

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



E	stablishment: 🙀	errimack High school		Date:	8/4/2	202 P a	age 1 of Z	No. of	Risk Factor/Intervention Vi	iolations	64
		CElwain streen	-						Risk Factor/Intervention Vi		
- 1		der Merrimack school District 5	415	1	 Catego					iolations	
E	mail: David.				e: 4.Z		gar.	Inspection Statu		Red	Ø
	spection Type:		peratio				nvestigation			Reu	
		FOODBORNE ILLNESS RI						Complair	other		
		Circle designated compliance status (IN, OUT,	N/A. NO	O) for e	ach item	ODLI		in appropriate box	for COS and/or D		_
		IN = in compliance OUT= not in compliance NO					olicable COS =	appropriate box	lor COS and/or R		
		The state of the s			110/74 - 1	ior app	olicable COS =	corrected on-site F	c = repeat violation		
P	mpliance Status	Supervision	COS	R	Co	mplia	nce Status			cos	R
	INOUT	Person in charge present, demonstrates knowledge and						Protection from	n Contamination		
Ľ		performs duties			1	5	DOUT N/A NO	Food separated and	r protected		
2	IN OUT N/A	Certified Food Protection Manager			11	6 <u>I</u> N	A/N TUG V		es cleaned and sanitized		
L		Employee Health			11	7 IN	ONANTUO	Proper disposition of reconditioned & unsa	r returned, previously served,		\top
3	INDUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting					- 1		re Control for Safety		_
4	INDUT	Proper use of restriction and exclusion	-	_	1 18	a Lin	OUT N/A NO	Proper cooking time			
5	NOUT	Procedures for responding to vomiting and diarrheal events	-		1 19		OUT N/A NO				+-
		Good Hygiene Practices			20	$\overline{}$	OUT N/A NO	Proper cooling time	ocedures for hot holding	+-	+
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use			21		OUT N/ANO	Proper hot holding te		-	+
7	IN OUT (NO)	No discharge from eyes, nose, mouth		+	22	-	DUT N/A NO	Proper cold holding		+-	+-
		Preventing Contamination by Hands			23		DUT N/A NO	Proper date marking		+	+
8	IN OUT NO	Hands clean & properly washed			24	_	OUTNANO		alth Control: procedures and record	de la	+-
9	IN OUT N/A NO	No bare hand contact with RTE food							Advisory	3	
10	INDUT	Adequate handwashing sinks properly supplied & accessible			25	IN	OUT		provided for raw/undercooked foods	.	
		Approved Source							ble Populations	-	
11	_	Food obtained from an approved source			26	IN	OUT N/A		ed; prohibited foods not offered	T	
12		Food received at proper temperature					Fooi		and Toxic Substances		
13	_	Food in good condition, safe & unadulterated			27	IN			ved and properly used		П
14	IN OUT N/A)10	Req. records available: shell stock tags, parasite destruction			28		DUT N/A	Toxic substances pro	perly identified, stored and used		\Box
	Risk factors a	re improper practices or procedures identified as the r ributing factors of foodborne illness or injury. Public H- tre control measures to prevent foodborne illness or in	nost				Cor	nformance with A	pproved Procedures		
	Interventions a	re control measures to prevent foodborne illness or in	ealth ijury.		19	IN	OUT NA	Compliance with varia	nce/specialized process/HACCP		
			200D I	RETAI	L PRA	CTICES	S				
		Good retail practices are preventative measures						nd physical objects into	o foods,		-
Ma	rk "X" in box if num	bered item is not in compliance Mark "X" on a						corrected on-site d		violation	\neg
om	pliance Status		COS	R	Con	npliane	ce Status			lcon I	
		Safe Food and Water			0.00		ou outus	Proper Use	of Utensils	cos	R
30	Pasteurized	eggs used where required			43		In-use utensits	properly stored		T	
31		from approved source			44		Utensils, equip	ment & linens; proper	ly stored, dried, & handled		\neg
32	Variance obt	ained for specialized processing methods			45		Single-use/sin	gle-service articles: pr	operly stored & used		\neg
		Food Temperature Control			46		Gloves used p				
33		ng methods used: adequate equipment for temp, control	<u> </u>	\sqcup				Utensils, Equipme	ent and Vending		
34		operly cooked for hot holding		\perp	47		Food and non-	food contact surfaces	cleanable,		
35 36		wing methods used			48		Properly design	ned, constructed, & us	ed		
30	Inermometer	's provided and accurate	L		49		Warewashing:	installed, maintained,			
37	Fond properly	Food Identification / labeled: original container	T				1 11 10 11	Physical F			_
	T T T T T T T T T T T T T T T T T T T	Prevention of Food Contamination			50	+		er available adequate	·	+	_
38	Insects, roder	nts, & animals not present	F		51	-		iled, proper backflow of		+	\dashv
39		n prevented during food preparation, storage & display		H	53			te water properly dispo			
40	Personal clea				54	+-		properly constructed, a		+	\dashv
41		properly used & stored		\vdash	55	-		es installed, maintaine		-	-
12		s & vegetables			56	1	_	lation & lighting, design	<u> </u>	+	\dashv
								anorra ngrang, acong	Indica di etto docti		
Гур	e of Operation: 5	chool catetaria							License Posted:	(Y) N	
	cussion with Pers							-	Follow-Up;	Y (N	_
										. (3	1
									Follow-Up Date:		
sign	nature of Person i	n Charge: Cara Cor.							Date: 8.31.20	20	
Sigr	nature of Inspecto	or: S							Date: 8-31-20ZC		\dashv
_									0-31 2020	,	1



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



Es	tablishmei	t: Merrimac	K High	school		Dat	e: 8-31-2020	Page 2	of _2_
Ad	dress: 30	MC Elwai	n stree		mpliance Achieved: 8 - 3				
_					TEMPERATURE OBSERVAT	TONS			
		Item / Location		Temp.	Item / Location	Temp.	· Item / Locution)n	Тетр
LIS	<u>alK-i</u>	n/ambien	<u> </u>	40					
									-
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				!	DBSERVATIONS AND/OR CORRECTLY	VE ACTIONS			
	Item	Section of Code						Dated	Corrected
	Number	Section of Code			Description of Vi	olation 			COS
						· · · · · · · · · · · · · · · · · · ·			_
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			*	חם טע	nations observed dur	ing time	of inspection"	Α'	
			_						
									
\Box									
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ie-	atura of Di	rson in Charge:	Day 4					0 / 2	
ngna	ature of Pe	ison in Charge: (S	-	- 00			Date: 8.	31-202	<i>O</i>
яgna	ature of Ins	spector:	/-/-	1			Date: 9_3	1-2020	



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



Est	ablishment: 😘	James United Methodist church	40	Date	-26-ZiZ	Pag	e 1 of 2	No. of Risk Factor/Intervention Viola	tions	Ø
Ade	dress: 64-6 p	ow Highway				_		No. of Repeat Risk Factor/Intervention Violat		ーの
		ler: St. Tames united Methodist che	arch !	Risk C	ategory			Total Viola	tions	Ø
Em		9 9 7 2	- 1	Phone:				Inspection Status: Yellow Re		
ins	pection Type:	(Routine) Re-inspection Pre-op	peration	nal	lline	ess In	vestigation	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 obs	served N	VA = no	t appli	cable COS =	corrected on-site R = repeat violation		
Com	pliance Status		cos				ce Status		coe	Lp
		Supervision			0011	Ipiiaii	Ce Status	Protection from Contamination	cos	R
1	(IN)OUT	Person in charge present, demonstrates knowledge and performs duties	T		15	ÎN	DUT N/A NO	Food separated and protected	<u> </u>	Т
2	(IN)OUT N/A	Certified Food Protection Manager	-		16	\rightarrow	OUT N/A	Food-contact surfaces cleaned and sanitized		\vdash
	-	Employee Health			17	-	OUT N/ANO	Proper disposition or returned, previously served,		\vdash
3	(ÎN)OUT	Management/food employees & conditional employee;				1		reconditioned & unsafe food	<u> </u>	
3		knowledge, responsibilities and reporting	+-	+		1	201	Time / Temperature Control for Safety		
5	TUGIN	Proper use of restriction and exclusion Procedures for responding to vomiting and diarrheal events	+	+-	18	\rightarrow	OUT N/A NO	Proper cooking time and temperature		-
	(IIV)	Good Hygiene Practices			19	\rightarrow	OUT N/A NO	Proper reheating procedures for hot holding		├
6	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use		\top	21		DUT N/A(NO)	Proper cooling time and temperatures Proper hot holding temperatures		\vdash
7	IN OUT (NO)	No discharge from eyes, nose, mouth	+	+	22	_	OUT N/A/NO	Proper cold holding temperatures		\vdash
		Preventing Contamination by Hands		-	23	_	OUT N/A(NO)	Proper date marking and disposition		\vdash
8	IN OUT (10)	Hands clean & properly washed	T	Т	24	IN C	ON NA TUC	Time as a Public Health Control: procedures and records		
9	IN OUT N/A(NO)	No bare hand contact with RTE food	1	\Box	-			Consumer Advisory		
10	IN OUT	Adequate handwashing sinks properly supplied & accessible			25	IN C	DUT (MA)	Consumer advisory provided for raw/undercooked foods		
		Approved Source				_		Highly Susceptible Populations		
11	IN OUT N/A NO	Food obtained from an approved source	+	-	26	INC	DUT (N/A)	Pasteurized foods used; prohibited foods not offered		Щ
12	IN OUT N/A/NO)	Food received at proper temperature Food in good condition, safe & unadulterated	+		27	LINIC	DUT (VA)	d / Color Additives and Toxic Substances		
14	IN OUT N/A NO	Req. records available: shell stock tags, parasite destruction	+-	-	27	-	OUT N/A	Food additives: approved and properly used Toxic substances properly identified, stored and used		\vdash
			nost	\vdash	20			onformance with Approved Procedures		
	Prevalent cont	re improper practices or procedures identified as the n tributing factors of foodborne illness or injury. Public H are control measures to prevent foodborne illness or in	ealth	- 1	19	TING	OUT N/A		1	
				WATER A RE			$\overline{}$	Compliance with variance/specialized process/HACCP		_
		Good retail practices are preventative measures	OOD R					and physical phinete into foods		
Маг	k "X" in box if num	bered item is not in compliance Mark "X" on ap						=corrected on-site during inspection R=repeat vic	lation	\dashv
`omr	liance Status		cos	R	Come	aliana	n Ctatus		000	
201110	TIETIOC OCALAS	Safe Food and Water	1003		Com	напс	e Status	Proper Use of Utensils	cos	R
30	Pasteurized	eggs used where required			43	T	In-use utensi	Is properly stored		
31	Water & Ice	from approved source			44		Utensils, equ	ipment & linens: properly stored, dried, & handled		
32	Variance ob	tained for specialized processing methods			45	<u> </u>	Single-use/si	ngle-service articles; properly stored & used		
	1.5	Food Temperature Control			46		Gloves used			
33		ng methods used: adequate equipment for temp. control			47		E	Utensils, Equipment and Vending		_
35		roperly cooked for hot holding awing methods used	1	\vdash	47 ·			n-food contact surfaces cleanable,	-	-
36	-	ers provided and accurate			49			r: installed, maintained, & used: test strips	\rightarrow	\dashv
		Food Identification						Physical Facilities		
37	Food proper	ly labeled: original container			50		Hot & cold wa	ater available adequate pressure	T	
		Prevention of Food Contamination			51		Plumbing inst	alled, proper backflow devices		
38		ents, & animals not present			52		Sewage & wa	ste water properly disposed		
39		on prevented during food preparation, storage & display			53		-	s properly constructed, supplied, & cleaned	_	_
40	Personal de	anliness s; properly used & stored			54			fuse properly disposed, facilities maintained	\dashv	_
42		ts & vegetables			55			ties installed, maintained, & clean tilation & lighting, designated areas used	-	\dashv
-	Trooping na	a regulated			1 30		Aucquate veri	manori & lighting, designated areas used		
Туре	of Operation:	Fonction Hall / place of worsnip						License Posted:	N	П
	ussion with Per							Follow-Up: Y	(N	7
								Follow-Up Date:		
01								- 1011		\dashv
Sign	ature of Person	in Charge: Rober House						Date: 8/26/2h		_
Sign	ature of Inspect	or: It fill						Date: 8-26-2020		



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



Es	tablishmer	it: st. Journes	United A	ceth oclist c	church			Date:8-26-2020 Page 2 of 2					
Ad	dress: 64	6 D.W. High	way					Complia	nce Achieved: 8-26 -	2020			
			ų.			TURE OBSERVATI	ONS						
		Item / Location		Temp.	Item	/ Location	Ten	np.	· Item / Location		Temp.		
				ļ							-		
				OB	SERVATIONS AN	D/OR CORRECTIV	E ACTIONS						
V	Item Number	Section of Code				Description of Vic	olation				Corrected		
	Number									ОГ	cos		
				. 4	4								
				NO VIOL	ations obse	rued during	a time	ot in	pection.				
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		rson in Charge:	The Thin	m 1717	ouse				Date: 8	26/20			
ign	ature of Ins	spector:	()	1					Date: 8-26	5-2020			



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



Establishment: St. John Nesmann Church Date 8-21-260 Page 1 of 2 No. of Risk Factor/Intervention Violati Address: 408 Milford Road Time in: 10:00 Time out: 1:00 No. of Repeat Risk Factor/Intervention Violati	
	ons 62
Owner/Permit Holder: St. Tohn Neumann Chucch Risk Category: O Total Violati	ons 🚓
Email: Phone: (603) 880 - 4697 Inspection Status: Yelfow Re	1 7
Inspection Type: Routine Re-inspection Pre-operational Illness Investigation Complaint Other	
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS	
Circle designated compliance status (IN, OUT, N/A, NO) for each item Mark "X" in appropriate box for COS and/or R	
IN = in compliance OUT= not in compliance NO = not observed N/A = not applicable COS = corrected on-site R = repeat violation	
Compliance Status COS R Compliance Status	COS R
Compliance Status Compliance Status Compliance Status Protection from Contamination	,03 1
1 Person in charge present, demonstrates knowledge and 15 IN OUT N/A NO Food separated and protected	
peromis duties	-
Proper disposition or returned previously served	
lectridationed & unsale food	
3 Management/food employees & conditional employee: Knowledge, responsibilities and reporting Time / Temperature Control for Safety	
4 NOUT Proper use of restriction and exclusion 18 IN OUT MANO Proper cooking time and temperature	
5 NOUT Procedures for responding to vomiting and diarrheal events 19 IN OUT NANO Proper reheating procedures for hot holding	
Good Hygiene Practices 20 IN OUTN/ANO Proper cooling time and temperatures	-
6 IN OUT NO Proper eating, tasting, drinking, or tobacco use 21 IN OUT N/A 10 Proper hot holding temperatures	\rightarrow
7 IN OUT NO No discharge from eyes, nose, mouth 22 NOUT N/A NO Proper cold holding temperatures	
Preventing Contamination by Hands 23 IN OUT N/A Proper date marking and disposition	-
8 IN OUT NO Hands clean & properly washed 24 IN OUT (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 (N)OUT Adequate handwashing sinks properly supplied & accessible 25 IN OUT (N/A) Consumer advisory provided for raw/undercooked foods	
10 (N)OUT Adequate handwashing sinks properly supplied & accessible 25 IN OUT (N/A) Consumer advisory provided for raw/undercooked foods Approved Source Highly Susceptible Populations	
11 ANOUT Food obtained from an approved source 26 IN OUT (IA) Pasteurized foods used; prohibited foods not offered	
12 IN OUT N/A NO Food received at proper temperature Food / Color Additives and Toxic Substances	
13 NOUT Food in good condition, safe & unadulterated 27 IN OUT NA Food additives: approved and properly used	
14 IN OUT N/A NO Reg, records available: shell stock tags, parasite destruction 28 (IN OUT N/A Toxic substances properly identified, stored and used	$\overline{}$
Risk factors are improper practices or procedures identified as the most Prevalent contributing factors of foodborne illness or injury, Public Health Interventions are control measures to prevent foodborne illness or injury. 19 IN OUTA Compliance with Approved Procedures Conformance with Approved Procedures 19 IN OUTA	
GOOD RETAIL PRACTICES Good retail practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.	
Mark "X" in box if numbered item is not in compliance Mark "X" on appropriate box for COS and/or COS =corrected on-site during inspection R=repeat vio	ation
	00 0
COS R Compliance Status COS R Compliance Status COS COS COMPLIANCE STATUS COMPLIANCE STA	OS R
30 Pasteurized eggs used where required 43 In-use utensils properly stored	
31 Water & Ice from approved source 44 Utensils, equipment & linens: properly stored, dried, & handled	
32 Variance obtained for specialized processing methods 45 Single-use/single-service articles: property stored & used	
Food Temperature Control 46 Gloves used properly	
33 Proper cooling methods used: adequate equipment for temp, control Utensile, Equipment and Vending	
Plant food properly cooked for hot holding 47 Food and non-food contact surfaces cleanable,	
35 Approved thawing methods used 48 Properly designed, constructed, & used	
Thermometers provided and accurate 49 Warewashing: installed, maintained, & used: test strips	
Food Identification Physical Facilities	
37 Food properly labeled: original container 50 Hot & cold water available adequate pressure	
Prevention of Food Contamination 51 Plumbing installed, proper backflow devices	
38 Insects, rodents, & animals not present 52 Sewage & waste water property disposed	
39 Contamination prevented during food preparation, storage & display 53 Toilet facilities properly constructed, supplied, & cleaned	
40 Personal cleanliness 54 Garbage & refuse properly disposed, facilities maintained	
41 Wiping cloths: properly used & stored 55 Physical facilities installed, maintained, & clean 42 Washing fruits & vegetables 56 Adequate ventilation & lighting, designated areas used	
Washing fruits & vegetables 56 Adequate ventilation & lighting, designated areas used	
Type of Operation: place of worship / Function ttall License Posted:	N N
Discussion with Person-in-Charge: Follow-Up: Y	
Follow Up Defer	Ü
Follow-Up Date:	
Signature of Person in Charge: Date: Date: 8-21-2010	ŀ



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



Page _ 2_ of _ 2_

Est	ablishmen	St. John N	eumann chu		8-21-2020	Page of		
		8 Mitord Re			oliance Achieved: 8 -21-	2020		
	10		<u> </u>	TEMPERATURE OBSERV		Item / Location	Tar	mp.
		Item / Location	Temp.	Item / Location	Temp.	Item / Location	, lei	-angre
				The second section of the second	CELESE A CELEGRIC			
				DESERVATIONS AND/OR CORRE			Dated Correct	ted
V	Item Number	Section of Code		Description	of Violation		or COS	
				-				
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			Ne week	ations observed de	ring time of	inspection.		
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Siz	nature of	Person in Charge:	100	.0825		Date:		
	gnature of	-	- 0 /			Date: 8	-21-2020	
210	ynature of	mspeciol.	-7.6					



