

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



Est	ablish	ment: Re	eds Ferry Market	I	Date 3/1/21 Page 1			Pag	ge 1 of 2	2 No. of Risk Factor/Intervention Violations			
Add	iress:	LOI DV	u Highway	-	Гіте	in:ı	A:eo	Tim	e out l':30	No. of Repeat Risk Factor/Intervention Violation	s Ø		
			erson serfa	F	Risk (Cat	egory:	C		Total Violation	S		
Em				_				_	14-5311	Inspection Status: Green Yellow Red	-		
Insi	ection	n Type:	Routine Re-inspection Pre-o	peration					vestigation	Complaint Other			
		, , p	FOODBORNE ILLNESS RI			A		_					
			Circle designated compliance status (IN, OUT,					2022		in appropriate box for COS and/or R			
			IN = in compliance OUT= not in compliance NO					appl					
	17	04-4											
Com	piianci	e Status	Supervision	cos	R	+	Com	plian	ice Status	Protection from Contamination	S R		
1	TNO	IT	Person in charge present, demonstrates knowledge and		T	1	15-	T0	OUT N/A NO	Food separated and protected			
2	-	JT N/A	Performs duties Certified Food Protection Manager		+	\dashv	16		OUT N/A	Food-contact surfaces cleaned and sanitized			
		3111171	Employee Health			1	17	$\overline{}$	OUT WAND	Proper disposition or returned, previously served,	_		
_	[6]. a.	177	Management/food employees & conditional employee;		_	+		1,,		reconditioned & unsafe food			
3	(1)101		knowledge, responsibilities and reporting		╀	-		1	-	Time / Temperature Control for Safety			
4	(IN OI		Proper use of restriction and exclusion	+	+	-	18	_	OUT N/A NO	Proper cooking time and temperature	-		
-	Lingitot	71	Procedures for responding to vomiting and diamheal events Good Hygiene Fractices			-	19	-	OUT N/A NO	Proper reheating procedures for hot holding Proper cooling time and temperatures	-		
6	IN OL	JT NO	Proper eating, tasting, drinking, or tobacco use	1	1	+	21	_	OUT N/A	Proper hot holding temperatures			
7	IN OL	$\overline{}$	No discharge from eyes, nose, mouth			+	22	1000	OUT N/A NO	Proper cold holding temperatures			
<u> </u>			Preventing Contamination by Hands			1	23	-	DUT N/A NO	Proper date marking and disposition			
8	INOU	JT (O)	Hands clean & properly washed		T	1	24		OUTNANO	Time as a Public Health Control: procedures and records	1		
9	IN OL	JT N/A NO	No bare hand contact with RTE food		1	1				Consumer Advisory	-		
10	(IN)OL	JT T	Adequate handwashing sinks properly supplied & accessible	,		1	25	IN	OU (N/A)	Consumer advisory provided for raw/undercooked foods	T		
			Approved Source					1.		Highly Susceptible Populations			
11	(II) OL		Food obtained from an approved source				26	IN	OUT (VIA)	Pasteurized foods used; prohibited foods not offered			
12		IT N/A NO	Food received at proper temperature]			Foo	d / Color Additives and Toxic Substances			
13	(IN)Or	Τ <u></u> Τυ	Food in good condition, safe & unadulterated						OUT (VA)	Food additives; approved and properly used			
14	IN OL	IT (IA)IO	Req. records available: shell stock tags, parasite destruction						UT N/A	Toxic substances properly Identified, stored and used			
