records available; shell stock tags, parasite destruction			28 (	IN OUT N/A	Toxic substances properly identified, stored and used				
	Risk factors a	re improper practices or procedures identified as the ributing factors of foodborne illness or injury. Public F are control measures to prevent foodborne illness or i	most				Conformance with Approved Procedures				
	Interventions	are control measures to prevent foodborne illness or i	njury.		19	IN OUT N/A	Compliance with variance/specialized process/HACCP				
			GOOD	RETAI	L PRACI	TCES					
84. 1	ID-60 * 1 * 50	Good retail practices are preventative measure									
Mari	"X" in box if num	bered item is not in compliance Mark "X" on a	ppropri	ate box	for COS a	and/or CC	OS =corrected on-site during inspection R=repeat	/iolation			
omp	iance Status		COS	R	Comp	liance Status		COS R			
30	Parteurizad	Safe Food and Water eggs used where required	7		43	la usa u	Proper Use of Utensils	T -			
31		from approved source	+	+	43		ensils properly stored equipment & linens: properly stored, dried, & handled	<del>   </del>			
32		tained for specialized processing methods		1	45		se/single-service articles: properly stored & used				
		Food Temperature Control		<u> </u>	46		sed properly				
33	Proper cooli	ng methods used: adequate equipment for temp. control					Utensils, Equipment and Vending				
34	Plant food p	roperly cooked for hot holding		$\perp$	47 -	Food and	f non-food contact surfaces cleanable,				
35		awing methods used	<del> </del>		48		designed, constructed, & used				
36	Inermomete	rs provided and accurate  Food Identification			49	Warewas	shing: installed, maintained, & used: test strips				
37	Food proper	ly labeled; original container	Τ΄	T -	50	Hat & col	Physical Facilities  d water available adequate pressure				
		Prevention of Food Contamination			51		installed, proper backflow devices				
38	Insects, rode	ents, & animals not present			52	Sewage 8	& waste water properly disposed				
39	Contamination	on prevented during food preparation, storage & display			53	Toilet fac	ilities properly constructed, supplied, & cleaned				
40	Personal cle			$\perp$	54	Garbage	& refuse properly disposed, facilitles maintained				
41		s; properly used & stored	1		55		facilities installed, maintained, & clean				
42	washing mui	ts & vegetables			56	Adequate	ventilation & lighting, designated areas used				
Туре	of Operation:						License Posted:	YN			
Disc	ussion with Per	son-in-Charge:					Follow-Up:	Y (N)			
		000					Follow-Up Date:				
							<u> </u>				
	ature of Person						Date: 8_3_ 20'	니			
Sign	ature of Inspect	or: / n - / / /					Date: 8/3/2021	]			
		6 10									



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



	ent: Danor St				Date	: 8-3-2021	Page	2 of 2
Address: ¿	SET DW HI	anway_	Соп	pliance Achieved: 8	+812021			
				LIUNS				
	Item/Location	1.74-	Temp.	Item / Location	Temp.	· Item / Loc	ation	Temp.
Chicken	Salad /in-	1176	4-0-					
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, Item				DESERVATIONS AND/OR CORRECTI				
V Number	Section of Code			Description of V	/iolation			Dated Corrected or COS
		A. 9:	e Jest					
			0 010	ations observed during	Time of	uzbection -		
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		OLL						
	3,001111101102001	NA				Date:	8 _	3-2021
Signature of In	spector:	<u> </u>				Date: 8	-3-2021	