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



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Est	ablishment: נָכּוֹ	22a Hut	C	Date:	B-1	4-20	Page	1 of _2_	No. of Risk Factor/Intervention Violation	1S 2			
		Hilford Road	1	Time	ina	1:45	Time	out:17.15	No. of Repeat Risk Factor/Intervention Violations				
			-		. 6	egory:		101	Total Violation				
		er. GC Pitza HUT				egory.	D			9 4			
Em	ail:			hone	e: 				Inspection Status: Yellow Red				
ins	pection Type:	(Routine) Re-inspection Pre-op	peration	al		Ilines	ss Inv	estigation	Complaint Other				
		FOODBORNE ILLNESS RIS	3K FAC	FORS	Al	ID PU	BLIC						
		Circle designated compliance status (IN, OUT, N							in appropriate box for COS and/or R				
		IN = in compliance OUT= not in compliance NO =	not obs	erved	N//	A = not	applic	able COS =	corrected on-site R = repeat violation				
Com	pliance Status		cos	R	T	Com	plianc	e Status	CC	OS R			
		Supervision							Protection from Contamination				
1	INDUT	Person in charge present, demonstrates knowledge and performs duties				15	(IN)	ON AN TUG	Food separated and protected				
2	(N) DUT N/A	Certified Food Protection Manager		\top	1	16		OUT N/A	Food-contact surfaces cleaned and sanitized				
		Employee Health			7	17	INC	UT N/A I/O	Proper disposition or returned, previously served, reconditioned & unsafe food				
3	INDUT	\top	Τ	1		-		Fime / Temperature Control for Safety					
-		knowledge, responsibilities and reporting Proper use of restriction and exclusion		+-	\dashv	18	LINE	OUT N/A NO	Proper cooking time and temperature				
5	IN OUT	Procedures for responding to vomiting and diarrheal events	+	+	\dashv	19	+	OUT N/A(NO	Proper reheating procedures for hot holding	-			
- 3	CISCOI	Good Hygiene Practices		-	-	20	+	OUT N/A/NO	Proper cooling time and temperatures				
6	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use	$\overline{}$	1	┨	21		ON AND TUC	Proper hot holding temperatures	+			
7	IN OUT (NO)	No discharge from eyes, nose, mouth	+	+	-	22	-	OUT N/A NO	Proper cold holding temperatures				
<u> </u>	IN COL (NO)	Preventing Contamination by Hands			1	23	_	OUT N/A NO	Proper date marking and disposition	\neg			
8	IN OUT (NO)	Hands clean & properly washed		T		24	_	OVANO	Time as a Public Health Control: procedures and records				
9	IN OUT N/A NO	No bare hand contact with RTE food	 	+	1				Consumer Advisory				
-	IN OUT	Adequate handwashing sinks properly supplied & accessible	· /	1	1	25	IN O	UT(N/A	Consumer advisory provided for raw/undercooked foods				
10		Approved Source			1				Highly Susceptible Populations				
11	INDUT	Food obtained from an approved source	\top	T	7	26	IN C	DUT N/A	Pasteurized foods used; prohibited foods not offered				
12	IN OUT N/A NO	Food received at proper temperature		T-	7			Foo	d / Color Additives and Toxic Substances				
13 (INOUT	Food in good condition, safe & unadulterated				27	INC	OUT(N/A)	Food additives: approved and properly used				
14	IN OUT N/A NO	Req. records available; shell stock tags, parasite destruction]	28		UT N/A	Toxic substances properly identified, stored and used				
	Risk factors a	re improper practices or procedures identified as the	most		1			C	onformance with Approved Procedures				
	Prevalent con Interventions	re improper practices or procedures identified as the tributing factors of foodborne illness or injury. Public hare control measures to prevent foodborne illness or i	ieaith njury,		١.	19	INC	U N/A	Compliance with variance/specialized process/HACCP				
			GOOD R	ETA	ΙLΙ	PRACI	TCES						
								ens, chemicals, and physical objects into foods. COS =corrected on-site during inspection R=repeat violation					
Mai	rk "X" in box if nun	bered item is not in compliance Mark "X" on a	рргоргіа	te bo	K TOI	r COS a	and/or	COS	=corrected on-site during inspection R=repeat viola	HOII			
Com	pliance Status		cos	R		Comp	lianc	e Status	co	S R			
		Safe Food and Water		T .	-			Ι.	Proper Use of Utensils				
30	 	l eggs used where required	+		-	43	-		ils properly stored	+			
31		from approved source	+-	├	-	44			ipment & linens: properly stored, dried, & handled	_			
32	Variance of	stained for specialized processing methods		Ш.	-	45		Gloves used	ingle-service articles: properly stored & used	+			
	1 15	Food Temperature Control		Т	1	46	Ь.	Gibves used	Utensils, Equipment and Vending				
33		Ing methods used: adequate equipment for temp, control	+-	\vdash		47 ·	1	Food and no	n-food contact surfaces cleanable,				
34		roperly cooked for hot holding having methods used	+		U	48	X	-	igned, constructed, & used				
36		ers provided and accurate	+	\vdash	1	49		1111	g: installed, maintained, & used: test strips				
30	memome	Food Identification		1			l		Physical Facilities				
37	Food prope	rly labeled: original container	T	T	1	50	T	Hot & cold w	ater available adequate pressure				
		Prevention of Food Contamination				51		Plumbing ins	talled, proper backflow devices				
38	Insects, rod	ents, & animals not present	T		1	52		Sewage & w	aste water properly disposed				
39	Contaminat	on prevented during food preparation, storage & display			1	53		Toilet facilitie	s properly constructed, supplied, & cleaned				
40	Personal ck	panliness			L	54		Garbage & re	afuse properly disposed, facilities maintained				
41	Wiping cloth	s; properly used & stored		1	D	55	X	Physical faci	ities installed, maintained, & clean				
42	Washing fru	its & vegetables				56		Adequate ve	ntilation & lighting, designated areas used				
Tree	o of Operation					· · · · · · · · · · · · · · · · · · ·			License Posted:) N			
	oe of Operation:				_								
Dis	cuspion with Pe	rson-in-Charge:							Follow-Up:	N			
South									Follow-Up Date: 14 Day	<u>s</u>			
Signature of Person in Charge:									Date: 8 - 7-20				
	noture of Inches	0 - 0							Date: Q- 13 - 0.02()	$\overline{}$			



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



Establishment: Pizza HUT							Date: 8-17-2020 Page _2_ of _2				
Add	ress: 172	A Hilford	ROOCI			Compliance	Achieved: 8-72-2	020			
					TEMPERATURE OB		Tr.	· Item / Location		Temp.	
		Item / Location		Temp.	Item / Location		Тетр.	· Meth / Lucation		Temp.	
ju-	1,000	nit/cust to	mato	40							
17-	17 ne	mit /1001/19	C) Uhicicaii	41							
			<u> </u>								
					OBSERVATIONS AND/OR CO	RRECTIVE ACTIO	INS				
V	Item	Section of Code				ption of Violation				Corrected	
· ·	Number	Section of Code		_					or	COS	
			Kitchen	:1				<u></u>	_		
PF	-lo	6-301.11	Handu	Jash.	bink near fryer	observed w	itrostoap		CO	<u>S</u>	
p.f	10	6-301.12	Hand	wash	sink near fryer dass	abserved	מת מדיקטו	PUDRY HOWE	15 (1	>5	
<u> </u>	451	4 (02 12	- 110020	Y max	of the Center was	rots Links	COT WHEE	used with	8/2	22/20	
ميا	4-14	4 - 602 (3	FIRCE	- 1 (122	a 10 A. get gas	le bone			0.12	2.[107	
_			مررك	nulca	full of discribit	deons.			012		
\mathcal{C}	55	6-501.12	+ mall !	FIDO	lequipment of	tryer stat	ton has	accomolario	211		
			+ 9	rease,	4600.						
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0		lanan in Character)		· · ·		Date: 8 - 1	7 - 20		
		Person in Charge:		1860				الم المعادلة			
Sia	nature of I	nspector: 🗘	M	-/ /	/			Date. 8-14	-2020		



HEALTH DIVISION

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



Est	tablishi	ment: 闪	errimack cinemagic	С	ate:	-20-2	Pag	ge 1 of 2	No. of Risk Factor/Intervention Vi	olation	1s 1
			cutive park Drive	Т	ime in	פפיוו	Tim	ne out:1:30	No. of Repeat Risk Factor/Intervention Vi	olation	15 Z
Ow	ner/Pe	ermit Holo	der Zaycorp Entertainment	F	Risk Ca	ategory	േ		Total Vi	olation	
Em	ail:	-raun	nond@ zyacorp.com	_	hone:				Inspection Status: Yellow	Red	
		Type:	(Routine) Re-inspection Pre-ope	eration	ai	Illne	ess Ir	nvestigation	Complaint Other		
	*		FOODBORNE ILLNESS RISI								
			Circle designated compliance status (IN, OUT, N						in appropriate box for COS and/or R		
			IN = in compliance OUT= not in compliance NO =	not obsi	erved N	I/A = no	t app	licable COS =	corrected on-site R = repeat violation		
Com	nliance	Status		cos	R			nce Status		CO	OS F
			Supervision	1000	1:	001	spiler	iice otatus	Protection from Contamination		3 1
1	(IN)	JT	Person in charge present, demonstrates knowledge and performs duties	T	\Box	15	1	OUT N/A NO	Food separated and protected		
2	(IN)DI	JT N/A	Certified Food Protection Manager	+	+	16	-	OUT N/A	Food-contact surfaces cleaned and sanitized	-	+
			Employee Health	-		17	-	OUT WA TO	Proper disposition or returned, previously served,	-	+
-	10		Management/food employees & conditional employee;			- ''			reconditioned & unsafe food		
3	(N)bı		knowledge, responsibilities and reporting		Ш		_		Time / Temperature Control for Safety		
4	(IN)Or		Proper use of restriction and exclusion			18	_	OUT N/ANO	Proper cooking time and temperature	\perp	+
5	MOC)1	Procedures for responding to vomiting and diarrheal events	<u> </u>		19		OUT N/A (10)	Proper reheating procedures for hot holding	+	
-	LINION	T (VO)	Good Hygiene Practices			20	-	ON NI TUO I	Proper cooling time and temperatures	+	+
6	IN OL		Proper eating, tasting, drinking, or tobacco use	-	\square	21		OUT N/A NO	Proper hot holding temperatures	+	+
	IN OU	T (NO)	No discharge from eyes, nose, mouth			22	-	OUT N/A NO	Proper cold holding temperatures	+	-
8	IN OU	T (NO)	Preventing Contamination by Hands Hands clean & properly washed	1		23			Proper date marking and disposition	_	+
9	-	T N/A(NO)	No bare hand contact with RTE food	-	\square	24	IN	OUTWATO	Time as a Public Health Control; procedures and record	ds	
10	IN OU		Adequate handwashing sinks properly supplied & accessible	-		25	161	OUT	Cousumer Advisory		
10	INCOO.		Approved Source			-23	III	OUT (I/A)	Consumer advisory provided for raw/undercooked food Highly Susceptible Populations	s	
11	(IN)OU	Т	Food obtained from an approved source			26	IN	OUT(N/A)	Pasteurized foods used; prohibited foods not offered		
12		T N/A	Food received at proper temperature			- 20	IIA		d / Color Additives and Toxic Substances		
13	UD VAL		Food in good condition, safe & unadulterated			27	LIM	OUT(NA)	Food additives: approved and properly used		
14		T(N/A)NO	Reg. records available: shell stock tags, parasite destruction			28	-	OUT N/A		+	+
, ,	_				-	20	,CID		Toxic substances properly identified, stored and used		
	Pre	valent con	are 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	ost alth		-	T-		onformance with Approved Procedures		
	rnte	rventions a	are control measures to prevent foodborne illness or inju	ury.		19	IN	OUT(NA	Compliance with variance/specialized process/HACCP		
				OOD RI							
f. fan	L MART I	b if	Good retail practices are preventative measures								
IVIZI	K A III	DOX II HUITI	bered item is not in compliance Mark "X" on ap	propriate	DOX 10	or COS	and/o	or COS:	=corrected on-site during inspection R=repea	It violati	on
Comp	oliance	Status		cos	R	Com	plîan	ce Status		COS	R
			Safe Food and Water				,		Proper Use of Utensils		
30			eggs used where required			43			ils properly stored		
31	-		from approved source	<u> </u>		44	_		ipment & linens: properly stored, dried, & handled		
32		Variance ob	tained for specialized processing methods			45			ngle-service articles: properly stored & used		
			Food Temperature Control		_	46		Gloves used		Щ.	
33	_		ng methods used: adequate equipment for temp. control	\vdash			_		Utensils, Equipment and Vending		
34			roperly cooked for hot holding	\longrightarrow		47 ·	1.0	-	n-food contact surfaces cleanable,		
35			awing methods used			48	X	4	gned, constructed, & used		\bot
36		Thermomete	ers provided and accurate			49	<u> </u>	Warewashing	: installed, maintained, & used: test strips		\bot
			Food Identification					1	Physical Facilities		
37		Food proper	ly labeled: original container			50	-	+	ater available adequate pressure	+	+
	10		Prevention of Food Contamination	—т		51			alled, proper backflow devices	+	+
38	-		ents, & animals not present		_	52	-		aste water properly disposed	+	+
39			on prevented during food preparation, storage & display		_	53		+	s properly constructed, supplied, & cleaned		_
40	_	Personal cle		\longrightarrow	_	54	-		fuse properly disposed, facilities maintained		
41			s; properly used & stored		\Box	55		+	ties installed, maintained, & clean	-	44
42		Washing frui	is & vegetables			56		Adequate ven	tilation & lighting, designated areas used		4
Typ	e of Or	peration:						W-1 W-	License Posted:	7\$\forall	N
			and in Channel A. A. L. A.							次	
LISC	:ussion	with Per	son-in-charge: Contact EO Tomor	ID (I)	' _ (L1	8-21	- ZC	of (ase	retorn Follow-Up:	U	N
			TOFIC- IILS PECTION, +	00	rify	407	t u	oder fon	Ctioning - Follow-Up Date:	-	
Sign	ature o	of Person	in Charge: A 1 Daylor -						Pate: AR- an -		$\overline{}$
Discussion with Person-in-Charge: Contact & tomorrow (8-21-2 for re-inspection, to verify that a Signature of Person in Charge: Daymond										<u>U</u>	
Sign	ignature of Inspector: Date: 8-70-2620										



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



Establishment: Cinemagic								Date: 8-20-2020 Page 2 of 2				
		Executive		یاور			pliance Achieved: 8-24	-2010				
						URE OBSERVATI						
-		Item / Location		Тетр.	ltem	/ Location		Temp.	· Item / Locution	0		Temp.
			+									
									<u> </u>		\neg	
					OBSERVATIONS AN	D/OR CORRECTIV	E ACTION	VS				
V	Item	Section of Code				Description of Vic	nlation				Dated Co	orrected
•	Number	1									or C	os
			SELVICE	- APLE	<u>A: 1</u>							
34	48	4-302.14	no to	2 +2	rips for so	nitiger cu	vecib	<u>le .</u>	Sanitizer in	- 5	3-24	(2020
			3-Ba	y Sin	ly must be	testal r	outire	W.	to receit à biol	er		
			SHOW	Cl.fm .	(200 ppm)			7	, , , , , , ,			
.P.C	[D	5-202 12	201a C	71	3 801 005	Mosevaled	ma'c		1 at Hand wast	2 0	-7 A	-2070
1/4		3-2-6-1-	CSTATE		J-Bay Same	ONE I VELL OF		1	J-CI (TOUTE) MOST			- (0/1
								all 1	or repair /main	ET LOST LE		
			40 EUC	ore.	collect that	woter tem	es.					
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		erson in Charge:	W-12	ay	mond				Date: 08	- 20	- 20	<u> </u>
Sign	ature of In	spector:	ニンン		2				Date: 😞 -			



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



Establishment: Punkin Donnts Date@125120 Page 1 of _2. No. of Risk Factor/Intervention Violations									Ø			
Add	dress: 🗠	tes H	ithord Road	Т	ime in:	12:45	Time	e out: [:.15	No. of Repeat R	isk Factor/Intervention Vio	lations	Ø
Ow	ner/Peri	mit Holde	er Holly Ingalls	F	Risk Ca	tegory:	C.			Total Vio	lations	Ø
_			and radenh. com	F	hone:	(603)	-2D	-2111	Inspection Status	: Yellow	Red	
	pection			eration				vestigation	Complaint	Other		
11101	-	1 7 00.	FOODBORNE ILLNESS RIS				_			0.0101		
			Circle designated compliance status (IN, OUT, N					-	in appropriate box fo	or COS and/or R		
			IN = in compliance OUT= not in compliance NO =				appli					
		24.4									looo	
Com	pliance	Status	Supervision	cos	R	Com	oltan	ce Status	Protection from	Contamination	cos	R
4	TINOUT	-	Person in charge present, demonstrates knowledge and	Т		15		OUT N/A NO	Food separated and		T	T
	7 DOUT		performs duties	-	-							+
2	CINCOL	N/A	Certified Food Protection Manager			16	-	OUT N/A		s cleaned and sanitized returned, previously served,	-	+
			Employee Health			17	IN	ON N/A NO	reconditioned & unsaf			
3	TUOOUT		Management/food employees & conditional employee; knowledge, responsibilities and reporting					*	Time / Temperature	Control for Safety		
4	TUOCUT	-	Proper use of restriction and exclusion			18	IN	OUT N/ANO	Proper cooking time a	and temperature		
5	NOUT		Procedures for responding to vomiting and diarrheal events			19	-	OUT N/A(NO)	-	pedures for hot holding		+
			Good Hygiene Practices		,	20	+	OUT NIA NO	Proper cooling time a		-	+
6	IN OUT		Proper eating, tasting, drinking, or tobacco use			21	4000	OUT N/A(NO)	Proper hot holding ter	· · · · · · · · · · · · · · · · · · ·	+	+
7	IN OUT	(NO)	No discharge from eyes, nose, mouth		1	22	1	DUT N/A NO	Proper cold holding te		+-	+-
	100		Preventing Contamination by Hands	· · · · · · · · · · · · · · · · · · ·		23		DUT N/A NO	Proper date marking a		+-	+
8	INOUT		Hands clean & properly washed	-		24	IN I	OUT N/A(NO)		th Control: procedures and records	,	_
9	TUCKI		No bare hand contact with RTE food	+	\vdash		LINI	OUT THE	Consumer	Advisory rovided for raw/undercooked foods		_
10	LINFOUT		Adequate handwashing sinks properly supplied & accessible Approved Source			25	INC	OUT N/A)	Highly Susceptil			
11 (INDOUT		Food obtained from an approved source	1	\Box	26	IN 6	OUT N/A		ed; prohibited foods not offered	T	T-
12		N/A(IO)	Food received at proper temperature	+		-	1 11 1			and Toxic Substances		
13	INJOUT		Food in good condition, safe & unadulterated	+		27	IN 0	OUT N/A	Food additives: approv	<u> </u>	Т	T
14	IN OUT	NANO	Req. records available: shell stock tags, parasite destruction	+		28	TN	DUT N/A	Toxic substances prop	erly identified, stored and used	\top	\top
	Risk	factors a	re improper practices or procedures identified as the r	nost				C	onformance with A	pproved Procedures		
	Preva	elent controls	re improper practices or procedures identified as the r ributing factors of foodborne illness or injury, Public H re control measures to prevent foodborne illness or in	ealth iurv.		19	IN	OUT N/A	Compliance with varia	nce/specialized process/HACCP		T
			· · · · · · · · · · · · · · · · · · ·	OOD R	FTAIL	PRACT						00
			Good retail practices are preventative measure						and physical objects into	o foods.		*****
Mar	k "X" in b	ox if num	bered item is not in compliance Mark "X" on a						=corrected on-site du		violatio	n
7	-Banas C	the data and		cos	R	Come	liano	e Status			cos	R
JOIN	pliance S	ratha	Safe Food and Water	003	I K	Comp	Helli	e otetos	Proper Use	of Utensils	1000	IX
30	Р	asteurized	eggs used where required	Τ		43		In-use utens	ils properly stored			
31	V	Vater & Ice	from approved source			44		Utensils, equ	ipment & linens; proper	ly stored, dried, & handled		
32	V	ariance obt	ained for specialized processing methods			45		Single-use/si	ingle-service articles: pr	operly stored & used		
			Food Temperature Control			46		Gloves used	properly			
33	P	roper coolii	ng methods used: adequate equipment for temp, control						Utensils, Equipme	ent and Vending		
34	P	lant food pi	operly cooked for hot holding			47 ·		Food and no	n-food contact surfaces	deanable,		
35	A	pproved the	awing methods used			48		1 7	igned, constructed, & us		ļ	1
36	Т	hermomete	rs provided and accurate			49		Warewashin	g: installed, maintained,			
			Food Identification					Latina Id	Physical F		T	
37	F	ood properl	y labeled: original container			50		+	ater available adequate			+-
			Prevention of Food Contamination			51		-	talied, proper backflow			╆╌┤
38			nts, & animals not present	+		52		-	aste water properly disp			
39												
40	-		s: properly used & stored	++		55			ities installed, maintaine		_	\vdash
41			is & vegetables	-		56		1	ntilation & lighting, desig		1	\vdash
											1	
Тур	e of Ope	eration:	C							License Posted:	W	N
Dis	cussion	with Per	son-in-Charge:							Follow-Up:	Y (N)
		F 41	. Al Vanadila							Follow-Up Date:		
		Hork								· · · · · · · · · · · · · · · · · · ·		\dashv
			in Charge:							Date: 8 - 25 - 20	<u> </u>	
Sign	nature o	nature of Inspector: Date: 8-25-2020										



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



Establishme	ent: Dunkin Ponut	5	Date: 8-2!	5-2020	Page <u>7</u> of <u>7</u>			
Address:	25 Milford Road		Compliance	Compliance Achieved: 8-25-2020				
			TEMPERATURE OBSERV	ATIONS				
	Item / Location	Temp.	Item / Location	Temp.	· Item / Locat	ion Temp		
·								
		OPS	ERVATIONS AND/OR CORREC	PHILIPPI A CHIMONIC				
, Item		ODS		 		I David Communication		
Number	Section of Code		Description of	of Violation		Dated Corrected or COS		
					<u> </u>			
					<u></u>			
		No violati	ions observed duri	ng time of mapes	- noit			
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·	- Al	11						
	erson in Charge:	AND DE	<u> </u>		Date: 8	125/20		
ignature of In	spector:	W/W			Date: g.	25-2027)		