	Ris	sk factors a	re improper practices or procedures identified as the tributing factors of foodborne illness or injury. Public I are control measures to prevent foodborne illness or i	most		L			C	onformance with Approved Procedures			
	Inte	erventions	are control measures to prevent foodborne illness or i	njury.			19	IN-	OUT	Compliance with variance/specialized process/HACCP			
				GOOD R	ETA	IL I	PRACI	CICES	Š				
			Good retail practices are preventative measure										
Mai	k "X" in	box if num	bered item is not in compliance Mark "X" on a	ppropria	te box	(foi	COS	and/o	T COS	=corrected on-site during inspection R=repeat violati	ion		
Com	oliance	Status		cos	R	Ţ	Comp	oliano	ce Status	cos	3 R		
			Safe Food and Water					100		Proper Use of Utensils			
30			eggs used where required	-	<u> </u>		43	ļ		ils properly stored			
31			from approved source	+			44	-	-	ipment & linens: properly stored, dried, & handled	\perp		
32		Variance ob	tained for specialized processing methods			-	45	-		ingle-service articles: properly stored & used	\dashv		
20		D	Food Temperature Control	· · ·			46	<u> </u>	Gloves used				
33			ing methods used: adequate equipment for temp, control roperly cooked for hot holding	+			47		Fooderdee	Utensils, Equipment and Vending			
34			awing methods used	+-	-		47 ·	\vdash		igned, constructed, & used	+		
36	-		awing metrods used	-	-		49	\vdash		g: installed, maintained, & used: test strips	+		
			Food Identification				-	_	Traiswasiii)	Physical Facilities			
37		Food proper	ly labeled: original container	T			50		Hot & cold wa	ater available adequate pressure			
			Prevention of Food Contamination		-		51			talled, proper backflow devices	\dashv		
38		Insects, rode	ants, & animals not present	T			52		Sewage & wa	aste water properly disposed	\neg		
39		Contaminati	on prevented during food preparation, storage & display				53		Toilet facilitie	s properly constructed, supplied, & deaned			
40		Personal de	enliness				54		Garbage & re	efuse properly disposed, facilities maintained			
41		Wiping doth	s: properly used & stored			V	55	7	Physical facil	ities installed, maintained, & clean			
42		Washing fru	its & vegetables				56		Adequate ver	ntilation & lighting, designated areas used	Щ		
Typ	e of O	peration:								License Posted:	N		
											114		
Dis	cussio	n with Pe	son-in-Charge:							Follow-Up:	N		
										Follow-Up Date:			
Sia	nature	of Person	in Charge:							Date: (03/01/202)			
		of Inspec								9701100	-		
JIG	iatule	or mspec	w. m							Date: 3/1/202			
			1. (. —										



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



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Ad	dress: 💪	ol Dw His	hway					nce Achieved:		
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	Item				DBSERVATIONS AND/O					
V	Number	Section of Code				Description of Violati	on			d Corrected or COS
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Est	ablishment: 롣	Date 12 Page 1 of Z No. of Risk Factor/Interver				ntion Viola	tions	7													
		Wilford Road Unit 4C	7	ime i	n§'	00	Time	oul O	No. of Repeat Ris	k Factor/Interve	ntion Viola	tions	ex.								