#### **HEALTH DIVISION**

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



Est	tablishment: P	opper palace		Date &	1312	Page 1 of Z	No. of Risk Factor/Intervention Violations			
Ad	dress: 80 pre	mion outet Blud. #689		Time ir	12:00	Time out: 12:	3 DNo. of Repeat Risk Factor/Intervention Violatio	-1-24		
		er: pepper Dalace Inc.		Risk C	ategory	: 🚅	_ Total Violatio	ns 🖂		
Em				Phone		•	Inspection Status: Green Yellow Red	190		
Ins	pection Type:	Routine Re-inspection Pre-op-				ss Investigation				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FOODBORNE ILLNESS RIS				_	·			
		Circle designated compliance status (IN, OUT, N					X" in appropriate box for COS and/or R			
		IN = in compliance OUT= not in compliance NO =	not ob	served I	N/A = no	t applicable CO	S = corrected on-site R = repeat violation			
Com	pliance Status		cos			pliance Status		00   0		
0011	phance otates	Supervision	1000	R	COII	ipiiance Status	Protection from Contamination	OS   R		
1	IN OUT	Person in charge present, demonstrates knowledge and	1		15	IN OUT N/A N				
2	IN OUT (N/A)	Performs duties  Certified Food Protection Manager	+		16	IN OUT N/A	Food-contact surfaces cleaned and sanitized	-		
	7	Employee Health		-	17	IN OUT WAN	Proper disposition or returned, previously served,	-		
2	I DOUT	Management/food employees & conditional employee;	Τ			IN OUT WAY	reconditioned & unsare food	_		
3	IN OUT	knowledge, responsibilities and reporting	-				Time / Temperature Control for Safety			
5	IN OUT	Proper use of restriction and exclusion	-		18	IN OUT NAME				
3	INJOUT	Procedures for responding to vomiting and diarrheal events  Good Hygiene Practices			19	IN OUT NAME		+		
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use		$\neg \neg$	21	IN OUT WAY		-		
7	IN OUT (NO	No discharge from eyes, nose, mouth	+-	+-	22	IN OUT N/A N		-		
÷	111001 60	Preventing Contamination by Hands			23	IN OUT N/A N		-		
8	IN OUT (NO)	Hands clean & properly washed	T		24	IN OUT N/A N		+		
9	IN OUT N/A NO	No bare hand contact with RTE food	+	+		,	Consumer Advisory	_		
10	NOUT	Adequate handwashing sinks properly supplied & accessible	_	+	25	IN OUT NA	Consumer advisory provided for raw/undercooked foods			
		Approved Source					Highly Susceptible Populations			
11	<b>(II)</b> OUT	Food obtained from an approved source			26	IN OUT WA	Pasteurized foods used; prohibited foods not offered			
12	IN OUT N/ANO	Food received at proper temperature				I	food / Color Additives and Toxic Substances			
13	INDUT	Food in good condition, safe & unadulterated			27	IN OUT WA	Food additives: approved and properly used			
14	IN OUT WASD	Req. records available: shell stock tags, parasite destruction			28	IN DUT N/A	Toxic substances properly identified, stored and used			
	Risk factors a	re improper practices or procedures identified as the m ributing factors of foodbome illness or injury. Public He are control measures to prevent foodbome illness or inj	ost				Conformance with Approved Procedures			
	Interventions a	are control measures to prevent foodborne illness or injury.	ury.		19	IN OUT WA	Compliance with variance/specialized process/HACCP			
		G	OOD I	RETAIL	PRACI	TICES				
		Good retail practices are preventative measures	to cont	rol the ad	dition of p	athogens, chemica	ls, and physical objects into foods.			
Mar	k "X" in box if num	bered item is not in compliance Mark "X" on ap	propria	ite box f	or COS :	and/or CC	S =corrected on-site during inspection R=repeat viola	tion		
omp	oliance Status		cos	R	Comp	Illance Status	co	SR		
		Safe Food and Water					Proper Use of Utensils			
30	Pasteurized	eggs used where required			43	In-use uto	ensils properly stored			
31	Water & Ice	from approved source			44	Utensils,	equipment & linens: properly stored, dried, & handled			
32	Variance ob	tained for specialized processing methods		Щ	45	Single-us	e/single-service articles; properly stored & used	$\perp$		
		Food Temperature Control			46	Gloves us	ed properly	$\perp$		
33		ng methods used: adequate equipment for temp, control		1			Utensils, Equipment and Vending			
34		roperly cooked for hot holding		+	47 ·		non-food contact surfaces cleanable,			
35		awing methods used	<u> </u>	-	48		designed, constructed, & used	$\dashv\dashv$		
36	Thermomete	rs provided and accurate Food Identification	L	1	49	warewas	ning: installed, maintained, & used; test strips			
37	Food proper	ly labeled: original container		T	50	Hot & cold	Physical Facilities water available adequate pressure			
Ψ,	1 ode proper	Prevention of Food Contamination			51		installed, proper backflow devices	+		
38	Insects, rode	ents, & animals not present	_		52		waste water properly disposed	+		
39	_	on prevented during food preparation, storage & display			53		ities properly constructed, supplied, & cleaned	+		
40	Personal cle				54		refuse properly disposed, facilities maintained			
41	Wiping cloths	s: property used & stored			55	<del></del>	acilities installed, maintained, & clean	$\dashv$		
42	Washing frui	ts & vegetables			56	Adequate	ventilation & lighting, designated areas used			
Тур	e of Operation:						License Posted: (Y)	N		
Disc	ussion with Per	son-in-Charge:					Follow-Up: Y	M		
							Follow-Up Date:			
Ci	inture of D	in Charge (1) 1 d as a M. M.	<u></u>	A				3 /		
	ature of Person		UC	y			Date: 8 - 3 - 20	2/		
Sign	ature of inspect	or A		/			Date: 8-3-2021			
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



		i: bable [				Date: 8/3/702/ Page					
Add	dress: 😕	0 premiur	n outlet	BIVO		Comp	oliance Achieved: 8/3	12021			
		Premior			TEMPERATURE OBSE	RVATIONS	-				
		Item / Location	Т	emp.	Item / Location	7	Cemp.	Item / Location			Temp.
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				01	SERVATIONS AND/OR COR	RECTIVE ACTION	S				
	Item					F1 F 1 F				Dated C	orrected
V	Number	Section of Code			Descripti	on of Violation				or C	os
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			4.00	1.63.70.0	trons observed	daning u		- Concept them			
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01-	anti una est E	loman in Charact	9 1000	mn	1.20.10.20			Date: 8 -	3-	20	21
		erson in Charge:	Levie	186	Cerevay						
Sign	nature of li	nspector:	ce s					Date: 8-3	3-002	·	