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



Est	ablishment: >	ing Wang		Date	:8-	20-20	Page 1 of 2	No. of Risk Factor/Intervention Violati	ions	1	
Add	dress: 7074 1	ess: 107 Mirford Road Unit 28 Time int:45 Time out 2:30 No. of Repeat Risk Factor/Intervention Violations									
	ner/Permit Holder: Tin Fa WU Risk Category: C Total Violations 1										
		ng 123 456 1 @ gmail. com		Phor				Inspection Status: (Yellow Re	d		
	pection Type:		peration	nal		Ilines	ess Investigation	Complaint Other			
		FOODBORNE ILLNESS RIS			SAN						
		Circle designated compliance status (IN, OUT, I	VA, NO) for e	each	item	Mark "X"	in appropriate box for COS and/or R			
		IN = in compliance OUT= not in compliance NO =	not obs	serve	d N//	A = not	t applicable COS =	corrected on-site R = repeat violation			
Com	pliance Status		cos	R		Com	npliance Status		cos	R	
	pliance Status	Supervision	003	1 1	\dashv	Com	ipilance otatus	Protection from Contamination	000	110	
1	INDUT	Person in charge present, demonstrates knowledge and		T	rı	15	IN OUDWA NO	Food separated and protected	X	T	
2	(R) DUT N/A	Performs duties Certified Food Protection Manager		+	٦,	16	INOUT N/A	Food-contact surfaces cleaned and sanitized		+	
-	TOTAL TENT	Employee Health			\dashv	17	IN OUT NA NO	Proper disposition or returned, previously served,		+	
		Management/food employees & conditional employee;		_	-	<u> ''</u>		reconditioned & unsafe food			
3	NDUT	knowledge, responsibilities and reporting						Time / Temperature Control for Safety		_	
4	IN DUT	Proper use of restriction and exclusion		1	4	18	IN OUT N/A NO	Proper cooking time and temperature		┼	
5	IN DUT	Procedures for responding to vomiting and diarrheal events			4	19	IN OUT NA NO	Proper reheating procedures for hot holding		+-	
_	IN OUT (NO	Good Hygiene Practices	1	_	-	20	IN OUT N// NO	Proper cooling time and temperatures		+	
6					-	21	IN OUT N/A(NO)	Proper hot holding temperatures		\vdash	
7	IN OUT (NO	No discharge from eyes, nose, mouth	Ш.	Ш	-	22	IN OUT N/A NO	Proper cold holding temperatures Proper date marking and disposition		+-	
8	IN OUT (NO	Preventing Contamination by Hands Hands clean & properly washed	1	Т.	-	24	IN OUT MANO	Time as a Public Health Control: procedures and records		+	
9 (IN OUT N/A NO	No bare hand contact with RTE food	+	+	-	24	IN OOT WATOO	Consumer Advisory			
10 (NOUT	Adequate handwashing sinks properly supplied & accessible		+	+	25	IN OUT N/A	Consumer advisory provided for raw/undercooked foods			
10 4	_moori	Approved Source			-		· Cardon Nava	Highly Susceptible Populations			
11	TUGUIT	Food obtained from an approved source	1	Т	7	26	IN OUT N/A	Pasteurized foods used; prohibited foods not offered		T	
12	IN OUT N/ NO	Food received at proper temperature		_	-			od / Color Additives and Toxic Substances			
13 (JIN OUT_	Food in good condition, safe & unadulterated		T		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			٦	28	INDOUT N/A	Toxic substances properly identified, stored and used			
	Risk factors	are improper practices or procedures identified as the	most		7		C	onformance with Approved Procedures			
	Prevalent co Interventions	are improper practices or procedures identified as the intributing factors of foodborne illness or injury. Public Hare control measures to prevent foodborne illness or in	ealth rjury,			19	IN OUT N/A	Compliance with variance/specialized process/HACCP			
			GOOD F	ETA	ATL P	RACI	TICES			00	
		Good retail practices are preventative measure						and physical objects into foods.			
Mar	k "X" in box if nu	mbered item is not in compliance Mark "X" on a	ppropria	ite ba	x for	COS	and/or COS	=corrected on-site during inspection R=repeat vic	olation		
Comp	liance Status		cos	R	T	Comp	pliance Status	[0	cos	R	
		Safe Food and Water]			Proper Use of Utensils			
30	Pasteurize	d eggs used where required		<u> </u>		43	In-use utens	ils properly stored		Ш	
31	Water & Id	e from approved source		_	_	44	+	uipment & linens: properly stored, dried, & handled		\square	
32	Variance	btained for specialized processing methods			_	45	-	ingle-service articles: properly stored & used		Ш	
	1 -	Food Temperature Control	_		4	46	Gloves used			Щ	
33		ling methods used: adequate equipment for temp. control	-	-	-	47	T F44	Utensils, Equipment and Vending		-	
34		properly cooked for hot holding	+	\vdash	-l i	47 ·		n-food contact surfaces cleanable,		\vdash	
35		hawing methods used ters provided and accurate	+	-	-	49		g: installed, maintained, & used: test strips	-	_	
30	THEITHOILE	Food Identification			1	43	Frai Civaal III I	Physical Facilities			
37	Food prop	arly labeled; original container	T	Т	1	50	Hot & cold w	ater available adequate pressure			
		Prevention of Food Contamination			1	51		stalled, proper backflow devices			
38	Insects, ro	dents, & animals not present			1	52		aste water properly disposed			
39	Contamina	tion prevented during food preparation, storage & display			1	53	Toilet facilitie	es properly constructed, supplied, & cleaned			
40	Personal o	eanliness] [54	Garbage & re	efuse properly disposed, facilities maintained			
41	Wiping clo	hs; properly used & stored] [55	Physical facil	ities installed, maintained, & clean			
42	Washing f	uits & vegetables				56	Adequate ver	ntilation & lighting, designated areas used			
Tvn	e of Operation							License Posted:	()	N	
							-		1	N)	
DISC	ussion with P	erson-in-Charge:						Follow-Up: Y	Ų	7	
								Follow-Up Date:			
Sign	ature of Perso	n in Charge: Nang						Date: 8/70/75			
	nature of Inspe							Date: 8 - 20-2020			



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



Address: \$0\forage \text{Nifford Road Unit 28} \text{Temps Interface Disself ATIONS} \text{Temps Interface Disself ATIONS} \text{Temps Interface Disself ATIONS} Temps Interface Disself ATIONS Interface Disself ATION	Est	ablishmer	t: Xing Wan	19			Date:	-20 - 2020	Page 2 of 2
Brand Lacadism Temp. Rev. Carles of Mar. 1	Add	dress: ୱር	H Milford	Road U	nit 28	b	Complia	nce Achieved: 8-20	-2020
OBSERVATIONS AND/OR CORRECTIVE ACTIONS OBSERVATIONS AND/OR CORRECTIVE ACTIONS Description of Violation Description of Violation Description of Violation OF TOWN ONLORS. PTC CORRECTED ITEMS AND/OR CORRECTIVE ACTIONS OF TOWN ONLORS. PTC CORRECTED ITEMS AND/OR CORRECTIVE ON THE P OF TOWN ONLORS. PTC CORRECTED ITEMS AND/OR CORRECTIVE ON THE P OF TOWN ONLORS. PTC CORRECTED ITEMS AND/OR CORRECTIVE ON THE P Signature of Person in Charge: Description of Person in Charge: Des						TEMPERATURE OBSERVATIONS			
OBSERVATIONS AND/OR CORRECTIVE ACTIONS OBSERVATIONS AND/OR CORRECTIVE ACTIONS Description of Volation CCCS RITCES: P IS 5.302 11 Under Contract of the Contract of the Contract of the CCCS of Four Onlong, PTC corrected immediately. CCCS CCCCS CCCCS CCCS CCCS CCCS CCCS CCCS CCCS CCCCS CCCS CCCS						Item/Location	Тетр.	Item / Location	a Temp.
OBSERVATIONS AND/OR CORRECTIVE ACTIONS V Number Section of Code Description of Violetism Date: Corrected or COS Nitscan: P IS 5.20211 Unclining refricterator; read the fitty on top CDS of row onloss PTG corrected immediately. CDS Signature of Person in Charge: Date: 8 70 / 20				1					
V Number Section of Code Description of Violation Description of Violation Description of Violation or COS Kitchear:	[W]	N Der	f/wark-	in	40			<u> </u>	
V Number Section of Code Description of Violation Description of Violation Description of Violation or COS Kitchear:									
V Number Section of Code Description of Violation Description of Violation Description of Violation or COS Kitchear:					.				
V Number Section of Code Description of Violation Description of Violation Description of Violation or COS Kitchear:									
Number Section of Code Number Section of Code Number Section of Violation Or Code			1			OBSERVATIONS AND/OR CORRECTIVE AC	TIONS		Poted Corrected
Rithers: P 5 5.202.11 walke-in refriquentor: rown beaf stored directly ontop COS	V	l	Section of Code			Description of Violation	1		
P 15 4.302.11 walk-in refrigerents; real beef stored directly ontop COS of row onlong. PEC corrected immediatery. Signature of Person in Charge: Date: 07 19 20				Kitchen:					
Signsture of Person in Charge: Date: 3 19 23	-		1	-			1	n .41	
Signature of Person in Charge: Date: \$\int \frac{7}{2\delta}\$	1	D	3-302 1	T Walle-	in A	etricetator, row beds	Storad S	inectly onto	b . a.s
				of rou	പ വി	ions. PIC corrected imm	ediatery	-	
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	\dashv				N o	7		<i>**</i>	
				No	10				20 / 2
Signature of Inspector: Date: 8-20-2020	Sign	ature of P	erson in Charge:					Date: U	17/20
	Sign	ature of Ir	nspector:	n S./	1/1			Date: 🔏 -	10-1020



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



Est	ablishment:	nheusar Busch - Biergarten		Date:8		1-20	Page	1 of <u>2</u>	No. of Ri	sk Factor/Intervention Viola	tions '	Ø
	Iress: 221 D.w. Highway Time in: 1:00 Time out: 2:00 No. of Repeat Risk Factor/Intervention Violations											
		Ider: Anneusar Busch LLC		Risk C			C			Total Viola	tions (5
Em		Bygon		Phone		95	- 12/	22	Inspection Status		ed	
-	ection Type:	(Routine) Re-inspection Pre-op						estigation	Complaint	Other		
1113		FOODBORNE ILLNESS RIS			AN.				<u> </u>			
		Circle designated compliance status (IN, OUT, N							in appropriate box fo	r COS and/or R		
		IN = in compliance OUT= not in compliance NO =	not ob	served	N/A	= not	applica	able COS =	corrected on-site R	= repeat violation		
Com	pliance Status		cos	R		Com	nliance	Status			cos	R
COIII	phance otatus	Supervision	1000	115		00111	priarro		Protection from	Contamination	1	
1	(IN OUT	Person in charge present, demonstrates knowledge and performs duties				15	(RO	UT N/A NO	Food separated and p	protected		
2	IN DUT N/A	Certified Food Protection Manager	_			16	(IN)	UT N/A	Food-contact surfaces	s cleaned and sanitized		\top
		Employee Health				17	IN OI	UT N/A NO	Proper disposition or r	eturned, previously served,		
	(IN OUT	Management/food employees & conditional employee;				-			Time / Temperature		_	_
3		knowledge, responsibilities and reporting	-			18	LINIO	UT N/A NO	Proper cooking time a		F	$\overline{}$
5	TUOUT	Proper use of restriction and exclusion Procedures for responding to vomiting and diarrheal events				19	+	UT N/A(NO)	Proper reheating proc			-
-	IN COL	Good Hygiene Practices				20	+	UT N/A NO	Proper cooling time ar			\vdash
6	IN OUT		T			21	_	UT N/A VO	Proper hot holding ten			
7	IN OUT		1			22	(IN)DI	UT N/A NO	Proper cold holding te	mperatures		\Box
		Preventing Contamination by Hands				23	INO	ON AW TU	Proper date marking a	nd disposition		
8	IN DUT N	Hands clean & properly washed				24	IN O	TNANO	Time as a Public Heat	th Control: procedures and records		
9	UN DUT N/A N	No bare hand contact with RTE food							Consumer	Advisory		
10	TUQUIT	Adequate handwashing sinks properly supplied & accessible				25	TIMOL	JT N/A		ovided for raw/undercooked foods		
		Approved Source					1		Highly Susceptil			
11	INOUT	Food obtained from an approved source	+	+-+		26	IN O	JT (VA)		and Toxic Substances		
12	IN OUT N/A(N	Food received at proper temperature Food in good condition, safe & unadulterated	+-	+		27	IN OI	JT (/A)	Food additives: approv			
14	IN OUT WAY		+-			28	1	JT N/A		erty identified, stored and used		
14			nost	_		-			onformance with A			
	Prevalent o	are improper practices or procedures identified as the intributing factors of foodborne illness or injury. Public H s are control measures to prevent foodborne illness or in	ealth			19	IN OL	N/A		nce/specialized process/HACCP		
_				RETAL	L P	RACT						
		Good retail practices are preventative measure						s, chemicals,	and physical objects into	o foods.		
Mar	k "X" in box if r	umbered item is not in compliance Mark "X" on a							=corrected on-site du		iolation	
Com	pliance Status		cos	R		Comr	liance	Status			cos	R
COM	Dilance Status	Safe Food and Water	1000			Comp	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ottatas	Proper Use			
30	Pasteur	ed eggs used where required				43		In-use utens	ils properly stored			
31	Water 8	ce from approved source				44				ly stored, dried, & handled		
32	Variano	obtained for specialized processing methods		Щ		45			ingle-service articles: pro	operly stored & used		-
		Food Temperature Control				46		Gloves used		- 137 17		\Box
33		poling methods used: adequate equipment for temp. control	-	+		47 -		Food and an	Utensils, Equipme			
34		d properly cooked for hot holding	1	+	ŀ	48			signed, constructed, & us			
35	-	neters provided and accurate	+	+		49			g: installed, maintained,			
-	Themes	Food Identification							Physical F			
37	Food pr	perty labeled: original container				50		Hot & cold w	ater available adequate	pressure		
		Prevention of Food Contamination				51		Plumbing ins	stalled, proper backflow o	devices		\perp
38	Insects,	odents, & animals not present	4	\perp		52			aste water properly disp			\blacksquare
39	Contam	ation prevented during food preparation, storage & display	1	4		53		· · · · · · · · · · · · · · · · · · ·	es properly constructed,	**	-	\vdash
40		dearliness	+		ŀ	54			efuse properly disposed,		-	
41		oths: properly used & stored fruits & vegetables	+-	+	ŀ	55 56	+		lities installed, maintaine ntilation & lighting, desig			
44	- Average III I G	Italia di vegatabiea										
Тур	e of Operation	n:								License Posted:	<u>Y</u> 1	N
Dis	cussion with	Person-in-Charge:								Follow-Up:	Y (i	(0)
										Follow-Up Date:		
Ct-	noture of D.	on in Chama: Marton I Back	0 ~	7						Date: 08-19-7	71	\exists
		on in Charge: Caylan Rear C	01	-						0 1100	7	
Sig	nature of Insp	ector: July / ll								Date: 8-19-2020	<u></u>	



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



Est	ablishmen	t Anneusar	31350 D	Bierci	arten		Date	8-19-2020	Page	2_0	f_Z_
		D.W. might		0.0.4	33.161			pliance Achieved:			
, 101	1000. 24	D.CO. 1-1985			TEMPERATURE OBSERVA						
		Item / Location		Temp.	Item / Location	To	emp.	Item / Location			Тетр.
٥٥٥	med me	attoall / singl	c door	40'							
										_	
	<u> </u>							<u> </u>			
					OBSERVATIONS AND/OR CORRECT	PROP ACTION	2				
	Item						3			Dated 0	Corrected
V	Number	Section of Code			Description of	Alolanou				or (cos
•											
						_					
				<u> </u>	violations observed	1 yourd	tre	inspection			
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	<u></u>	l	16.11	10-	11.1.01			Date: 0	2/10	194	2/1
		Person in Charge:	carlo	uce	urdon				9	120	4)
Sig	nature of	Inspector:	E.	5	4			Date: 8-1	7-2	المدر	
		6	(



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



Establishment: Anhos	ar Busch - Hospitality 20	om	Date 8	-19-202	pPage	e 1 of <u>7</u>	No. of Ris	k Factor/Intervention	Violations	Z
Address: 221 D.W. His	ghway		Time in	13/00	Time	outz:oD	No. of Repeat Ris	k Factor/Intervention	Violations	0
Owner/Permit Holder: An	heusar Busch LLC		Risk C	ategory	G-1			Total	Violations	O
Email:	Bagol Fa-			595		Ω 7	Inspection Status:		Red	<u> </u>
Inspection Type: Rou	dina Ba increation Bas a									
mspection type. Rou		peratio				estigation	Complaint	Other		
Cir	FOODBORNE ILLNESS RE				BLIC					
	cle designated compliance status (IN, OUT,						in appropriate box for			
JN =	in compliance OUT= not in compliance NO	= not ob	served I	N/A = no	t applic	able COS =	corrected on-site R =	repeat violation		
Compliance Status		COS	R	Con	nplianc	e Status			cos	
	Supervision						Protection from (ontamination		
	in charge present, demonstrates knowledge and as duties			15	IN C	OUT N/A TO	Food separated and pr	otected		
2 IN OUT WA Certifie	d Food Protection Manager			16	IN C	DUT(N/A)	Food-contact surfaces	cleaned and sanitized		\top
	Employee Health			17	IN C	OUTOVANO	Proper disposition or re reconditioned & unsafe	turned, previously served,		T
	ement/food employees & conditional employee;		\top				Time / Temperature			-
knowlei	dge, responsibilities and reporting use of restriction and exclusion	+		18	Line	OU AWA NO				_
	ures for responding to vomiting and diarrheal events	-		19		OUT N/A NO	Proper cooking time an Proper reheating proces			+
7,1000	Good Hygiene Practices			20	_	OUT N/A NO	Proper cooling time and			+-
6 IN OUT (NO) Proper	eating, tasting, drinking, or tobacco use			21		UTALA NO	Proper bot holding temp			+
	harge from eyes, nose, mouth		1	22		UT N/ANO	Proper cold holding term			+
	enting Contamination by Hands			23		UT N/ANO	Proper date marking an			+
	lean & properly washed	T	T	24	_	UT NA NO		Control: procedures and rec	cords	+
9 IN OUT N/ANO No bare	hand contact with RTE food		+				Consumer A			_
10 DOUT Adequat	te handwashing sinks properly supplied & accessible	,	+	25	IN O	UT WA		rided for raw/undercooked for	ods	Т
	Approved Source						Highly Susceptible			
	tained from an approved source]		26	IN O	UENIA	Pasteurized foods used:	prohibited foods not offered		T
	ceived at proper temperature						d / Color Additives at	nd Toxic Substances		
	good condition, safe & unadulterated			27	INO	UCNA	Food additives: approve	and properly used		
14 IN OUT NAND Req. red	ords available: shell stock tags, parasite destruction			28	(IN O	DT N/A	Toxic substances proper	ly identified, stored and use	d	
Risk factors are impro	per practices or procedures identified as the factors of foodbome illness or injury. Public H of measures to prevent foodborne illness or in	most				Co	onformance with App	roved Procedures		
Interventions are contri	of measures to prevent foodborne illness or is	njury.		19	IN O	UT(N/A)	Compliance with variance	e/specialized process/HACC	:P	
		GOOD I	RETAIL	PRACI	FICES					<u></u>
	Good retail practices are preventative measure	s to cont	rol the ad	dition of pa	athogen:	s, chemicals, a	and physical objects into for	oods.		
Mark "X" in box if numbered ite	em is not in compliance Mark "X" on a	ppropria	ite box f	or COS	and/or	COS =	corrected on-site duri	ng inspection R=rep	eat violation	1
ompliance Status		cos	R	Com	oliance	Status			cos	R
	Safe Food and Water				. 1		Proper Use of	Utensils		
30 Pasteurized eggs user	d where required			43		In-use utensi	ls properly stored			
31 Water & Ice from appr	oved source		Ш	44		Utensils, equ	ipment & linens; properly	stored, dried, & handled		
32 Variance obtained for	specialized processing methods		Щ	45	L	Single-use/si	ngle-service articles: prop	erly stored & used		
	Food Temperature Control			46		Gloves used	properly			
	s used: adequate equipment for temp, control	-					Utensils, Equipment			
Plant food properly co		ļ		47 ·			n-food contact surfaces clo			
35 Approved thawing met 36 Thermometers provide		-	-	48			gned, constructed, & used			_
36 Thermometers provide	Food Identification		Щ	49		Warewashing	: installed, maintained, &			
37 Food properly labeled:	Manager and the second	T		50		Hot & pold wa	Physical Fac iter available adequate pro			
	ention of Food Contamination			51			alled, proper backflow dev			
38 Insects, rodents, & anii		T		52			ste water properly dispose			
	ted during food preparation, storage & display			53	_		properly constructed, su			
40 Personal cleanliness				54	 		fuse properly disposed, fa		-	
11 Wiping cloths: property	used & stored			55			lies installed, maintained,		\dashv	_
12 Washing fruits & veget	ables			56	\vdash		tilation & lighting, designa			_
Type of Operation:								License Posted:	(Y) I	N
Discussion with Person-in-C	Charge:							ollow-Up:	Y (1	N)
								Follow-Up Date:		and the same
	Marton D							. a / /		
Signature of Person in Char	ge: Carlail parcio	N						Date: 08/19/20	20	
Signature of Inspector:	2 5 / 1/2							Date: 8-19-70	OZA	\neg
								2 0 7 2	- 0	