Ow	ner/Permit Holo	ler: Kermiro	F	lisk C	ate	gory:	R		-		Total Viola		7								
Em	100	1) -11 ()		hone		-			Inspection Status:			ed									
Ins	pection Type:	Routine Re-inspection Pre-ope			_	Illnes	se Inv	estigation	Complaint	Other	1011										
		FOODBORNE ILLNESS RISE			AN			-		Other											
		Circle designated compliance status (IN, OUT, NA							in appropriate box for	COS and/or R											
		IN = in compliance OUT= not in compliance NO = :	not obs	erved	N//	= not	applic	able COS =	corrected on-site R =	repeat violation											
Com	pliance Status		cos	R	Т	,		e Status				cos	I B								
		Supervision	1000	1.0		00111	Pilatio	o otatao	Protection from (ontamination		003	IK								
1 (IN UT	Person in charge present, demonstrates knowledge and performs duties				15	(ÎN)	OUT N/A NO	Food separated and pro	otected			T								
2	(N OUT N/A	Certified Food Protection Manager			a	F16)	INC	OUT WA	Food-contact surfaces	cleaned and sanitized	 		+								
		Employee Health				17	INC	ON AW TU	Proper disposition or re reconditioned & unsafe		ved,		\top								
3	(IN OUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting	· · · ·		1				Time / Temperature			_	-								
4	IN DUT	Proper use of restriction and exclusion				18	INC	OUT N/A TUC	Proper cooking time an				Т								
5	(N) UT	Procedures for responding to vomiting and diarrheal events				19	-	OUT N/A NO		g procedures for hot holding											
		Good Hygiene Practices				20	INC	UT N/ANO	Proper cooling time and				\vdash								
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use				21		UT N/A NO	Proper hot holding temp	eratures			\top								
7	IN OUT (NO	No discharge from eyes, nose, mouth				22	(M)	ON A'N TU	Proper cold holding tem	peratures											
		Preventing Contamination by Hands				23	(IN Q	ON AND TU	Proper date marking an												
В	סא דעם או	Hands clean & properly washed				24	IN O	UT NA NO	Time as a Public Health	and records											
9	IN OUT N/A NO	No bare hand contact with RTE food					_		Consumer A												
10	(ÎN OUT	Adequate handwashing sinks properly supplied & accessible				25	N	UT N/A	Consumer advisory prov	ided for raw/underco	oked foods										
		Approved Source							Highly Susceptible	Populations											
11 (IN)DUT	Food obtained from an approved source				26	INO	UT(N/A	Pasteurized foods used:	prohibited foods not	offered										
12	IN OUT N/A NO	Food received at proper temperature					d / Color Additives ar	id Toxic Substanc	269												
13	TUENT	Food in good condition, safe & unadulterated			27 IN OUT V/A Food additi		Food additives: approve	and properly used													
14	IN OUT N/A NO	Req. records available: shell stock tags, parasite destruction			D	28	IN 6	UTN/A	Toxic substances proper	substances properly identified, stored and used											
	Risk factors a	ire improper practices or procedures identified as the mo	st					Co	informance with App	roved Procedures	}										
	Interventions	are improper practices or procedures identified as the ma tributing factors of foodborne illness or injury. Public Hea are control measures to prevent foodborne illness or inju	alth Iry.	- 1		19	INO	U (N/Å)	Compliance with variance	e/specialized process	HACCP										
		CO	OD R	ETAE	r. P	RACT	TCFS						4								
	· · · · · · · · · · · · · · · · · · ·	Good retail practices are preventative measures			_	-		s chemicals :	and physical objects into f	node											
iviar	k "X" in box if num	nbered item is not in compliance Mark "X" on app		_					corrected on-site duri		R=repeat vi	olation									
`amı	liance Status		con		_	0	lla a a a	Oleter													
201116	Mance Culus	Safe Food and Water	cos	2		Comp	nance	3izius	Proper Use of	Iltanoile	, j	COS	Ř								
30	Pasteurized	eggs used where required			i	43		In-use utensi	is properly stored	Q DOLLEGILO			r i								
31	Water & Ice	from approved source		\neg		44			ipment & linens: properly	stored, dried, & handl	ed	\rightarrow	\vdash								
32	Variance ob	tained for specialized processing methods			-	45			ngle-service articles: prop			\neg	\Box								