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



Establishme	ent: Annewsar 13	usun - Hospite	with room	Date: g -	9-2020	Page 2 of 2
Address: 2	zi D.w. High	Mod		Compliance	Achieved: g.	19-2020
			TEMPERATURE OBSERVA	TIONS		
	Item / Location	Temp.	Item / Location	Temp.	· Item / Loca	tion Temp.
		OBS	ERVATIONS AND/OR CORRECT	TIVE ACTIONS		
V Item Number	Section of Code		Description of	Violation		Dated Corrected
						or COS
			<u> </u>			
	-					
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	-	no violed	Tops observed dor	ing the inspecti	00 -	
_						
	-	 				
-	1					
						
			· · · · · · · · · · · · · · · · · · ·			
ignature of F	Person in Charge: /	Carla Leas	don		Date: 7	18/19/2020
Signature of I	nepoctor:	5/6	<u> </u>			19-2020
J	rispector.	-//			Daile. P.	17-7010



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



		nheusar Busch - vending		Date:	8-11	9-202	Rage 1 of_	2	No. of R	tisk Factor/Intervention Vi	olations	s 4
Ad	dress:221 D.	w. Highway]-	Time	in: 1	<i>:0</i> 0	Time out: 2	100	No. of Repeat R	tisk Factor/Intervention Vi	olations	s C
		er Anneosar Bosch		Risk (Cate	aorv:				Total Vi	olation:	1
						, 30.) .			Increation Ctatus	- 17		14
	-	totfacker@anneuser-buse			3.				Inspection Status	S: (Grand Yellow	Red	
Ins	pection Type:		peration				ss Investiga		Complaint	Other		
		FOODBORNE ILLNESS RIS					BLIC HEAL	CH I	NTERVENTIONS			
_		Circle designated compliance status (IN, OUT, N	I/A, NO) for ea	ach i	tem	Mar	k "X"	in appropriate box for	or COS and/or R		
		IN = in compliance OUT= not in compliance NO =	not obs	served	N/A	= not	applicable C	OS =	corrected on-site R	= repeat violation		
Com	pliance Status		cos	R	\top	Com	pliance State	IS			lco	SI
		Supervision							Protection from	Contamination		
1	TUGAL	Person in charge present, demonstrates knowledge and performs duties			7	15	IN OUT N/A	No	Food separated and p	protected		
2	IN OUT IVA	Certified Food Protection Manager	+-	-	-	16	IN OUT N/A)		s cleaned and sanitized		
		Employee Health			1	17	IN OUT N/A			returned, previously served,	+	+
		Management/food employees & conditional employee;		_	-	L''	IN COUNTA	-	reconditioned & unsaf			
3	Фит	knowledge, responsibilities and reporting		1				_	Time / Temperature	e Control for Safety		
4	D OUT	Proper use of restriction and exclusion	\perp	_		18	IN OUT N/A		Proper cooking time a	and temperature		
5	TUOUT	Procedures for responding to vomiting and diarrheal events				19	IN OUT WA		Proper reheating proc	cedures for hot holding	\perp	
		Good Hygiene Practices				20	IN OUT WA		Proper cooling time ar		\perp	\perp
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use	+-	-	-	21	IN OUT N/A		Proper hot holding ten	· · · · · · · · · · · · · · · · · · ·	+	+
7	IN OUT (IO)	No discharge from eyes, nose, mouth		<u> </u>	-	22	A'N TUO'ND		Proper cold holding te	·	+	+
	LWOUT (NO)	Preventing Contamination by Hands			-	23	UN OUT N/A		Proper date marking a		_	+
8	IN OUT WAND	Hands clean & properly washed	+-	-	-	24	IN OUT N/A	NO	L	Ith Control: procedures and record	5	
9	IN OUT NA NO	No bare hand contact with RTE food	+-	\vdash	{ i	0.5	W 01 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Consumer			
10	INSOI	Approved Source			-	25	IN OUT N/A			rovided for raw/undercooked food	3	Щ.
11	CINOUT	Food obtained from an approved source	Ţ.	T	1	26	IN OUT N/A	5	Highly Susceptib	ed; prohibited foods not offered		
12	IN OUT N/A NO	Food received at proper temperature	+		1	20	IN OUT ON	Foo		and Toxic Substances		
13	UN OUT	Food in good condition, safe & unadulterated	+		1	27	IN OUT N/A		Food additives; approv			
14	IN OUT WANO	Req. records available: shell stock tags, parasite destruction	+		1 1	28	IN OUT (N/A)	_		perly identified, stored and used	+	+
			nost						onformance with A			
	Prevalent cont	re improper practices or procedures identified as the n tributing factors of foodborne illness or injury. Public Ho are control measures to prevent foodborne illness or in	ealth			19	IN OUT NA	T		nce/specialized process/HACCP		7
	THE TOTAL OF E								Compliance with variar	ncerspecialized process/TACCF		_
			OOD R					- la -				
Mar	k "X" in box if num	Good retail practices are preventative measures bered item is not in compliance Mark "X" on ag							=corrected on-site du		t violatio	on
						•						
Jomi	oliance Status	Safe Food and Water	cos	R		Comp	liance Status	5	Donner II.e.	-CT/	cos	R
30	Pasteurized	eggs used where required	\top			43	In-usa	ritansi	Proper Use of its property stored	of Ciensus		\top
31	 	from approved source	+			44				ly stored, dried, & handled	-	+
32		tained for specialized processing methods	 			45			ingle-service articles: pro	·	+-	+
		Food Temperature Control			-	46			properly	opony otorce a acce	-	+
33	Proper cooli	ng methods used: adequate equipment for temp. control		\Box	ŀ		1 -1 -1 -1 -1		Utensils, Equipme	ent and Vending	-	-
34	 	roperly cooked for hot holding	 	\vdash	ŀ	47 ·	Food a	nd noi	n-food contact surfaces		\top	\top
35	 	awing methods used			ŀ	48			igned, constructed, & us		+	+
36		ers provided and accurate			ŀ	49			g: installed, maintained,		+	+
		Food Identification			ľ				Physical F			-
37	Food proper	ly labeled: original container			Ī	50	Hot & c	old wa	ater available adequate p	pressure	T	\top
		Prevention of Food Contamination	-		ľ	51	Plumbi	ng inst	talled, proper backflow d	devices		\top
38	Insects, rode	ints, & animals not present				52	Sewage	8. wa	aste water properly dispo	osed		_
39	Contamination	on prevented during food preparation, storage & display			ı	53	Toilet fa	cilitie	s properly constructed, s	supplied, & cleaned		
40	Personal cle	anliness				54	Garbag	e & re	fuse properly disposed,	facilities maintained	1	T
41	Wiping cloths	s: properly used & stored				55	Physica	l facili	ities installed, maintained	d, & clean		
42	Washing frui	ts & vegetables				56	Adequa	te ver	ntilation & lighting, design	nated areas used		
_	1.0						<u>.</u>					
1 yp	e of Operation:	vending machines								License Posted:	4	N
	cussion with Per									Follow-Up:	Y (N
			, ,							Follow-Up Date:		
Cin-	ature of Barrer	in Charge: And E Kryfkon								·		
oigi	iature of Ferson	in charge.								Date: 5-19-20		
Sigr	nature of Inspect	for; ('u) Cl								Date: 8-19-20	<u>Q</u>	
		6 6										



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



Esta	ablishmer	nt: Anneosar B	osch - vending	4	Date: g	-19-2020	Page 7	of <u>2</u>
Add	ress: 2	ZI D.W. High	way.	J	Complia	nce Achieved: 13-19	~2020	
				TEMPERATURE OBSERVA	TIONS			
		Item / Location	Temp.	Item / Location	Temp.	Item / Location		Temp.
								-
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			OBSI	ERVATIONS AND/OR CORRECT	IVE ACTIONS			
V	Item Number	Section of Code		Description of V	/iolation			Corrected COS
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\rightarrow								
			to a tarolo	402-00 I di		- c1300		
			50 000	ations observed di	ring the ins	PECTION.		
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		erson in Charge:	hall The	Menh		Date: 6-	17-20	
igna	ture of Ins	spector:				Date: 8-14	1 - 2020	



HEALTH DIVISION

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



Est	ablishment: د	arlies Homestyle Diner		Date:8	718/20	Pag	e 1 of <u>2</u>	No. of Risk Factor/Intervention Violati	ions 1
Adı	dress: 600 C	. w Highovay		Time in	1030	Tim	e out:(2:15	No. of Repeat Risk Factor/Intervention Violati	ions Ø
Ow	ner/Permit Hold	er beorge Kokkinos		Risk Ca			- 71 2	Total Violati	ions 1
		tome sacomcast. next					693	Inspection Status: Green Yellow Re	
	pection Type:		peratio				vestigation	Complaint Other	
7.10		FOODBORNE ILLNESS R							
		Circle designated compliance status (IN, OUT,				222		in appropriate box for COS and/or R	
		IN = in compliance OUT= not in compliance NO		'		appli			
Com	pliance Status	Supervision	CO	S R	Com	plian	ce Status		COS R
-	(NO)	Person in charge present, demonstrates knowledge and						Protection from Contamination	
L'	Nout	performs duties	_	\dashv	15	=	DUT N/A NO	Food separated and protected	
2	IN OUT N/A	Certified Food Protection Manager			16	_	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	(IN) DUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Fine / Temperature Control for Safety	
4	D DUT	Proper use of restriction and exclusion			18	IN	OUT N/A NO	Proper cooking time and temperature	
5	(NØUT	Procedures for responding to vomiting and diarrheal event	S		19	IN:	OUT N/A	Proper reheating procedures for hot holding	
		Good Hygiene Practices			20	IN	OUT N/N TUO	Proper cooling time and temperatures	-
6	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use			21	IN+	OUT N/A NO	Proper hot holding temperatures	
7	IN OUT NO	No discharge from eyes, nose, mouth			22	(IN)	PUT N/A NO	Proper cold holding temperatures	
		Preventing Contamination by Hands			23	IN	DUT N/A NO	Proper date marking and disposition	
8 1	IN OUT NO	Hands clean & properly washed			24	IN 0	OUT N/A NO	Time as a Public Health Control: procedures and records	
9	IN OUT WA NO	No bare hand contact with RTE food	>		1			Consumer Advisory	
10	TUOUT	Adequate handwashing sinks properly supplied & accessible	e /		25	INC	DUT(N/A)	Consumer advisory provided for raw/undercooked foods	
		Approved Source						Highly Susceptible Populations	
11	INOUT	Food obtained from an approved source		\perp	26	IN C	DUT N/A	Pasteurized foods used; prohibited foods not offered	
12	IN OUT N/A(NO)	Food received at proper temperature		\perp				d / Color Additives and Toxic Substances	=
13	IN OUT	Food in good condition, safe & unadulterated		-	27	-	DUT (TA	Food additives: approved and properly used	
14	IN OUT N/A NO	Req. records available: shell stock tags, parasite destruction			28		DUT N/A	Toxic substances properly identified, stored and used	
	Risk factors a	re improper practices or procedures identified as the	mont					reformance with Assessment Percentures	
	Prevalent con	ributing factors of foodborne illness or injury. Public	-lealth					nformance with Approved Procedures	
	Prevalent con Interventions	re improper practices or procedures identified as the ributing factors of foodborne illness or injury. Public are control measures to prevent foodborne illness or	Health injury,		19	IN C	DUT (N/A)	Compliance with variance/specialized process/HACCP	
	Prevalent con Interventions			RETAIL			DUT(N/A)		
Man		Good retail practices are preventative measur	GOOD es to con	trol the add	PRACT	TCES athoge	DUT(N/A)	Compliance with variance/specialized process/HACCP	
Mar			GOOD es to con	trol the add	PRACT	TCES athoge	DUT(N/A)	Compliance with variance/specialized process/HACCP	lation
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



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Ad	dress: 60	0 p.w 8	AMEN Hi	gn usc	ميلاه		Compliar	nce Achieved:		
					Q	TEMPERATURE OBSERVATIONS				
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	1 6				OBS	ERVATIONS AND/OR CORRECTIVE A	CTIONS		1	
V	Number	Section of Code				Description of Violation	on			Corrected COS
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HEALTH DIVISION 432 Daniel Wehster Highway Merrimack NH, 03054 (603) 420-1730



Est	tablishment: G	urnams Catering		Date:	-14-	202	Page 1 of 2.	No. of R	Risk Factor/Intervention Vid	olations	Ø
Ad	dress: 326 1	D.W Highway	nto:	:00	Time out: 1015	No. of Repeat R	isk Factor/Intervention Vic	lations	00		
Ov	ner/Permit Hole	der. Gumam Virk		Risk C	ateg	зогу:	C.		Total Vic	olations	1
		mujrkoz @ gmail-com					- 5 468	Inspection Status	s: (Green) Yellow	Red	
	pection Type:	(Routine) Re-inspection Pre-ope					ss Investigation	Complaint			
		FOODBORNE ILLNESS RISI									
		Circle designated compliance status (IN, OUT, N						in appropriate box for	or COS and/or R		
		IN = in compliance OUT= not in compliance NO =	not of	oserved	N/A:	= not	applicable COS =	corrected on-site R	= repeat violation		
Corr	pliance Status		cos	S R	1 1	Comi	pliance Status			cos	F
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3	INDUT	knowledge, responsibilities and reporting	+		-			Tone / Temperatur			
5	(IN DUT	Proper use of restriction and exclusion	-		-	18	IN OUT N/A	Proper cooking time			+
	CINDOI	Procedures for responding to vomiting and diarrheal events	4		-	19	IN OUT N/A NO		cedures for hot holding	+-	+-
6	IN OUT (NO	Froper eating, tasting, drinking, or tobacco use	T			21	IN OUT N/A(NO	Proper cooling time a Proper hot holding te		+-	+
7	IN OUT (NO	No discharge from eyes, nose, mouth	+		-	22	LIN OUT N/A NO	Proper cold holding to		+	+
		Preventing Contamination by Hands	4		l H	23	IN OUT N/A NO	Proper date marking	· · · · · · · · · · · · · · · · · · ·		
8	IN OUT NO	Hands clean & properly washed	T			24	IN OUT WADO		ith Control: procedures and record	s	\top
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 OUT NA	Consumer advisory p	rovided for raw/undercooked foods		
		Approved Source						Highly Suscepti	ble Populations		-
11	Сивоит	Food obtained from an approved source	ļ	_		26	IN OUT N/A		ed; prohibited foods not offered		
12	IN OUT N/A NO	Food received at proper temperature			-				and Toxic Substances		
13	IN OUT N/ANO	Food in good condition, safe & unadulterated Reg. records available: shell stock tags, parasite destruction	\vdash		- 1-	27	IN OUT N/A		ved and properly used	+-	\vdash
14					H	20			perly identified, stored and used		<u></u>
	Prevalent cor Interventions	are 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	ost aith ury.		-	19	IN OUT (NA		nce/specialized process/HACCP	Т	
		G	OOD	RETAI	L PR	ACT	ICES				-
		Good retail practices are preventative measures	to con	trol the ac	dition	of pa	thogens, chemicals,	and physical objects int	o foods.		
Mai	rk "X" in box if nur	nbered Item is not in compliance Mark "X" on ap	propri	ate box	for C	OS a	nd/or COS	=corrected on-site d	uring inspection R=repea	t violation	1
Com	pliance Status		cos	R	C	omp	liance Status		·-	cos	R
		Safe Food and Water				: ,		Proper Use	of Utensils		
30		d eggs used where required	<u> </u>		-	43		ils properly stored			
31		s from approved source	<u> </u>		-	44			rly stored, dried, & handled		
32	Variance o	otained for specialized processing methods		\perp	\vdash	45		ingle-service articles: pr	operly stored & used		
33	Proper coo	Food Temperature Control ling methods used: adequate equipment for temp. control			F	46	Gloves used	Utensils, Equipme	ent and Vending		
34		properly cooked for hot holding		+		47 .	Food and no	n-food contact surfaces			
35		nawing methods used		+	\vdash	48	_	igned, constructed, & us		_	Н
36	Thermome	ers provided and accurate			4	49	Warewashin	g: installed, maintained,	& used: test strips		
		Food Identification						Physical I	acilities		
37	Food prope	rly labeled: original container	L			50	Hot & cold w	ater available adequate	pressure		
	1 1	Prevention of Food Contamination			-	51		talled, proper backflow			Щ
38	 	ents, & animals not present		4	-	52		aste water properly disp		+	\vdash
39		ion prevented during food preparation, storage & display		+	\vdash	53		es properly constructed,			-
40	Personal d	ns: properly used & stored		-	-	54		efuse properly disposed lities installed, maintains			
42		its & vegetables		1	_	56		ntilation & lighting, desig		+	
				.1	- 7		J.				
Тур	e of Operation:	catering				_			License Posted:	(Y)	N
Dis	cussion with Pe	rson-in-Charge:							Follow-Up:	Y	N
									Follow-Up Date:		
٥.		10101/								15	\dashv
Sigr	nature of Person	tor:							Date: 8 [[4] .	20	
Sign	nature of Inspec	tor: A la Talanta							Date: Q - (A - 20	20	- 1



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



Address: 326 D.W. Highway TEMPERATURE OBSERVATIONS Tomp. Item / Leastins Tomp. Item / Le	Esta	ablishme	nt: 60r nams	Caterina	1			Date: 8-	14-2020	Page _2_ of _2
TEMPERATURE RESERVATIONS Item Leastinn Temp. Item T	Add	ress: 3	26 D.W. Hid	hoay				Complian	ice Achieved:	•
ORSERVATIONS AND/OR CORRECTIVE ACTIONS Description of Violentian Description of Violentian Description of Violentian C 5 6 6-5 8 114 Ignat hood cleaning uses Comprehed 7/2018, comact hood Rampony for Scrive.				- 4						
V Number Section of Code Description of Violation Destroy Competent 7/2018, connect nood Sampany For Service			Item / Location		Temp.	Item / Lo	eation	Temp.	· Item / Locution	Temp.
V Number Section of Code Description of Violation Destriction of Code										
V Number Section of Code Description of Violation Destriction of Code										
V Number Section of Code Description of Violation Destriction of Code										
V Number Section of Code Description of Violation Destroy Competent 7/2018, connect nood Sampany For Service				-						
Number Section of Gode Literies Literies		-			OBS	ERVATIONS AND/O	R CORRECTIVE	ACTIONS		
Elteren C 56 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 56 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-501.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-601.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-601.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-601.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-601.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-601.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-601.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-601.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-601.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-601.14 last hood cleaning was completed 7/2018, comact hood company for service C 50 6-601.14 last hood cleaning was completed 7/2018, comact hood cleaning was completed 7/2018.14 last hood cleaning was completed 7/2018.14 last hood cleaning was completed 7/2018.14 las	V		Section of Code			I	Description of Viola	iion		Dated Corrected or COS
C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact hand cleaning was company for service C 56 c-Sol.14 last hand cleaning was completed 7/2018, comact ha				Kitchen'				-	-	
Signature of Person in Charges: Grant VIRIK—Date: 3 / 19/1/2 20	۲.	ie to				ma >	romounte d	7/1018 4	andert hood	
Signature of Person in Charge: Gwl VICIC Date: 3/15/20		20	6-301-14	Last no	<u> </u>	anting was	Sinple a	11501010	JITIZECT TO OCT	
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	Signa	ature of P	erson in Charge:	quel	VIRA	<u> </u>			Date: 9 / 1	1/20
Signature of Inspector: Date: 8-14-2020	Sign	ature of I	nspector:	17:1	In				Date: g-(4-2020

5D-3/125

Ø DATE 8-13-2020



Establishment/License # Dw Highway Hobile

HEALTH DIVISION

432 Daniel Webster Highway
Merrimack New Hampshire 03054
603-420-1730 • Fax 603-424-0603
FOOD ESTABLISHMENT INSPECTION REPORT