		Food Temperature Control				46		Gloves used				\neg	\Box								
33	Proper cool	ing methods used; adequate equipment for temp. control							Utensils, Equipment	and Vending		- 21									
34	Plant food p	roperly cooked for hot holding			-	47 ·		Food and no	n-food contact surfaces cl			$\overline{}$									
35	Approved th	awing methods used			ļ	48			gned, constructed, & used			\neg	\neg								
36	Thermomete	ars provided and accurate			-	49		Warewashing	g: installed, maintained, &	used: test strips		$\overline{}$	\Box								
		Food Identification			İ				Physical Fac												
37	Food proper	ly labeled: original container				50		Hot & cold wa	ater available adequate pr	essure											
		Prevention of Food Contamination				51		Plumbing inst	alled, proper backflow de	rices											
38	Insects, rode	ents, & animals not present				52		Sewage & wa	ste water properly dispos	ed											
39	Contaminati	on prevented during food preparation, storage & display				53		Toilet facilities	s properly constructed, su	oplied, & cleaned											
40	Personal cle	i		ĺ	54		Garbage & re	fuse properly disposed, fa	cilities maintained												
41	Wiping cloth				55		Physical facili	ties installed, maintained,	& dean												
42	Washing frui	its & vegetables				56		Adequate ver	tilation & lighting, designa	ted areas used											
Tvn	e of Operation:					•				License Posted:	7	77									
-	· ·	i- Ob			_							<u> </u>	<u>-</u>								
LISC	ussion with Per	rson-in-Charge:								Follow-Up: 🕻 (Jan 2 () N	N								
									1	Follow-Up Date:											
Sian	ature of Person	in Charge:								Date:			\dashv								
				_																	
Sign	ature of Inspec	or: (a)								Date: 3/29	12021										
											of Inspector: Date: 3/29/2021										



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



Es	tablishme	It El Topel	NO			Date	3/29/2021	Pag	e 1 , c	of _ Z _
Ad	dress: 🎠	Halford P	bad un	440		Com	pliance Achieved:			
					TEMPERATURE OBSERVATIONS					
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					OBSERVATIONS AND/OR CORRECTIVE ACTIO	NS				
V	Item	Section of Code			Description of Violation				Dated C	Corrected
	Number	_		-					01	cos
			Kitchen	. 7						
PR	14	A-601.11 -	- interio	Dr 0	fice machine heavily so	halic	inith mold in	leforis	٠,	
			decin	#4 10 C	sanitize interior of ice		Classes - commenter	-	_	
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Signa	ature of Pa	erson in Charge:			(1) (A)		D-1			
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oigna	ature of In	specior:			C II, N		Date: 31.2	9/2	12	
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Establishment: ShawS 47 3505		Date	3/4	30/2	Pa	age 1 of _2_	No. of Risk Factor/Intervention Violatio	ns 💋			
Address: 540 DW HIGHWAY-	1	ime	ing	/ 'ECC	Tin	me out 2:30	No. of Repeat Risk Factor/Intervention Violatio	ns Ø			
Owner/Permit Holder: 6 hows sopermentet				egory	-		Total Violatio				
Email: 53505 C 90 at Shows com	_				-		Inspection Status: Green Yellow Red				
Inspection Type: (Routine) Re-inspection Pre-ope			٠. ا		-	Investigation					
FOODBORNE ILLNESS RISK			2 41			-	Complaint Other				
Circle designated compliance status (IN, OUT, N/					7 ILDELLAN		in appropriate box for COS and/or R				
IN = in compliance OUT= not in compliance NO = r					tanı						
				A - 110	rabi	plicable CO3 =	corrected on-site K - repeat violation				
Compliance Status Supervision	cos	R	+	Con	nplia	ance Status		OS R			
1 Person in charge present, demonstrates knowledge and			-	45	19	3	Protection from Contamination				
penorms duties	 	-	_	15		OUT N/A NO	Food separated and protected				
2 (N) DUT N/A Certified Food Protection Manager		_	+	16	_	N OUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,	+			
Employee Health				17	II I	N OUT WANO	reconditioned & unsafe food				
Management/food employees & conditional employee; knowledge, responsibilities and reporting						7	Fime / Temperature Control for Safety				
4 UNOUT Proper use of restriction and exclusion				18	II	N OUT N/A NO	Proper cooking time and temperature				