No. of Risk Factor/Intervention Violations

Establishment	4	1	lo. of	Repea	t Ris	k F	actor/Interve	ention Violations		ne in: إ				
Address:462	/	Total violations						ne out	: [12-16	7 0_				
Permit Holder	Nest	ACOCK.				Risk	Cate	gor	v	Capacity	Telepho	ne #4	74 -	<72/7
Inspection Type	ne	Provisional	Routine		☐ F				Complaint	Other	1.0.00	10 11 - 6	207	<u> </u>
mopodion . ji			FOODBORNE ILLN	ESS										
C	ircle design	ated compliance s	status (IN, OUT, N/A) for e	ach ite	m				Mark "X" in appropriat	e box for COS a	nd/or R		
		=in compliance C	OUT=not in complian							S≃corrected on-site R=re	peat violation			1
Compliance state	IS		1	COS) R	V		Com	pliance status				DS R	V
	I Davisa is	Supervís charge present, o		T		T	-	16 0	ON AWATUO N	ntially Hazardous Fo		eratur	3	P/Pf/C
1/IN PUT		i charge present, d <u>ie and performs</u> di		1		Pf			ON COT LOD NO	Proper cooking time & te Proper reheating proced		-	+	P
	KIIOWICUE	Employee h			-				ON AN TUO V	Proper cooling time & ter		\rightarrow	+	P
·200	Managen	nent, ali employee		T	T	D/D/			OUT MONO	Proper hot holding tempor	,	-+		P
2NOUT		pilities and reportin				P/Pf	1 2	20C II	LØUT N/A	Proper cold holding temp			\top	P
3 IN DOUT		se of restriction an				P	. 6	2 (1)	OUT N/A NO	Proper date marking and	disposition			P/Pf
-		iood Hygienic	Practices				1 2	22 11	ONAN TUO	Time as a public health of	control:			P/Pf/C
4 IN OUT QUE		ting, tasting, drink				P/C				procedures and records				1
5 OUT		arge from eyes, no				С				Consumer A	CO			.,
			ation by Hands							ided for raw or			Pf	
6 IN OUT (NO	priands cle	an and properly w	ashed	-		P/Pf				undercooked foods	. Damilations			
7 IN OUT N/A NO	No bare n	and contact with F	i i E 1000 or a pre- ure properly allowed			P/Pf				Highly Susceptible Pasteurized foods used;				T
			are properly anowed	+			2	24 IN	NOUTAVA	not offered	brossosses topas		ŀ	P
8(NOUT	and acces	_	a property aupplied			Pf/C				Chemic	al			-
	Approved Source						12	25 IN	OUT MA	Food additives: approved	700	, 1	1	P/Pf/C
9 IN OUT	Food obta				P/Pf/C	-		DOUT	Toxic substances proper			+		
10 IN OUT N/AQUO	IN OUT N/AQUO Food received at proper temperature					P/Pf	2	:6 CUL	POUT	& used	.,	, ,		P/Pf/C
11 OFOUT	Food in good condition, safe, & unadul					P/Pf			Cg	informance with App	roved Proced	ures		
12 IN OUT NANO	IN OUTTAKE Required records available: shellstock					P/Pf/C	2	7 IN	OUT (TA)	Compliance with variance	e, specialized			P/Pf
12 IN CONTENTO	parasite de			<u> </u>		1711/0		Z JE	100100	Process, & HACCP plan				6711
		ection from Co						_						
13C IN OUT N/A 14CIN OUT N/A		arated & protected				P/C				re improper practices or p				
		tact surfaces: cleas			\vdash	P/Pf/C				ributing factors of foodbor are control measures to pr				
15 IN OUT WAD		sposition of returns econditioned, & un				Р		-	interventions a	ire control measures to pr	event toopporne	iliness t	ar angury	•
	001100, 10	oonanana, a an	ISUIS ISSU	1	G	ood Reta	if Pre	etic	ės	.,				
	Goo	d retail practices a	are preventative mea	sures	to cor	trol the a	dditio	n of	pathogens, che	micals, and physical object	cts into foods.			
Mark "X" in box		d item is not in co	mpliance Mark "	С" ол	approp	riate box	for C	OS a		S = corrected on-site during		R = repe		
				cos	R	V						CO	S R	V
al Is. i i		Sale Food and	i water					4 11		Proper Use of	Utensiis			
Pasteurized e Water & Ice Ir					\vdash	P/Pf/C	4			s properly stored ment & linens: properly store	ad dried 9 handl	ad -		C
		ecialized processir	n methods			PF	4:			gle-service articles: prope			+-	P/C
O VENEZIOS ODE		od Temperatur					4		Gloves used p		ary stored & uset		+-	C
Proper cooling		ised: adequate ec			T		-		T CHIEF CO GOOG P	Utensils, Equipment	and Vending			
temperature c			1-1			Pf/C		<u>, </u>	Food and non-	food contact surfaces cle		- 1	Τ	D/DIG
		ed for hot holding				Pf	4	5		ned, constructed, & used		\neg		P/Pf/C
3 Approved that	wing metho	ds used				С	40			installed, maintained, & u	ised: test strips			Pf/C
Thermometers	s provided a					Pf/C	4	7	Non-food cont	act surfaces clean	24676			С
		Food Identific	ation							Physical Fac				
5 Food properly		riginal container			L	Pf/C	48	\rightarrow		er available adequate pre		\perp	\perp	Pf
		tion of Food C	ontamination		,		49	_		illed, proper backflow dev		\perp		P/Pf/C
		ls not present	an atomic of the little			Pf/C	50			ste water properly dispose			+	P/Pf/C
					\vdash	P/Pf/C Pf/C	5	$\overline{}$		properly constructed, sup use properly disposed, fac			+	Pf/C C
Personal cleanliness Wiping cloths: properly used & stored Washing fruits & vegetables					\rightarrow	C	52			ies installed, maintained, i		-	+	P/Pf/C
Washing fruits & vegetables						-	54			ilation & lighting, designat		$\overline{}$	+	C
V V COLLING II CILC	a rogotab						10	•	7 Idoquato Torre	indicate of right and right and right design date	00 01000			
											~			
Person in Charge (signature)								Date:	<i>ຊ / ເ ຊ / ຊ ບ</i> Licens	se Posted (Y) N (circle o	ne)	
									71.77					
Inspector (signature)								F	ollow up: Y	'ES(NO circle one) F	ollow up Date):		



HEALTH DIVISION

432 Daniel Webster Highway Merrimack New Hampshire 03054 603-420-1730

FOOD ESTABLISHMENT INSPECTION REPORT

HLTH-FRM-005

Est. # Establishment	name: D. い	Highway Mobile		Date: 8-13-2020	5
		Highway Mobile	VATIONS		
item/Location	Temp.	Item/Location	Temp.	Item/Location	Temp.
cooked chicken/Hat dist	135		<u> </u>		
				·	
	OBCED	VATIONS AND CORREC	TIVE ACTIONS		
Item #	(77.514).	VAIROABAND CORCUSE	ANDACTIONS		
No o	iolations	opserved during.	the inspection	<u> </u>	
				<u> </u>	
			<u> </u>		
·		<u> </u>			
				<u> </u>	
Process.		1			
Person in charge: (signature)	211	Cha			3-20
Inspector	(<u>(/e</u>			Date 8-1	3-2020



HEALTH DIVISION

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



Est	ablishment: A	titude trampoline park		Date:	-12-702	Page 1 of 2.	No. of Risk Factor/Intervention Viola	ations	Ø
		D W Highway		Time ir	1:11:00	Time out:\\:30	No. of Repeat Risk Factor/Intervention Viola	ations	Ø
		der: Mitude Trampoline Park			ategory:		Total Viola		Ø
		altitudemerrimack.com		Phone:	(603 \	26に36ける		Red	
	pection Type:		peration			ss Investigation			
	padiidi. 13pd.	FOODBORNE ILLNESS RIS	_					_	
		Circle designated compliance status (IN, OUT, I					in appropriate box for COS and/or R		
_		IN = in compliance OUT= not in compliance NO =							
-	- Unnes Ctatus						- Topour Holland		
Com	pliance Status	Supervision	cos	R	Com	pliance Status	Protection from Contamination	cos	R
1	LINOUT	Person in charge present, demonstrates knowledge and			15	IN OUT N/A NO	Food separated and protected	T	T
2	IN OUT (A)	performs duties	-						\perp
	IN OUT MA	Certified Food Protection Manager			16	AN TUCKEL	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,	+	+
		Employee Health			17	IN OUT NAMO	reconditioned & unsafe food		
3	IN OUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting					Time / Temperature Control for Safety		
4	N DUT	Proper use of restriction and exclusion			18	IN OUT N/A NO	Proper cooking time and temperature		
5	INOUT	Procedures for responding to vomiting and diarrheal events			19	IN OUT N/A	Proper reheating procedures for hot holding		
		Good Hygiene Practices			20	IN OUT N/A NO	Proper cooling time and temperatures		
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use			21	IN OUT N/A NO	Proper hot holding temperatures		
7	IN OUT NO	No discharge from eyes, nose, mouth	<u> </u>		22	IN DUT N/A NO	Proper cold holding temperatures		
		Preventing Contamination by Hands			23	IN DUT N/A NO	Proper date marking and disposition		Ш
8	IN OUT (NO	Hands clean & properly washed			24	IN OUT NO NO	Time as a Public Health Control: procedures and records		
9	IN OUT N/A NO	No bare hand contact with RTE food		\perp			Consumer Advisory	,	
10	D OUT	Adequate handwashing sinks properly supplied & accessible			25	IN OUT (IA)	Consumer advisory provided for raw/undercooked foods		
4.4	(EDOLLE	Approved Source					Highly Susceptible Populations		
11	NOUT	Food obtained from an approved source	+	+	26	IN OUT I	Pasteurized foods used; prohibited foods not offered		
12	IN OUT N/A (O)	Food received at proper temperature	-				od / Color Additives and Toxic Substances		
13	IN OUT NIA NO	Food in good condition, safe & unadulterated	+	+	27	IN OUT (/A	Food additives: approved and properly used		
14		Req. records available: shell stock tags, parasite destruction		\dashv	28		Toxic substances properly identified, stored and used		-
	Prevalent con Interventions	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 in	nost ealth iurv.	ĺ	19	IN OUT NA	onformance with Approved Procedures Compliance with variance/specialized process/HACCP		$\overline{}$
				RÉTAIR	PRACT				
		Good retail practices are preventative measure					and physical chiects into foods		
Mar	k "X" in box if nu	nbered item is not in compliance Mark "X" on a					=corrected on-site during inspection R=repeat vi	iolation	
:omr	oliance Status		cos	R	Comm	liance Status		coe I	B
ZOIIII	marioc otatos	Safe Food and Water	003	I K	Comp	mance status	Proper Use of Utensils	cos	R
30	Pasteurize	d eggs used where required	T	\Box	43	In-use utens	ils properly stored		
31	Water & Ic	from approved source			44	Utensils, equ	uipment & linens: properly stored, dried, & handled		\neg
32	Variance o	otained for specialized processing methods			45	Single-use/s	ingle-service articles: properly stored & used	\neg	\neg
		Food Temperature Control			46	Gloves used	properly	\neg	\neg
33	Proper coo	ling methods used: adequate equipment for temp. control					Utensils, Equipment and Vending		
34	Plant food	properly cooked for hot holding			47	Food and no	n-food contact surfaces cleanable,		
35	Approved t	nawing methods used			48	Properly des	igned, constructed, & used		
36	Thermome	ers provided and accurate		Щ	49	Warewashing	g: installed, maintained, & used: test strips		_
		Food Identification			ļ.,	Т	Physical Facilities		
37	Food prope	rly labeled: original container		Щ	50		ater available adequate pressure		_
20	l terrete en	Prevention of Food Contamination			51		talled, proper backflow devices	\rightarrow	_
38		ents, & animals not present			52		aste water properly disposed	\rightarrow	\dashv
39		ion prevented during food preparation, storage & display		\vdash	53		s properly constructed, supplied, & cleaned		
40	Personal d				54		afuse properly disposed, facilities maintained	-+	\dashv
42		is: properly used & stored its & vegetables		\vdash	55		ities installed, maintained, & dean ntilation & lighting, designated areas used	-+	\dashv
	- realing It		1		1 20	I wadnate yet	manuari w lighting, designated dieds 1990		
Тур	e of Operation:						License Posted:	Y) N	
Disc	cussion with Pe	rson-in-Charge:					Follow-Up:	Y (N	
							Follow-Up Date:		
Qia-	ature of Power	n in Charge: The Charge:	2				Date: 7-12-2020	,	-
Sign	atule of FeISO	THI CHAIGE.							
Sign	ature of Inspec	tor: Calla					Date: 0 17 - 7025		- 1



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



Es	tablishmer	it: Altitude -	trampoli	ne. Par	TK.	Date:	8-12-2020	Page 2	of 2		
Ad	ldress: 36	OD.W High	Pow		Compliance Achieved: 8 - (2 - 2020						
					TEMPERATURE OBSERVATIONS						
		Item / Location		Temp.	Item / Location	Тепир.	Item / Locatio	п	Temp.		
	-										
	*										
					OBSERVATIONS AND/OR CORRECTIVE ACT	IONS					
٧	Item Number	Section of Code			Description of Violation				d Corrected or COS		
									11111		
						- -					
							<u>. </u>				
			NO VI	olatic	ins observed during the	inspect	ich				
											
-							-				
-											
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\exists											
Sian	ature of Pa	erson in Charge: /	1/1/1	1 1			Date: Q /	12-2000			
			W. B	2	70						
Sigr	nature of In	spector:	~ >-				Date: 8-	12 - 2020	<u> </u>		



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



Est	عل ablishment:	a's Tippy Toes Dayrare		Date 8 /	41202	@age 1 of <u>2</u>	No. of Risk Factor/Intervention Violati	ons 🗭
Ade	ress:33 Pa	boosic Lave Pood	-	Time in	:17:15	Time out: 12:30	No. of Repeat Risk Factor/Intervention Violati	ons Ø
Ow	ner/Permit Hold	ler. List, worster	1	Risk Ca	ategory:	G	Total Violati	ons Ø
		ppyToes@Apl.com	ı	Phone:			Inspection Status: Yellow Red	
	pection Type:		eration		Illnes	ss Investigation	Complaint Other	
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FOODBORNE ILLNESS RIS						
		Circle designated compliance status (IN, OUT, I					in appropriate box for COS and/or R	
		IN = in compliance OUT= not in compliance NO =						
C 0	pliance Status							200 5
COM	phance Status	Supervision	cos	R	Gom	pliance Status	Protection from Contamination	COS R
1	INDUT	Person in charge present, demonstrates knowledge and	T		15	INOUT N/A NO	Food separated and protected	
2	IN DUT N/A	Performs duties Certified Food Protection Manager	+-	+-	16	IN OUT N/A	Food-contact surfaces cleaned and sanitized	
		Employee Health			17	IN OUT NO NO	Proper disposition or returned, previously served,	
2	(IN DUT	Management/food employees & conditional employee;	-		· ·		reconditioned & unsafe food	
3		knowledge, responsibilities and reporting	-				Time / Temperature Control for Safety	
5	TUO(NI)	Proper use of restriction and exclusion Procedures for responding to vomiting and diarrheal events		+	18	IN OUT N/A(NO)	Proper cooking time and temperature	
ų.	CINCOI	Good Hygicae Practices			20	IN OUT N/A NO	Proper reheating procedures for hot holding Proper cooling time and temperatures	
6	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use			21	IN OUT N/A	Proper hot holding temperatures	
7	IN OUT (10)	No discharge from eyes, nose, mouth	1	†	22	IN OUT N/A NO	Proper cold holding temperatures	-
		Preventing Contamination by Hands			23	IN OUT 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	INDUT	Adequate handwashing sinks properly supplied & accessible			25	IN OUT WA	Consumer advisory provided for raw/undercooked foods	
44.1	TINGIA	Approved Source	T			STOLET W.	Highly Susceptible Populations	
11 1	IN OUT N/ANO	Food obtained from an approved source Food received at proper temperature	-	+	26	IN OUT N/A	Pasteurized foods used; prohibited foods not offered d / Color Additives and Toxic Substances	
13	IN DUT	Food in good condition, safe & unadulterated	_	+	27	IN OUT (IA)	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	
			nost				onformance with Approved Procedures	
	Prevalent cont Interventions a	re improper practices or procedures identified as the r tributing factors of foodbome illness or injury, Public H are control measures to prevent foodborne illness or ir	ealth		19	IN OUT (VA)	Compliance with variance/specialized process/HACCP	
_				ET A II	PRACT			
		Good retail practices are preventative measure					and physical objects into foods.	
Маг	k "X" in box if num	bered item is not in compliance Mark "X" on a					corrected on-site during inspection R=repeat viol	ation
omi	liance Status		cos	R	Comp	liance Status	C	OS R
		Safe Food and Water					Proper Use of Utensils	
30	Pasteurized	eggs used where required			43	In-use utens	ils properly stored	
31		from approved source	-		44		ipment & linens: properly stored, dried, & handled	
32	Variance ob	tained for specialized processing methods			45		ingle-service articles: properly stored & used	
33	Drange and	Food Temperature Control			46	Gloves used		
34		ng methods used: adequate equipment for temp. control roperly cooked for hot holding		-	47 .	Food and no	Utensils, Equipment and Vending	
35		awing methods used		\vdash	48		igned, constructed, & used	
36		ers provided and accurate			49		g: installed, maintained, & used: test strips	_
		Food Identification			- '		Physical Facilities	
37	Food proper	ty labeled: original container			50	Hot & cold w	ater available adequate pressure	
		Prevention of Food Contamination			51	Plumbing ins	talled, proper backflow devices	
38		ents, & animals not present			52	Sewage & wa	aste water properly disposed	
39		on prevented during food preparation, storage & display			53		s properly constructed, supplied, & cleaned	
40	Personal de		<u> </u>		54		fuse properly disposed, facilities maintained	-
41 42		s: properly used & stored			55 56	-	ities installed, maintained, & clean	-
42	vvasting irui	is a Aederanies			36	Adequate ver	ntilation & lighting, designated areas used	
Тур	e of Operation:	Daycare					License Posted:	N
	ussion with Per						Follow-Up: Y	(N)
	-						Follow-Up Date:	
		19,0					8 3 2 -	
Sian			1.7	r			Data: $\Delta = I = V(1)$	
	ature of Person	(1) (N'Y) C	tw				Date. U C O C	
	ature of Person ature of Inspect	(1) (N'Y) C	17	,			Date: 8-11- 2010	



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



عزر: stablishment:	u's Tippy Toe	es Daycou	<u>e</u>		Date: B-4-2520	Page	2_ of _2_
Address: 33 Bal	boosic Lake	Road			Compliance Achieved:	8-17-201	70
			TEMPERATURE O				
Item /	Location	Temp.	Item / Location	on 1	emp. Item	Location	Ten
		ļ					
		OBSE	ERVATIONS AND/OR O	ORRECTIVE ACTION	S		
Item Section	n of Code					T	Dated Correct
Number Section	in or code		Desc	ription of Violation			or COS
	Ì			-			
+							
							
	L)O	<u>oltaloiu</u>	ns abserved	doring the	inspection		
				7			
			-				
 							
			<u> </u>				
	- 						
					·		
		. ,					
		- ()	10.147		P 4	Q1-1-	20 10
nature of Person in		MALL	100011		Date		202)
nature of Inspector	· / WY		~		Date	8-4-10	7)



HEALTH DIVISION

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



Est	ablish	ment: 3	Ubble Bee Milk Tea		Date	:8.3	122	Page	e 1 of <u>2</u>	No. of R	isk Factor/Int	ervention Viola	itions	K
			emium outles alud + 694		Time	in:(1,00	Time	out! 1:30	No. of Repeat R	isk Factor/Int	ervention Viola	itions	Ø5
			er: Easy kitchen inc.		Risk	Cate	egory:	D	-			Total Viola	tions	85
Em					Phor	ne:				Inspection Status	: (Aprile)	Yellow R	led	
Ins	pectio	n Type;	Routine Re-inspection Pre-op	eratio	nal		Illnes	ss Inv	estigation	Complaint	Othe	er		
			FOODBORNE ILLNESS RIS			SAN							-	
			Circle designated compliance status (IN, OUT, N	I/A, NC) for (each	item		Mark "X"	in appropriate box for	or COS and/or I	R		
			IN = in compliance OUT= not in compliance NO =	not ob	serve	d N //	\ = not	applic	cable COS =	corrected on-site R	= repeat violati	on		
Com	pliano	e Status	MANAGEMENT OF THE STATE OF THE	COS	S R		Com	pliano	e Status				cos	R
			Supervision							Protection from	Contaminatio	n		
1	INX	TUC	Person in charge present, demonstrates knowledge and performs duties				15	IN	UT N/A NO	Food separated and	protected		1	
2	(IN)	DUT N/A	Certified Food Protection Manager				16	(IN)	DUT N/A	Food-contact surface	s cleaned and sa	nitized		
			Employee Health				17	INC	OUT WATO	Proper disposition or reconditioned & unsa		sly served,		T
3	(IN)C	UT	Management/food employees & conditional employee; knowledge, responsibilities and reporting		T					Time / Temperatur		afety		
4			Proper use of restriction and exclusion		+	7	18	INC	OUT N/A(NO)	Proper cooking time :			T	Т
5	(IN a	UT	Procedures for responding to vomiting and diarrheal events	-	\top	-	19		ON AW TUC	Proper reheating pro		Iding	1	+
			Good Hygiene Practices				20	IN C	OKAWTUC	Proper cooling time a	nd temperatures			\top
6	IN C	UT (NO)	Proper eating, tasting, drinking, or tobacco use				21	INC	OUT N/A	Proper hot holding te	mperatures			
7	IN C	UT (NO	No discharge from eyes, nose, mouth				22	[N]	UT N/A NO	Proper cold holding te	mperatures			
			Preventing Contamination by Hands			4	23	-	UT N/A NO	Proper date marking	and disposition			\perp
8	IN C		Hands dean & properly washed	-		4	24	INC	OUT N/A NO	Time as a Public Hea		dures and records	<u> </u>	
9	-	UT N/A(NO.)	No bare hand contact with RTE food	-	_	4		T	. 5.5	Consumer				_
10 ([IND	UT	Adequate handwashing sinks properly supplied & accessible Approved Source			-	25	INO	U (N/A)	Consumer advisory p				
11	Dio	UT	Food obtained from an approved source	T	1	-	26	IN C	UT(N/A)	Highly Susceptil Pasteurized foods use			Γ	
12	_	UT N/A/NO	Food received at proper temperature		+	~		1110		d / Color Additives				
13	6 AL	UT	Food in good condition, safe & unadulterated		1	1	27	_IN O	UT(N/A)	Food additives; appro-				
14	IN O	OMANTU	Req. records available: shell stock tags, parasite destruction]	28 (IN	UT N/A	Toxic substances prop	erly identified, sto	red and used		
	R	sk factors a	re improper practices or procedures identified as the n	nost		1			Ce	onformance with A	pproved Proce	dures		
	ni	erventions	re improper practices or procedures identified as the n ributing factors of foodborne illness or injury. Public Hi are control measures to prevent foodborne illness or in	eann jury.			19	IN O	UTANATU	Compliance with varia	nce/specialized pr	rocess/HACCP		
			EVI G	00D	RETA	IL P	RACT	ICES						
			Good retail practices are preventative measures											
Mar	K "X" I	n box if num	bered item is not in compliance Mark "X" on ap	ргоргі	ate bo	x for	COS a	ind/or	COS:	=corrected on-site di	uring inspection	R=repeat v	iolation	
om	lianc	e Status		cos	R		Comp	liance	e Status				COS	R
30		D-t-d-d	Safe Food and Water	1	1	-		* .		Proper Use	of Utensils			
31			eggs used where required from approved source	-	+	+	43			ils properly stored ipment & linens: proper	ly stored dried &	handed		H
32			tained for specialized processing methods		+	1 1	45			ingle-service articles: pr	-			Н
			Food Temperature Control				46		Gloves used		, , , , , , , , , , , , , , , , , , , ,			П
33		Proper cooli	ng methods used: adequate equipment for temp. control			1				Utensils, Equipme	nt and Vendin	g		
34		Plant food p	roperly cooked for hot holding] [47 ·		Food and no	n-food contact surfaces	cleanable,			
35			awing methods used		4		48		Properly desi	igned, constructed, & us	ed			
36		Thermomete	ers provided and accurate	<u> </u>		-	49		Warewashing	g: installed, maintained,		·		_
37		Food proper	Food Identification ly labeled: original container	T		1	50		Hot & cold us	Physical F ater available adequate				
31		Food proper	Prevention of Food Contamination			1	51			tailed, proper backflow				\dashv
38		Insects, rode	ents, & animals not present		T	1	52	\dashv		aste water properly disp			\rightarrow	\neg
39		Contamination	on prevented during food preparation, storage & display		\dagger	1	53			s properly constructed,		ed	\neg	
40		Personal de	anliness] [54		Garbage & re	fuse properly disposed,	facilities maintain	ed		
41	\Box	Wiping cloth	s: property used & stored				55	\Box	Physical facili	ities installed, maintaine	d, & clean			
42		Washing frui	ts & vegetables				56		Adequate ver	ntilation & lighting, desig	nated areas used			
Tvn	e of C	peration:							· · · · · · · · · · · · · · · · · · ·		License Pos	sted: (N CE	V
		*	son-in-Charge:								Follow-Up;			N)
□ 15(JIEEU	ai widi Fel	aon-m-onaige.							,		\ i	, 6	기
			1 1 1 1								Follow-Up D			
Sigr	ature	of Person	in Charge: Joy as de)							Date: 🔗 –	4-709	Ď.	
Sigr	nature	of Inspect	in Charge: July Sussider								Date: 8	9-7017		
												· LOILLY		



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



Establish	ment: Bobble Be	e HILL TOOL		Date: 8 -	4-20ZO	Page _2_ 0	of _Z
Address:	80 Dremium o	oticts BLUD #	F69 4	Complianc	e Achieved:		
	V FICHIONI O	7 (())	TEMPERATURE OBSERV				
	Item / Location	Temp.	Item / Location	Temp.	Item / Loca	Lion	Temp.
						-	
							+-
							+
							+
		OBS	ERVATIONS AND/OR CORRECT	CTIVE ACTIONS			
V Ite			Description of	of Violation			Corrected
Num	per					or	COS
		100 Olo	ations observe	ed obring the in	Kb<	•	
				-			
	-						
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i							
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						-	-
		- · · · · · · · · · · · · · · · · · · ·				2 !	
ignature	of Person in Charge: #	cyley Dofwood)		Date:	-7-2028	
Signature	of Inspector:	51/	•		Date: 9	-7-2020	
						1 206	



HEALTH DIVISION

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



Est	ablishment: B	orger King #2805		Date 3	-4-2a	Pag	ge 1 of <u>2</u>	No. of Risk Factor/Intervention Vio	ations	1
		nherst Road	1	Time in	1.45	Tim	ne out:(0)	No. of Repeat Risk Factor/Intervention Vio	ations	Ø
Ow		ler portneast Foods LLC			ategory	_		Total Vio		1
Em				Phone:		<u></u>		- Contract	Red	
Insi	pection Type:	Routine Re-inspection Pre-ope				ee In	vestigation	Complaint Other	100	
		FOODBORNE ILLNESS RIS								
		Circle designated compliance status (IN, OUT, N				27222		in appropriate box for COS and/or R		
		IN = in compliance OUT= not in compliance NO =				t appl				
Com	nlianas Status							- I STORE TO THE TOTAL OF THE T		
COIN	pliance Status	Supervision	cos	R	Соп	ıplian	nce Status	Protection from Contamination	cos	F
1	Ооит	Person in charge present, demonstrates knowledge and	1		15	IN	OUT N/A NO		T	T
2	NOUT N/A	Certified Food Protection Manager	-					Food separated and protected		+
-	TIS OUT WA				16	-	OUT N/A	Proper disposition or returned, previously served,	+-	+-
		Employee Health Management/food employees & conditional employee;			17	IN	ОИ МТИО	reconditioned & unsafe food		\perp
3	TUDUT	knowledge, responsibilities and reporting						Time / Temperature Control for Safety		
4	TUCOUT	Proper use of restriction and exclusion			18	_	OUT N/A NO	Proper cooking time and temperature		\perp
5	TUCKE	Procedures for responding to vomiting and diarrheal events		\perp	19	_	OUT N/A NO	Proper reheating procedures for hot holding		\perp
-	I I I I I I I	Good Hygiene Practices			20		OUT N/A(NO)	Proper cooling time and temperatures	\perp	丄
7	TUO NI	Proper eating, tasting, drinking, or tobacco use	-	+	21	200	OUT N/A(NO)	Proper hot holding temperatures	 	\perp
-	IN OUT (10)	No discharge from eyes, nose, mouth Preventing Contamination by Hands		4	22	_	DUT N/A NO	Proper cold holding temperatures	1	,
8	DI OUT NO	Hands clean & properly washed	T		23	-	OU SAIA NO	Proper date marking and disposition	D	+
9	IN OUT N/A NO	No bare hand contact with RTE food	-	+	24	T IN	OUT NA NO	Time as a Public Health Control: procedures and records	V	\perp
10	(IN OUT	Adequate handwashing sinks properly supplied & accessible		+	25	101.6	OUT(N/A)	Consumer Advisory Consumer advisory provided for raw/undercooked foods		_
		Approved Source			25	1 114 4	OU (NIP)	Highly Susceptible Populations		
11	IN DUT	Food obtained from an approved source		\top	26	IN	OUTN/A	Pasteurized foods used; prohibited foods not offered	T	T-
12	IN OUT N/(NO)	Food received at proper temperature		\Box				d / Color Additives and Toxic Substances	-	
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	N	DUT N/A	Toxic substances properly identified, stored and used		Т
	Risk factors a	re improper practices or procedures identified as the m	ost				Co	onformance with Approved Procedures		
	Interventions a	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	alth ury.		19	IN	OUT N/A	Compliance with variance/specialized process/HACCP		
		G	OOD R	ETAIL	PRACI	TICES	3			-
		Good retail practices are preventative measures	to contr	ol the add	fition of p	athoge	ns, chemicals, a	and physical objects into foods.		
Mari	k "X" in box if num	bered item is not in compliance Mark "X" on app	oropria	te box fo	or COS a	and/o	r COS =	corrected on-site during inspection R=repeat	/iolation	
omp	liance Status		cos	R	Comp	Hianc	e Status		cos	R
		Safe Food and Water						Proper Use of Utensils		
30	Pasteurized	eggs used where required			43		In-use utensil	ls properly stored		
31		from approved source			44			ipment & linens: properly stored, dried, & handled		
32	Variance ob	tained for specialized processing methods			45	<u> </u>		ngle-service articles: properly stored & used		
22	Denote E	Food Temperature Control			46	1	Gloves used ;			_
33		ng methods used: adequate equipment for terrip, control roperly cooked for hot holding			47		Tood and son	Utensils, Equipment and Vending		
35		awing methods used			47 ·			n-food contact surfaces cleanable, gned, constructed, & used		
36		ers provided and accurate			49			: installed, maintained, & used: test strips		
		Food Identification					1	Physical Facilities		
37	Food properl	ly labeled: original container			50		Hot & cold wa	iter available adequate pressure		\neg
		Prevention of Food Contamination			51		Plumbing insta	alled, proper backflow devices		\neg
38	Insects, rode	nts, & animals not present			52		Sewage & was	ste water properly disposed		
39	Contamination	on prevented during food preparation, storage & display			53		Toilet facilities	properly constructed, supplied, & cleaned		
40	Personal clea	anliness			54		Garbage & ref	fuse properly disposed, facilities maintained		
41		s: properly used & stored			55		Physical facilit	ties installed, maintained, & clean		
42	Washing fruit	ts & vegetables			56		Adequate vent	tilation & lighting, designated areas used		
Type	of Operation:							License Posted: (17	
		con in Charge: A								-
IJSC	ussion with Per	sormi-charge:	1					Follow-Up:	Y (1	기
		1 1 1 1 2	1	0				Follow-Up Date:		
Sign	ature of Person	in Charge: A MA A !! Me	te	0				Date: 8-7-20		
Sign	ature of Inspect	or:	4 -					Date: 8-7-2020		\dashv
3.1								2310. 02.1.101		



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



Es	tablishmer	it: Borger K	ing			Date	8-4-202D	Page	20	f <u>2</u>
Ad	dress: 2_	Amnerst	Road				npliance Achieved: 8-4	- 1920)	
					TEMPERATURE OBSERVATIONS					
25		Item/Location		Temp.	Item / Location	Тепар.	Item / Locatio)D.		Temp.
1 -	_	le / cot to		574						
100	truple	e / pickie	+-13C2,	3B.						-
				317.		-				
73/67	PCTE - IT	retrig. /n	DI TOTOLS	3.1		-				
					OBSERVATIONS AND/OR CORRECTIVE A	CTIONS				
V	Item Number	Section of Code			Description of Violation	วก				Corrected COS
			Kitchen							
Р£	23-	3-501-19-	prep +	ص علاد أ	n center of kitchen when	e cond	iments / Topping	25	CO	5
					under TPHC observed .					
					of / Time items need to					
					IC procedure's and the					
					ing to food items with					
						-	CONTR.	1460		
			immec	7 AONTE	19-			_		
							· · ·			
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\neg										
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l Sign:	ature of Pe	erson in Charge:	10 ist	101	W. CAS		Date: 8	7-210		-
	ature of Ins		Nei				Date: 9 -		20	
1811					~~		Date. 8	7-60	مد_	



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



Est	ablish	ment: Su	veet Ginger	[Date(3-5	-20	Pag	e 1 of _2_	No. of Ri	sk Factor/Int	ervention	Violatio	ns 2
Add	lress:	6 DODS	on way unit E & F	7	Гіте	in:	0:00	₽Time	e out: \\:O ¢	No. of Repeat Ri	sk Factor/Int	ervention	Violation	ns ø
			er: Patchara smith	F	Risk (Cate	egory:	C				Total	Violatio	ns 5
			ara@4400.000	-				-	2.803.5	Inspection Status		Yellow	Red	
		n Type:	Routine Re-inspection Pre-ope			-			vestigation	Complaint	Othe	ər		
1113		птурс.	FOODBORNE ILLNESS RISK			AN					Our	-1		
			Circle designated compliance status (IN, OUT, N/					Dilli		in appropriate box fo	r COS and/or	R		
_			IN = in compliance OUT= not in compliance NO =					annli						
			is wiseinplanted to											
Com	pliano	e Status	Supervision	cos	R	-	Com	plian	ce Status	Protection from	Contaminativ	2.72	C	OS R
1		OUT	Person in charge present, demonstrates knowledge and performs duties	Τ	T		15	IN	OUT N/A NO	Food separated and p		<u>, , , , , , , , , , , , , , , , , , , </u>	$\overline{}$	/
2	1	OUT N/A	Certified Food Protection Manager			1	16	(N)	DUT N/A	Food-contact surfaces	cleaned and sa	nitized		\neg
			Employee Health			7	17	IN (OUTWANO	Proper disposition or r reconditioned & unsaft		sly served,		
3	(N)	UT	Management/food employees & conditional employee;	T	T	1			,	Time / Temperature		afety		
4	100		knowledge, responsibilities and reporting Proper use of restriction and exclusion	+	+	\dashv	18	LIN	OUT N/ANO	Proper cooking time a				
5			Procedures for responding to vomiting and diarrheal events	\vdash	+	-	19	_	OUT N/A	Proper reheating proc		olding	_	+
			Good Hygiene Practices			1	20	IN	OUT N/A NO	Proper cooling time ar			\rightarrow	\neg
6	IN C	UT (NO	Proper eating, testing, drinking, or tobacco use		\top	1	21	IN	OUT N/A NO	Proper hot holding ten	nperatures			
7	IN C	UT NO	No discharge from eyes, nose, mouth		\top	1	22	(IN)	ON A'N TU	Proper cold holding te	mperatures			
			Preventing Contamination by Hands				23	IN (OUT N/A NO	Proper date marking a	nd disposition			
8		UT NO	Hands clean & properly washed				24	IN (OUTWANO	Time as a Public Heal	th Control: proce	dures and red	ords	
9	(IN)	UT N/A NO	No bare hand contact with RTE food]				Consumer	Advisory			
10	INS	UT	Adequate handwashing sinks properly supplied & accessible	<u> </u>		_	25		DUT N/A	Consumer advisory pr			ods	
	V)		Approved Source			-		T 40.1	OUT WA	Highly Susceptib				
11	(IN)	UT N/A NO	Food obtained from an approved source	<u> </u>	+-	-	26	IN		Pasteurized foods use				
12	(1)20		Food received at proper temperature Food in good condition, safe & unadulterated	_	+-	+	27	T INL	DU N	Food additives: approv				
14	_	UTANANO	Req. records available: shell stock tags, parasite destruction		+	1	28	-	DUT N/A	Toxic substances prop			d	\rightarrow
				net		1				onformance with A				
	Pr	evalent cont	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	alth			19	Inc	DUT N/A	Compliance with variar			P	\Box
		OHOHHOHO			HARRY A		<u> </u>			Compilation with various				
			Good retail practices are preventative measures	DOD R					-	and physical phierts into	foods			
Mai	k "X" i	n box if num	bered item is not in compliance Mark "X" on app							corrected on-site du		n R=rep	eat viola	tion
2	. [2	- 64-4		coe	I B		100	llane	n Ptotus				CO	SR
-om	olianc	e Status	Safe Food and Water	cos	R		Comp	mane	e Status	Proper Use o	f Utensils			3 [K
30		Pasteurized	eggs used where required		Т	1	43		In-use utensi	is properly stored				
31		Water & Ice	from approved source]	44		Utensils, equ	ipment & linens: properl	y stored, dried, &	handled		
32		Variance ob	tained for specialized processing methods				45		Single-use/si	ingle-service articles: pro	perly stored & u	sed		
		The state of the state of	Food Temperature Control]	46		Gloves used	properly				
33			ng methods used: adequate equipment for temp. control		ـــــ				T	Utensils, Equipme		'g		
34			roperly cooked for hot holding		₩		47 ·	├	1	n-food contact surfaces				
35			awing methods used		\vdash		48	 	<u> </u>	igned, constructed, & us g: installed, maintained,				+
36		Inermomete	Food Identification		Ь		49		Assucasinis	Physical F				
37		Food proper	ly labeled: original container				50		Hot & cold wa	ater available adequate				
			Prevention of Food Contamination				51			talled, proper backflow d				
38		Insects, rode	ants, & animals not present				52		Sewage & wa	aste water properly dispo	sed			
39	X	Contaminati	on prevented during food preparation, storage & display				53		Toilet facilities	s properly constructed, s	supplied, & clean	ed		
40		Personal cle	anliness				54		Garbage & re	fuse properly disposed,	facilities maintai	ned		\perp
41		Wiping cloth	s: properly used & stored	_	W	55 56	X		ities installed, maintaine					
42 Washing fruits & vegetables								X	Adequate ver	ntilation & lighting, design	nated areas used	i		
Typ	e of 0)peration:-	1 hai					_			License Po	sted:	(Y)	N
			rson-in-Charge:								Follow-Up:		M	N
J131	Judall	ALL MAIGH E CI	out at Utsilgo.										4	1
											Follow-Up I	Jaic. 14	craye	<u>; </u>
			in Charge:								Date: 8	15/208	lo_	
Sig	nature	ature of Inspector: Date: 8-5-2070												



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



Est	ablishme	nt: sweet 6	inger			Date	:8-5-2620	Page .	2 of	_2
Ad	dress: 6	Dopson w	oay unit	+ E+	F-	Corr	pliance Achieved:			
					TEMPERATURE OBSERVATIONS					
		Item / Location		Temp.	Item / Location	Temp.	· Item / Location			Тетр.
pal	n apri	mp lin-line	unit	-89						
									\rightarrow	
							[
					OBSERVATIONS AND/OR CORRECTIVE ACTIO	DNS				
V	Item Number	Section of Code			Description of Violation				Dated Cor	
	Number			i				-	or CC	18
			Kitchen:	•1				\rightarrow		
P	15	3 -302.11	in-line	refri	gerator unit : raw shelled	cags	stored above re	IL)	0	5
					RTE Jems PTC COTTECKE					
P.F	23	2 601 174	_ =				4)ern		
84	6 20	3-501.173			in storage not in origin					
_					col. Piscossed proper date		4			
<u>_</u>	56	6-501.14	Hood	Stic 14	ers on cookline expired	last	SETUTED 9/201	9.		
C.	55				on of greate on floor/wa	·	•			
C	39				igerator face containers =			~~		
	.3-1	3- 300.11	1		•		7	21.		
		l	Must b	< 5to	pred at least 6 inves off	아 11	DOY	_		
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\neg							1 8 87			\neg
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			04	2				(a		
		erson in Charge:	4.1	-1				5.20		
Sign	ature of In	spector:	11/	en			Date: 8 - s	- 202((2	



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



Est	tablishment: P	lanet fitness		ع:Date	3-5-207	Pag	e 1 of _2_	No. of Ri	isk Factor/Intervention Vio	lations	0
		. w High way # 103				1	e out: [*. [5	No. of Repeat Ri	sk Factor/Intervention Vio	lations	Ø
Ow	ner/Permit Hold	ier. Planet Fitness Asset co	_		ategory		mad		Total Vio	-	0
		and planetfitness.com	_					Inspection Status		Red	~
-	pection Type:	(Routine) Re-inspection Pre-op					vestigation	Complaint	Other	100	
1113	pection Type.	FOODBORNE ILLNESS RIS					_		Othei		
		Circle designated compliance status (IN, OUT, N				, DANC		in appropriate box fo	r COS and/or R		
-		IN = in compliance OUT= not in compliance NO =				t appli					
-									Topour violeto,	12.2.2	
Con	npliance Status	Supervision	cos	R	Con	nplian	ce Status	Protection from	Contamination	cos	R
1	INDUT	Person in charge present, demonstrates knowledge and	T	$\neg \neg$	15	LINI	OUTNANO				T
-	IN OUT (VIA	performs duties	-				OUT (N/A)	Food separated and p			-
2	IN OUT WA	Certified Food Protection Manager			16	_			s cleaned and sanitized eturned, previously served,	-	+
	6	Employee Health			17	IN	OUT N/A NO	reconditioned & unsafe			\perp
3	(IN) OUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Time / Temperature	Control for Safety		
4 (LINOUT	Proper use of restriction and exclusion			18		OUT N/A NO	Proper cooking time a	nd temperature		
5	(IN)OUT	Procedures for responding to vomiting and diarrheal events		Щ	19		ON AND TUO	Proper reheating proo	edures for hot holding		
		Good Hygiene Practices	-	 -	20	_	OUTWANO	Proper cooling time ar			$\perp \perp$
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use	₩	\perp	21	_	ON (NO NO	Proper hot holding ten	·	ļ	\perp
7	IN OUT (NO	No discharge from eyes, nose, mouth	<u> </u>	1	22	-	OUT N/A NO	Proper cold holding te			+
	1	Preventing Contamination by Hands	,		23		DUT N/A NO	Proper date marking a		_	┦
8	IN OUT NO	Hands clean & properly washed	-	+	24	IN 6	OUT N/A NO		th Control: procedures and records		\perp
9	IN OUT N/A NO	No bare hand contact with RTE food	-	+	-	1		Consumer			
10	TUDUT	Adequate handwashing sinks properly supplied & accessible Approved Source		4	25	IN	OUT N/A)		ovided for raw/undercooked foods		
11	DOUT	Food obtained from an approved source	T	\Box	26	TINI	OUT(N/A	Highly Susceptib	d; prohibited foods not offered	Т	
12	IN OUT N/A	Food received at proper temperature		+	120	114			and Toxic Substances		4
13	CINOUT	Food in good condition, safe & unadulterated	1	+	27	IN	OUT N/A	Food additives: approv			
14	IN OUT NAMO	Req. records available: shell stock tags, parasite destruction		\Box			OUT N/A		erly identified, stored and used	-	\vdash
	Risk factors a	re improper practices or procedures identified as the ri	nost			-	Co	onformance with A		-l	
	Prevalent con	are improper practices or procedures identified as the na tributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or inj	alth iurv.		19	INC	OU N/A		ce/specialized process/HACCP	1	
				DOT ATT	PRAC				production of the second secon		-
		Good retail practices are preventative measures						and physical objects into	foods		-
Mai	k "X" in box if num	nbered item is not in compliance Mark "X" on ap						=corrected on-site du		violation	
20.00	oliance Status		cos	R	Icam	- None	- Cántun			lcon	
o Otti	pliance Status	Safe Food and Water	003		COIN	рнанс	e Status	Proper Use o	f Iltensils	cos	R
30	Pasteurized	eggs used where required			43	T	In-use utensi	ils properly stored	- An an annual company		
31	Water & Ice	from approved source			44		Utensils, equ	ipment & linens: properly	y stored, dried, & handled		
32	Variance ob	tained for specialized processing methods			45		Single-use/si	ingle-service articles; pro	perly stored & used		П
		Food Temperature Control			46		Gloves used	properly			
33	Proper cool	ing methods used: adequate equipment for temp, control						Utensils, Equipmen	nt and Vending	100	
34	Plant food p	roperly cooked for hot holding		Ш	47 -		Food and no	n-food contact surfaces	deanable,		
35	 	awing methods used			48		+	igned, constructed, & use			Ш
36	Thermomet	ers provided and accurate	Ĺ		49	1_	Warewashing	: installed, maintained, (Щ
27		Food Identification				·	I Mad B and I was	Physical Fa			
37	Food proper	ly labeled: original container Prevention of Food Contamination			50	-	<u> </u>	ater available adequate p			
38	Insects mos	ents, & animals not present			52	-	-	lalled, proper backflow d aste water properly dispo			-
39		on prevented during food preparation, storage & display			53	-		s properly constructed, s			
40	Personal de				54	-	+	fuse properly disposed,			-
41		s: properly used & stored			55	-		ities installed, maintained			\neg
42		its & vegetables			56		-	ntilation & lighting, design			
_										65	
Гур	e of Operation:								License Posted:	<u> </u>	N
Disc	cussion with Per	son-in-Charge:							Follow-Up:	Y (N
		aus C							Follow-Up Date:		
Siar	nature of Person	in Charge:							Date: 8/5/2070		_
_											\dashv
oiâi	nature of Inspec	101.7							Date: 8-5-2026		



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



Establishme	ent: Planet Eith	css	Date: 8 -	5-2020	Page 2_ of _	<u>z</u>	
Address: 2	geo D.w Hig	1way # 103	Compliance Achieved: 8-5-2020				
			TEMPERATURE OBSERVA				
	Item / Location	Temp.	Item / Location	Temp.	· Item / Locut	ion 7	Гетр
		OBSE	RVATIONS AND/OR CORRECT	TVE ACTIONS			
/ Item Number	Section of Code		Description of \	Violation		Dated Corn or COS	
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1				2 12 6	`- a- al -> /		
		CD Glolett	ions observed do	ring Time of	mapacator		
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gnature of F	Person in Charge:	in the			Date: 🖇 .	5-2020	
ignature of I	Inspector:	10			Date: 😪	-5-2020	



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



Est	ablishment: Do	11ar General		D	ate:8-5	1-202	Page	1 of <u>2</u>	No. of Ri	sk Factor/Intervention \	/iolations	Ø
Add	dress: 360 D	W. Highway		Т	îme in:1	12:00	Time	out: 17:25	No. of Repeat Ris	sk Factor/Intervention \	/iolations	ø
		er. Robb McCol	\en	R	lisk Cate	egory:	F			Total \	/iolations	(Z)
Em		1,000		\rightarrow				4-4130	Inspection Status:		Red	
		(Pauline) Pa in	onestion Dra anora					estigation	Complaint	Other		
IIIS	pection Type:		spection Pre-opera DBORNE ILLNESS RISK P							Other		
							SLALL JE		in appropriate box for	r COS and/or P	-	
			pliance status (IN, OUT, N/A,				!!		,			
		IN = In compliance OU	T= not in compliance NO = not	CODS	erveu N//	M - HOL	applica	able CO3 -	corrected of Falle K	- Tepeat violation		
Com	pliance Status			os	R	Com	oliance	Status	70	0 - 1 - 1	cos	R
		Supervision Person in charge present, de				-		_	Protection from			T
1	(IN)OUT	performs duties	Hollottates Kilowleage Bild			15	-	UT N/ANO	Food separated and p	rotected		\perp
2	M OUT M	Certified Food Protection Mar	nager			16	-	UT N/A		etumed, previously served,		+
		Employee He				17	IN O	UT(N/A)NO	reconditioned & unsafe			
3	TUO(NI)	Management/food employees knowledge, responsibilities ar							Time / Temperature	Control for Safety		
4	(IN)OUT	Proper use of restriction and				18	INO	ON (MA)TU	Proper cooking time as	nd temperature		
5	INDUT	Procedures for responding to	vomiting and diarrheal events			19	INO	UT NO	Proper reheating proc	edures for hot holding		
	1001	Good Hygiene P	ractices			20		UTNANO	Proper cooling time an	d temperatures	\dashv	\bot
6	IN OUT (10)	Proper eating, tasting, drinkin	g, or tobacco use			21	-	UT WA NO	Proper hot holding tem			
7	IN OUT (NO)	No discharge from eyes, nose				22	-	UT N/A NO	Proper cold holding ter			+
		Preventing Contamina				23		UT N/A NO	Proper date marking a			+
8	IN OUT NO	Hands dean & properly wash			\vdash	24	INO	ON		th Control: procedures and rec	oras	
9	IN OUT (IA)NO	No bare hand contact with RT			-	25	INIO	JT(N/A)	Consumer advisory or	ovided for raw/undercooked for	nde	1
10	CINDOL	Adequate handwashing sinks Approved Son				25	INCO	JIWA	Highly Susceptib		743	
11	(IN)DUT	Food obtained from an approv				26	INO	UT (VA)		d; prohibited foods not offered		1
12	IN OUT N/A NO	Food received at proper temp							d / Color Additives	and Toxic Substances		
13	(NOUT	Food in good condition, safe &	unadulterated			27	IN O	JT(N/A)	Food additives; approv	ed and properly used		
14	IN OUT NAMO	Req. records available: shell s	tock tags, parasite destruction			28	(IN)DI	JT N/A	Toxic substances propo	erly identified, stored and used		7
	Risk factors a	re improper practices or pro	ocedures identified as the mos	t				C	onformance with Ap	proved Procedures		
	Prevalent cont Interventions	iributing factors of foodborn are control measures to pre	ocedures identified as the mos e illness or injury. Public Healt vent foodbome illness or injury	in ∮-		19	INO	JT N/A	Compliance with varian	ce/specialized process/HACCI	2	
			G00	D R	ETAIL	PRACT	ICES					
		Good retail prac	tices are preventative measures to	contro	ol the addi	tion of pa	thogen	s, chemicals,	and physical objects into	foods,		
Mai	rk "X" in box if num	bered item is not in complia	nce Mark "X" on appro	priat	te box for	r COS a	nd/or	cos	=corrected on-site du	ring inspection R=rep	eat violatio	n
om	pliance Status		C	os	R	Comp	liance	Status			cos	R
M		Safe Food and	Water						Proper Use o	of Utensils		
30	Pasteurized	eggs used where required				43			ils properly stored			
31	 	from approved source				44	\vdash			y stored, dried, & handled		+
32	Variance ob	tained for specialized processin				45		Gloves used	ingle-service articles; pro	openy stored a used	_	
33	Proper cool	Food Temperature				40		Gioves useu	Utensils, Equipme	nt and Vending	- 11-2	1
34		roperly cooked for hot holding	aprivers for temp, consor		\vdash	47 ·		Food and no	n-food contact surfaces			
35		awing methods used				48			igned, constructed, & us			\top
36		ers provided and accurate				49		Warewashin	g: installed, maintained,	& used: test strips		
		Food Identific	ntion						Physical F	acilities .		
37	Food proper	ly labeled: original container				50		Hot & cold w	ater available adequate	pressure		\perp
		Prevention of Food Co	etamination			51			talled, proper backflow d			-
38		ents, & animals not present		_		52			aste water properly dispo		_	+
39	 	on prevented during food prepa	ration, storage & display	_		53			s properly constructed, s		_	+
40	Personal de					54 55	-		efuse properly disposed, lities installed, maintaine		-	-
41		is: properly used & stored			-	56		·	ntilation & lighting, design			+
42	(vvasning mu	its & vegetables				_ 55		, and district AC				
Тур	oe of Operation:	Retail								License Posted:		N
	cussion with Pe									Follow-Up:	Y	(N)
0										Follow-Up Date:		_
		A	1/1/4/							- 0 -101		
Sig	nature of Persor	in Charge:	WHEN WILLOS							Date: 8 6 20	<u>dU</u>	
Sia	nature of Inspec	tor: () /	X/h							Date: 8-5-70	2A	
2												



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



Establishme	ent:Dollar Gen	eral of la	984	Date: 18-5	-2020	Page 2 of 2
Address: 3	60 D.W High	nuou uni+	119	Complian	ce Achieved: 😝 /S	12020
			I EMPERATURE OBSERVA	TIONS		
	Item / Location	Temp.	Item / Location	Temp.	· Item / Locat	ion Temp.
			OBSERVATIONS AND/OR CORRECT	IVE ACTIONS		
V Item Number	Section of Code		Description of 1	Violation		Dated Corrected
Transci						or COS
						
			. 1	1 8	0. 2000 -000	
		<u> </u>	plations observed	yound fine	of mapeci	10 N
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	A					
gnature of F	Person in Charge:	(nnulu) V	40100.		Date:	15/2020
ignature of I		~ 5117	0		Date: &	S - 2020
-	·					- 4-2-



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



Est	tablishment: Ki	nder care learning center		Date	13/20	Page 1 of _2_	No. of Risk Factor/Intervention Violatio	ns 💋
Ad	dress: 4 Cont	inertal Blud.		Time ir	405	Time out: 1:30	No. of Repeat Risk Factor/Intervention Violatio	ns (25
Ow	ner/Permit Hold	er kinder (cure learning (criter			ategory:		Total Violatio	
Em	e vol i m :lier	@ Kindercare. com	_					
						-d Attd		
ins	pection Type:	Routine Re-inspection Pre-ope				ss Investigation	Complaint Other	
_		FOODBORNE ILLNESS RISI						
		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	V/A = not	applicable COS =	corrected on-site R = repeat violation	
Com	pliance Status		cos	R	Com	pliance Status	C	OS R
		Supervision					Protection from Contamination	
1	TINGUT	Person in charge present, demonstrates knowledge and performs duties			15	INOUT N/A NO	Food separated and protected	
2	IN OUT NA	Certified Food Protection Manager	1	\top	16	(IDOUT N/A	Food-contact surfaces cleaned and sanitized	-
		Employee Health	-		17	IN OUT WA NO	Proper disposition or returned, previously served,	\neg
3	NOUT	Management/food employees & conditional employee;	Т				reconditioned & unsafe food	
4		knowledge, responsibilities and reporting	-	+	-10		Time / Temperature Control for Safety	
5	INOUT	Proper use of restriction and exclusion Procedures for responding to vomiting and diarrheal events	-	-	18	- 2	Proper cooking time and temperature	-
J	114001	Good Hygiene Practices			19	IN OUT N/A(NO)	Proper reheating procedures for hot holding Proper cooling time and temperatures	-
б	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use	Т		21	IN OUT NA NO	Proper hot holding temperatures	_
7	IN OUT (NO	No discharge from eyes, nose, mouth		+	22	JADOUT N/A NO	Proper cold holding temperatures	-
		Preventing Contamination by Hands	-		23	IN OUT N/A NO	Proper date marking and disposition	-
8	IN OUT (NO)	Hands clean & properly washed		\top	24	IN OUT WANO	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 /	Thout	Adequate handwashing sinks properly supplied & accessible			25	IN OUT N/A	Consumer advisory provided for raw/undercooked foods	
		Approved Source					Highly Susceptible Populations	
11	TNOM	Food obtained from an approved source			26	INOUT N/A	Pasteurized foods used; prohibited foods not offered	
12	IN OUT N/ NO	Food received at proper temperature				Foo	d / Color Additives and Toxic Substances	
13	CINDUT	Food in good condition, safe & unadulterated			27	IN OUT (VA)	Food additives: approved and properly used	
14	IN OUT WO NO	Req. records available: shell stock tags, parasite destruction			28	IN OUT N/A	Toxic substances property identified, stored and used	
	Risk factors a	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	ost			Ca	onformance with Approved Procedures	
	Interventions a	ire control measures to prevent foodborne illness or injury.	ury.		19	IN OUT WA	Compliance with variance/specialized process/HACCP	
		G	OOD R	ETAIL	PRACT	ICES		
		Good retail practices are preventative measures	to contr	of the add	dition of pa	thogens, chemicals, a	and physical objects into foods.	
Mar	k "X" in box if num	bered item is not in compliance Mark "X" on app	oropria	te box fo	ог СО\$ а	nd/or COS =	corrected on-site during inspection R=repeat violation	tion
omp	oliance Status		cos	R	Comp	liance Status	CO	S R
		Safe Food and Water					Proper Use of Utensils	
30	Pasteurized	eggs used where required			43	In-use utensi	is properly stored	
31	Water & Ice	from approved source			44	Utensils, equ	ipment & linens: properly stored, dried, & handled	
32	Variance obt	tained for specialized processing methods			45	Single-use/si	ngle-service articles; properly stored & used	
		Food Temperature Control			46	Gloves used		
33	-	ng methods used: adequate equipment for temp, control			ļ		Utensils, Equipment and Vending	
34		operly cooked for hot holding			47 -		n-food contact surfaces cleanable,	
35		awing methods used		-	48		gned, constructed, & used	
36	Inermomete	rs provided and accurate Food Identification			49	Warewashing	; installed, maintained, & used: test strips	
37	Food proped	y labeled: original container			50	Hot & cold ws	Physical Facilities ater available adequate pressure	
0,	1 ode proport	Prevention of Food Contamination			51		talled, proper backflow devices	+
38	Insects, rode	nts, & animals not present			52		Iste water properly disposed	\dashv
39		on prevented during food preparation, storage & display			53		s properly constructed, supplied, & cleaned	+
40	Personal dea	anliness			54		fuse properly disposed, facilities maintained	+
41	Wiping cloths	s: properly used & stored			55		ties installed, maintained, & clean	+
42	Washing fruit	s & vegetables			56	Adequate ven	ntilation & lighting, designated areas used	
		1 /						
Гур	e of Operation:	Daycare / //					License Posted: (Y)	N
	cussion with Pers						Follow-Up: Y	0
		Jalilla I	,)				Follow-Up Date:	
D1-	antonia (CD)		7				'	
	ature of Person					<u> </u>	Date:	
Sign	ature of Inspect	or; no la					Date: 8-3-2070	
	0							



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



Es	tablishmer	it: Kirvder C	ase learnin	a cen	i ler		Date: g	-3-2020		ge <u>2</u> c	of <u>Z</u>
Ad	dress: 🛕	Continental	Blud	J			Complia	nce Achieved:	8-2-7177	6	
					TEMPERATURI	OBSERVATIONS			3.64		
		Item / Location	Tem	ъ.	Item / Loc	ation	Temp.	· Item /	Location		Temp.
							 				
				OPOT	3 m 2 7 4 0 m 2 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1	n 002-22-20-22-22-2	Y O NYO				L
	T 14			OBSE	ERVATIONS AND/O	R CORRECTIVE ACT	IONS			I	
V	Item Number	Section of Code			D	escription of Violation					Corrected COS
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			<u> </u>	<u> </u>	ctions obser	ved during	of the in	epection.	·		
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		erson in Charge:	FUIN	7				Date	:		
Sigr	ature of In	spector:	12/0	1				Date	8-3-20	20	



HEALTH DIVISION

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



Est	tablishment: 🍸	nomas Hore College of liberal A	rts	Date	8-	18-2C	Pag	e 1 of 2	No. of Ris	k Factor/Intervention Vio	lations	Ø
		cnester street		Time	in:	ling	Tim	e out: 1.2; oc	No. of Repeat Ris	k Factor/Intervention Vio	lations	_
		der Thomas More Callege of libra	_			tegory:	_			Total Vio		-
		one@Thomesmorecollege . ed			_		<u> </u>	2680	Inspection Status:		Red	
1	pection Type:	Routine Re-inspection Pre-or	peration	32/6	cy n	h 4 _{Illne}	e lo	vestigation	Complaint	Other	100	
	padion 17 po.	FOODBORNE ILLNESS RE						_		Other		
		Circle designated compliance status (IN, OUT,					DIALI		in appropriate box for	COS and/or R		
		IN = in compliance OUT= not in compliance NO:			_		annli					
									CONTROLLED ON SILE IV	repeat violation		
Com	pliance Status	Supervision	cos	R	-	Com	plian	ce Status	Bastastina fram C		cos	R
1	NOUT	Person in charge present, demonstrates knowledge and		7	-	45	15	OUT N/A NÓ	Protection from C			Т
2	IN OUT N/A	performs duties		+	4	15	-		Food separated and pro		+	+
4	IN GOT NA	Certified Food Protection Manager			\dashv	16	-	DUT N/A	Food-contact surfaces of Proper disposition or ret	urned, previously served,	+	-
		Employee Health			4	17	IN	ON WATUO	reconditioned & unsafe t			
3	(IN) UT	Management/food employees & conditional employee; knowledge, responsibilities and reporting							time / Temperature (Control for Safety		
4	INDUT	Proper use of restriction and exclusion			_	18	+	OUT N/ANO	Proper cooking time and	I temperature		
5	IN DUT	Procedures for responding to vomiting and diarrheal events			4	19	_	OUT N/A NO	Proper reheating proced	fures for hot holding		\perp
	W 01 7 60	Good Hygiene Practices		_	4	20	+	OUT N/A NO	Proper cooling time and		_	
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use	-	-	4	21		DUT N/A(NO)	Proper hot holding temp			╀
7	IN OUT (NÒ	No discharge from eyes, nose, mouth			-	22	100	DUT N/A NO	Proper cold holding tem		-	+
8	IN DUT NO	Preventing Contamination by Hands	Ţ			23		ON AN TUC	Proper date marking and		+-	+
9	IN DUT N/A NO	Hands clean & properly washed	-	+	-	24	ING	OU N/A NO		Control: procedures and records		
10	IN OUT	No bare hand contact with RTE food Adequate handwashing sinks properly supplied & accessible		-	-	25 (100	DUT N/A	Consumer A	ided for raw/undercooked foods		
-10	111701	Approved Source			+	23	lly c	JUT IN/A	Highly Susceptible			
11	INDUT	Food obtained from an approved source	T	T	1	26	INC	DUT(N/A)		prohibited foods not offered	T	T
12	IN OUT N/A TO	Food received at proper temperature							d / Color Additives an	· · · · · · · · · · · · · · · · · · ·		-
13	ТИОИТ	Food in good condition, safe & unadulterated	1	1	1	27	INC	DUT(N/A)	Food additives: approved		T	T
14	IN OUT (/A) IO	Req. records available: shell stock tags, parasite destruction		\top	7	28	-	DUT N/A		ly identified, stored and used		1
	Risk factors	are improper practices or procedures identified as the	most		1			Co	nformance with App	roved Procedures		
	Prevalent cor Interventions	are improper practices or procedures identified as the tributing factors of foodborne illness or injury, Public H are control measures to prevent foodborne illness or in	ealth njury.			19	IN C	OUT(N/A)	Compliance with variance	e/specialized process/HACCP		
			GOOD R	ETA	Л П. Т	PRACT	TCES					
		Good retail practices are preventative measure							and physical objects into fo	oods,		_
Mar	k "X" in box if nur	nbered item is not in compliance Mark "X" on a							corrected on-site during		violation	1
omi	oliance Status		cos	R	Т	Comp	lianc	e Status			cos	R
		Safe Food and Water			1				Proper Use of	Utensils		
30	Pasteurize	d eggs used where required				43		In-use utensi	ls properly stored			
31	Water & Ico	from approved source		1		44		Utensils, equ	ipment & linens: properly s	stored, dried, & handled		
32	Variance o	otained for specialized processing methods				45		Single-use/si	ngle-service articles: propi	erly stored & used	<u> </u>	Ш
-		Food Temperature Control		1		46		Gloves used			L	Щ
33		ing methods used: adequate equipment for temp, control	-		-				Utensils, Equipment			
35		properly cooked for hot holding nathods used	-	-	1	47 ·			n-food contact surfaces cle		-	\vdash
36		ers provided and accurate				49			gned, constructed, & used : installed, maintained, & u		 	\vdash
-	T T T T T T T T T T T T T T T T T T T	Food Identification		!				**************************************	Physical Fac	· · · · · · · · · · · · · · · · · · ·		
37	Food prope	rly labeled: original container	T	<u> </u>		50		Hot & cold wa	iter available adequate pre			
		Prevention of Food Contamination				51			alled, proper backflow dev			\Box
38	Insects, roo	ents, & animals not present	1		1	52		Sewage & wa	ste water property dispose	ed		
39	Contaminat	ion prevented during food preparation, storage & display			53		Toilet facilities	properly constructed, sup	phied, & cleaned			
40	Personal cl	panliness				54		Garbage & re	fuse properly disposed, fa	cilities maintained		
41	Wiping clots	s: properly used & stored				55	X	Physical facili	ties installed, maintained,	& clean		
42	Washing fru	its & vegetables				56	- 1	Adequate ven	tilation & lighting, designat	ted areas used		
Tvp	e of Operation	college cateleria							1	License Posted:	(Y)	N
		rson-in-Charge:										
IJIS(ussion with Me	isonini Ponarye.							1	Follow-Up:		N
									f	Follow-Up Date:		
Sign	ature of Persor	in Charge: All								Date: 8-28- 20	120	
-	nature of Inspec						-			Date: 8-28-2620		\dashv
-191	01 1110000	The state of the s								D-70-7070		



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



Establishment: Thomas Note College of Liberal Arts Address: 6 Managester street TEMPERATURE OBSERVATIONS Item/Location Temp. Item/Location OBSERVATIONS AND/OR CORRECTIVE ACTIONS V Number Section of Code Kitchen:	ed: Item / Location	Tem
TEMPERATURE OBSERVATIONS Item / Location Temp. 1	Item / Location	Tam
OBSERVATIONS AND/OR CORRECTIVE ACTIONS V Item Number Section of Code Description of Violation	Item / Location	Term
V Item Number Section of Code Description of Violation		Len
V Item Number Section of Code Description of Violation		
/ Item Section of Code Description of Violation		
/ Item Section of Code Description of Violation		
V Item Number Section of Code Description of Violation		
V Item Number Section of Code Description of Violation		
Number Section of Code Description of Violation		
Rullipet	l l	d Correcte
	or	or COS
- 55 6-201.11 - Floor beneath 3 bay sink: Finish floor wim tiles	to the	
wall to ensure surface below 3-Bay sink is sm		
	10010	
and easily cleanable.		
55 6-201.15 - No cowing installed along back, wall or kitchen	WHERE.	
3-bay & oish machine is install coving along.		
to ensure the freeze area is smooth and ecvily	cecucable	
V		
the many states of action through a state of the		
* email plan of action timeline on above		
topair/install requirements.		
Eolson @ merrimackph. gov		
	İ	
gnature of Person in Charge: Ad A Mu	3 26-2.1	
	Date: 8-28-211	<u>6</u>
gnature of Inspector:	Date: 8-28-2020	1



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



Est	ablis	nment: To	ortilla Flats	Г	Date:	g. 1	2-20	Pag	je 1 of <u>2</u>	No. of R	isk Factor/Int	ervention Viola	ations	1
Add	dress	Sas D	w Highway	1	Time	in:	1:45	Tim	e out ?:30	No. of Repeat R	isk Factor/Int	ervention Viola	ations	25
			er Tortilla Ftats Inc.	F	Risk	Cat	egory	: R				Total Viola	ations	5
									4-2408	Inspection Status	s: Green	Yellow R	led	
		on Type:	(Routine) Re-inspection Pre-ope			-6			vestigation	Complaint		ег		
			FOODBORNE ILLNESS RISI			Al							-	
			Circle designated compliance status (IN, OUT, N	/A, NO)) for e	ach	item		Mark "X"	in appropriate box for	or COS and/or	R		
			IN = in compliance OUT= not in compliance NO =	not obs	serve	1 N/	A = no	t appl	icable COS =	corrected on-site R	= repeat violati	on		
Com	plian	ce Status		cos	R	T	Con	nplian	ice Status				icos	R
			Supervision							Protection from	Contaminatio	ozi.		
1		DUT	Person in charge present, demonstrates knowledge and performs duties				15	(IN	DUT N/A NO	Food separated and	protected			
2	IN	DUT N/A	Certified Food Protection Manager				16	IN	OUTN/A	Food-contact surface	s cleaned and sa	nitized		+
			Employee Health			7	17	IN	OUT N/ANO	Proper disposition or reconditioned & unsa		sly served,		
3		DUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting	T^{-}	T	7				Time / Temperature		afety		
4	(N)	DUT	Proper use of restriction and exclusion	+-		┨	18	IN	OUT N/A (TO)	Proper cooking time :			T	Т
5	(N)	DUT	Procedures for responding to vomiting and diarrheal events		\perp	1	19		OUT N/A NO	Proper reheating prod		lding	1	
			Good Hygiene Practices				20	(IN)	OUT N/A NO	Proper cooling time a	nd temperatures			
6	IN C	OUT (NO)	Proper eating, tasting, drinking, or tobacco use				21	(II)	OUT N/A NO	Proper hot holding ter	mperatures			
7	INC	ON TUC	No discharge from eyes, nose, mouth]	22	(IV)	OUT N/A NO	Proper cold holding to	emperatures			
			Preventing Contamination by Hands				23	CIN	ON ANN TUG	Proper date marking	and disposition			
8	INC	ON TUC	Hands clean & properly washed				24	IN	OUT N/A NO	Time as a Public Hea	ith Control: proce	dures and records		
9		OUT N/A NO	No bare hand contact with RTE food			_				Consumer	Advisory			
10 (_1M)C	UT	Adequate handwashing sinks properly supplied & accessible	<u></u>		1	25		OUT N/A	Consumer advisory pr				
			Approved Source	·	1	-[Highly Susceptil				
11	(IN)		Food obtained from an approved source	-	-	4	26	IN	OUT(N/A)	Pasteurized foods use				
12	-	UT N/A (IO	Food received at proper temperature	├─	-	-		1		d / Color Additives				100
13	(IN)O	457	Food In good condition, safe & unadulterated		-	-	27	400	OUT	Food additives: approv			<u> </u>	+
14	1	UT(N/A)NO	Req. records available: shell stock tags, parasite destruction			-	28		but N/A	Toxic substances prop				1
	R Pr	isk factors a evalent cont	re improper practices or procedures identified as the m ributing factors of foodbome illness or injury. Public He are control measures to prevent foodborne illness or inj	ost alth				T		onformance with A	pproved Proce	dures		
	ln:	terventions a	are control measures to prevent foodborne illness or inj	ury.		L	19	IN (OUT(N/A)	Compliance with varia	nce/specialized pr	ooess/HACCP	<u>L</u>	
				OOD R										
Mar	k "X" i	n box if num	Good retail practices are preventative measures bered item is not in compliance Mark "X" on ap							and physical objects into ecorrected on-site du		R=repeat v	iolation	1
~	-16	e Status		coe	I p	_	I.C.	-11	- Cánhun				COR	
Com	DITALIC	e otatus	Safe Food and Water	cos	R	1	Comi	pilanc	e Status	Proper Use	of Utensils		cos	R
30		Pasteurized	eggs used where required			1	43	Ι	In-use utansi	s properly stored				
31		Water & Ice	from approved source			1	44		Utensils, equ	ipment & linens: proper	ly stored, dried, &	handled		\Box
32		Variance ob	tained for specialized processing methods			1	45		Single-use/si	ingle-service articles: pr	operly stored & us	ed		П
			Food Temperature Control			1	46		Gloves used	properly				П
33		Proper cooli	ng methods used: adequate equipment for temp, control		Ĺ					Utensils, Equipme	ent and Vendin	5		
34		Plant food pa	roperly cooked for hot holding			ļ	47 -		Food and not	n-food contact surfaces	cleanable,			
35	Ш	Approved the	awing methods used				48	ļ	+	igned, constructed, & us				Ш
36		Thermomete	ers provided and accurate		<u> </u>		49	<u> </u>	Warewashing	y: installed, maintained,	***	1		Щ
			Food Identification						<u> </u>	Physical F				
37		Food propert	ly labeled; original container				50	-		ater available adequate				\vdash
38		Incomin mode	Prevention of Food Contamination onts, & animals not present				51 52	\vdash	-	talled, proper backflow		-	\rightarrow	\vdash
39			on prevented during food preparation, storage & display				53	-		ste water properly disp s properly constructed,		ad	\rightarrow	\vdash
40		Personal de					54	-	 	fuse property disposed,				\vdash
41			s; properly used & stored	-		(Aut	55	×	 	ities installed, maintaine		100		\vdash
42	\vdash		ts & vegetables			3	56	_		ntilation & lighting, desig				\sqcap
											T		27	
		Operation:									License Po	sted:	\leftarrow	N
Disc	cussic	on with Per	son-in-Charge:								Follow-Up:	(N
			0-1-	_							Follow-Up D	Date: 14 DO	ZE.	
Sign	nature	of Person	in Charge: Dellaus (Mul	V	-						Date: 8	112/20	9	
Signature of Inspector:										Date: 🔒 -	12-2020			
		<u> </u>												



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



Es	tablishme	nt: Tortilla	Flats			Date: 8 -	12-2020 Page	e_ <u></u> o	11	
Ad	dress: 50	15 p.w His	gnuscy		Compliance Achieved:					
					TEMPERATURE OBSERVATIO					
		Item / Location		Temp.	Item / Location	Temp.	Item / Location		Temp.	
		res box word		144					<u> </u>	
		ucen / in - w		41						
₽e.	W lee	ef walk-	II)	42						
					ADDED THE ANGLE AND ADDRESS OF THE	E ACTIONS				
	Item	1	<u> </u>		OBSERVATIONS AND/OR CORRECTIVE			Dated 0	Corrected	
V	Number	Section of Code			Description of Viol	ation			cos	
			Kitanen:	1						
C	55	6-501.11		na linas	along walls in kitch	an Con check	my dish drying			
	, ,,,	18-301-11								
			area)	V132d0	ed brown missing lin dis	srepour, repo	11,			
<u>C</u>	55	6-501-12 -	Floor	below	n dish drying rack so	ared with acc	rum upation of debris.			
१२	16	4-601.11:	INKE	00 0	rute in ice machine	soiled with	morel / debris.			
C	55	6-501-17-	शहरी	ca oc	Het and pot storagels	display abo	ve box holding			
			te 1010	- 01-	cooking observed has	with soiled w	ity food debris.			
						7				
	-		BASEL	LEVIE	7.					
_			1							
Ç	<i>5</i> 5	6-501-11-2	HOUSE	1 acc	umulation of misself	ineous hem	in hosement.			
			temos	le an	y item (s) mat are	not nece.	isony for the			
			decity	opera	trons of the food est	ablishment	, and			
										
	_	l .								
				-						
\dashv										
\dashv										
\dashv										
			0		4		_			
Sign	ature of F	erson in Charge:	Butto	mus	Gnits		Date: 8/12	120	,	
	nature of I		-	M.	7 // 00		Date: 8 - 20 - 2	2027	$\neg \neg$	
- 9,			~/ -/				- 7			



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



Est	tablishment: 🍞	ne Homestead		Date	:8/	14/2	Pag	ge 1 of _2_	No. of Risk Factor/Intervention Vic	lations	2
Ad	dress: 641 p.	w. Highway		Time	in:	12:30	Tim	ie out:11,30	No. of Repeat Risk Factor/Intervention Vio	lations	Ø
Οw	ner/Permit Hold	er. The Homestead Restaura	70	Risk	Cat	egory	/: B		Total Vio	lations	
Em				Phor	ne: (603))42¢	2-2022	Inspection Status: Yellow	Red	
Ins	pection Type:	Routine Re-inspection Pre-o	peration					vestigation			
		FOODBORNE ILLNESS RE	SK FAC	TOR	S Al			_			
		Circle designated compliance status (IN, OUT, I	√A, NO) for	each	item		Mark "X"	in appropriate box for COS and/or R		
		IN = in compliance OUT= not in compliance NO :	not ob:	serve	d N/	A = no	nt appl	licable CO\$ =	corrected on-site R = repeat violation		
Com	pliance Status		cos	R		Con	npliar	ice Status		COS	R
		Supervision							Protection from Contamination		
1	IND UT	Person in charge present, demonstrates knowledge and performs duties				15		DUT N/A NO	Food separated and protected		
2	IN DUT N/A	Certified Food Protection Manager			$\exists e$	16	IN	OUT N/A	Food-contact surfaces cleaned and sanitized		+
		Employee Health				17	IN	OUTNANO	Proper disposition or returned, previously served, reconditioned & unsafe food		
3	INDUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting	\top	T	7				Time / Temperature Control for Safety		
4	INDUT	Proper use of restriction and exclusion	+	+	\dashv	18	TIN	OUT N/A(NO)	Proper cooking time and temperature	7	
5	TUCKI	Procedures for responding to vomiting and diarrheal events	1		7	19	_	OUT N/A NO	Proper reheating procedures for hot holding	+	+
		Good Hygiene Practices				20	IN	OUT N/A (O)	Proper cooling time and temperatures		\top
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use				21	IN	OUT N/A (10)	Proper hot holding temperatures		
7	IN OUT (NO)	No discharge from eyes, nose, mouth				22	-	OUT N/A NO	Proper cold holding temperatures		
	1 3	Preventing Contamination by Hands			4	23		DUT N/A NO	Proper date marking and disposition		_
8	ON TUO NO	Hands clean & properly washed		\perp	4	24	IN	OUT N/A NO	Time as a Public Health Control: procedures and records		\perp
9	IN OUT	No bare hand contact with RTE food Adequate handwashing sinks properly supplied & accessible	+-	+	\dashv	25		DUT N/A	Consumer Advisory		-
10	114 001	Approved Source			\dashv	25	(IN)	DU t N/A	Consumer advisory provided for raw/undercooked foods Highly Susceptible Populations		
11	UNDUT	Food obtained from an approved source	\top	T	\dashv	26	T _{IN}	OUT N/A	Pasteurized foods used; prohibited foods not offered	T	
12	IN OUT N/ANO	Food received at proper temperature		T	7				d / Color Additives and Toxic Substances		
13	(N)DUT	Food in good condition, safe & unadulterated				27	IN	OUT(N/A)	Food additives; approved and properly used	T	
14	IN OUT N/A NO	Req. records available: shell stock tags, parasite destruction				28		DUT N/A	Toxic substances properly Identified, stored and used		
	Risk factors a	re improper practices or procedures identified as the r ributing factors of foodborne illness or injury. Public H are control measures to prevent foodborne illness or in	nost		П			Co	onformance with Approved Procedures		
	Interventions a	are control measures to prevent foodbome illness or in	ijury.			19	IN (OUT	Compliance with variance/specialized process/HACCP		
			OOD R	ÉTA	ILE	PRACI	FICES	3			
N.d.	L 19071 :- h 16	Good retail practices are preventative measure bered item is not in compliance Mark "X" on a		$\overline{}$							
IVICII	K X III DOXII IIUIII	bered item is not in compliance Mark "X" on a	эргорпа	te bo	X IOL	COS :	and/or	r COS	=corrected on-site during inspection R=repeat	violation	1
omp	liance Status	Safe Food and Water	cos	R	1	Comp	plianc	e Status		cos	R
30	Pasteurized	eggs used where required	Τ		-	43	T .	In use utensi	Proper Use of Utensils ils properly stored		
31		from approved source	+	-	-	44	+		ipment & linens: properly stored, dried, & handled	+-	\vdash
32		tained for specialized processing methods	1	_	1	45	+	1	ingle-service articles: properly stored & used	+	\forall
		Food Temperature Control	-		1	46		Gloves used		\top	П
33	Proper coolii	ng methods used: adequate equipment for temp, control							Utensils, Equipment and Vending	-21	
34		roperly cooked for hot holding			10	47	LX.	Food and nor	n-food contact surfaces cleanable,		
35		awing methods used	-	_	-	48		 	gned, constructed, & used		Ш
36	Inermomete	rs provided and accurate Food Identification				49	<u> </u>	Warewashing	g: installed, maintained, & used: test strips		
37	Food properl	y labeled: original container		<u> </u>	1	50	F	Hot & cold wa	Physical Facilities ater available adequate pressure		
		Prevention of Food Contamination			1	51			talled, proper backflow devices		\vdash
38	Insects, rode	nts, & animals not present			1 1	52		Sewage & wa	ste water properly disposed		
39	Contamination	on prevented during food preparation, storage & display				53		Toilet facilities	s properly constructed, supplied, & cleaned		
40	Personal des					54		Garbage & res	fuse properly disposed, facilities maintained		
41		s: properly used & stored			(3)	55	X		ties installed, maintained, & clean		
42	Washing fruit	ts & vegetables				56		Adequate ven	ntilation & lighting, designated areas used		
Тур	e of Operation:								License Posted:	(Y)	N
Disc	ussion with Per	son-in-Charge							Follow-Up:		
									, ,		N
									Follow-Up Date: 14 0	کالافت	
Sign	ature of Person	in Charge: Yatti Hous	DV	1					Date: 8-/7-20	ı	
Signature of Person in Charge: Patti Houson Signature of Inspector: Support Signature of Inspe									Date: 8-14-2.020		\neg



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



Esta	ablishmer	The Hom	estead			Date: 2	1-17-2020 Pag	e <u>Z</u> o	<u> </u>
Add	ress: 64	IL D.W. High	nway			Complia	ance Achieved:		
					TEMPERATURE OBSERVATIONS	T m T	Item / Location		Temp.
		Item / Location	1	Temp.	Item / Location	Temp.	· Item / Lucation		Yemb.
		en lin-line		40					
		uen Hrauseri		39					
CDI	40ma	to lice betn	מט (מיטופר	40'					
		<u> </u>							
		·			CONTRACTOR CONTRACTOR AND	LONG			
			1		OBSERVATIONS AND/OR CORRECTIVE ACT	IUNS		Dated 0	Corrected
٧	Item Number	Section of Code	1		Description of Violation				cos
			Kitonen	:					
						21	a dema describe		-
24	160				of to muchine is soiled w				-
<i>c.</i>	55	6-501.12	walk-i	n refr	igerator floor soiled with fo	ood deb	iris remove all	-	
			ilems f	rem (walk in for thorough floor	Ckamin	y of entire walk in.		
C	55	h . 701.13			s coving along Hoors in				
	33	8.76							
					ig in waterwashing area.		- Inh Idlan - heloca		
PG	44.	4-202.1	COSCIVE	प राष	refic sour cream containers	Anrond	NOOT KITCHEN DEILING		
			used to	store	c food items these contains	is als i	not cleated fol		
			(C-USE	. disc	ord all placetic good cheam co	ntainers	and ensore food		
			Cherno	Carre e	only stored in tood grade	contain	es		
_		401.4	-1001	-20Ch	sinks in kitchen and salad	/mate	y area not properly		
<u>C</u>	10	6-501,19-	HONG.	DON'T S	sines in gradult date states	1 Post	11		
		<u> </u>	labeled	with w	signage. "Hard work st	DIC OUR	3		
			Basemen	+:1					
C	55	6-501 12"	Correase	Arms	: exterior of grease trappe	VPCS / AT	ca around greate		
		6-301.12			ed with nearly occombilat	3 4 2 = = = =	arrence. Area needs		
\dashv		L	Mab c	OK-SELLO	NEW CAPTURE CONTROLLED	1011 21	Olara and Cons		
			to be	protes	sionally cleaned to ensure a	M Greek	S IS HEMICKED ATIONS		
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Sicr	nature of t	Person in Charge:	Post	71	touston		Date: 8-/	7-20	2
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