5 INDUT Procedures for responding to vorniting and diarrheal events				19	11	N OUT N/A NO	Proper reheating procedures for hot holding				
Good Hygiene Fractices			4	20	-/-	N OUT N/A NO	Proper cooling time and temperatures				
6 IN OUT NO Proper eating, tasting, drinking, or tobacco use		 	4	21	100	N)OUT N/A NO	Proper hot holding temperatures	\perp			
7 IN OUT (NO) No discharge from eyes, nose, mouth		<u>L</u>	4	22	- Des	NOUT N/A NO	Proper cold holding temperatures	\rightarrow			
Preventing Contamination by Hands	عر خسم اسم	1	-	23	_	ON AN TUCK	Proper date marking and disposition	\perp			
8 DOUT NO Hands clean & properly washed		L.	4	24	11/	N 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		ļ	-				Consumer Advisory				
10 INOUT Adequate handwashing sinks properly supplied & accessible			-	25	T	V DUT N/A	Consumer advisory provided for raw/undercooked foods	\perp			
Approved Source		_	-	-		S	Highly Susceptible Populations				
11 INOUT Food obtained from an approved source 26 INOUT N/A Pasteurized foods used; prohibited foods not offered 12 INOUT N/ANO Food received at proper temperature 13 INOUT N/ANO Food received at proper temperature											
A 1			-		Ι.,	-	d / Color Additives and Toxic Substances				
		-	4	27	_	NOU (N/A)	Food additives: approved and properly used	+			
			┨ .	28		AN TUQUE	Toxic substances properly identified, stored and used				
Risk factors are improper practices or procedures identified as the me Prevalent contributing factors of foodborne illness or injury. Public Hea Interventions are control measures to prevent foodborne illness or inju	ost alth		П		_	Co	informance with Approved Procedures				
Interventions are control measures to prevent foodborne illness or inju	иу.		П	19	IN	NOUT N/A	Compliance with variance/specialized process/HACCP				
GO	OD R	ETA	iLi	PRACI	FICE	ES					
Good retail practices are preventative measures t	o contro	l the	addit	lion of p	athog	gens, chemicals, a	and physical objects into foods.				
Mark "X" in box if numbered item is not in compliance Mark "X" on app	ropriate	e bo	cfor	COS	and/	or COS =	-corrected on-site during inspection R≖repeat viola	non			
Compliance Status	cos	R	Ţ	Com	olian	nce Status	\co	SR			
Safe Food and Water		- 11					Proper Use of Utensils	U IX			
30 Pasteurized eggs used where required			Î	43	Ī	In-use utensi	s properly stored				
31 Water & Ice from approved source			1	44		Utensils, equi	ipment & linens; properly stored, dried, & handled				
32 Variance obtained for specialized processing methods				45		Single-use/si	ngle-service articles: properly stored & used				
Food Temperature Control				46		Gloves used	properly				
33 Proper cooling methods used: adequate equipment for temp. control				-			Utensils, Equipment and Vending				
34 Plant food properly cooked for hot holding				47 ·	-	Food and nor	i-food contact surfaces cleanable,				
35 Approved thawing methods used				48		Properly design	gned, constructed, & used				
36 Thermometers provided and accurate				49		Warewashing	: installed, maintained, & used: test strips				
Food Identification					_		Physical Facilities				
37 Food properly labeled: original container			١,	50		+	iter available adequate pressure				
Prevention of Food Contamination				51	-	 	alled, proper backflow devices	\dashv			
38 Insects, rodents, & animals not present	\rightarrow			52	-		ste water properly disposed				
39 Contamination prevented during food preparation, storage & display		_		53	-		s properly constructed, supplied, & cleaned	\rightarrow			
40 Personal cleanliness 41 Wiping cloths; properly used & stored				54	-		fuse properly disposed, facilities maintained	+			
42 Washing fruits & vegetables			Œ.	55	v/		ties installed, maintained, & clean				
42 Area wild little a Aedelanies			~	56),	Adequate ven	tilation & lighting, designated areas used				
Type of Operation: retail 6 rocen							License Posted:	N			
Discussion with Person-in-Charge:		_									
Discussion with Fersonal Policings.							Follow-Up:	N			
							Follow-Up Date:	ľ			
Signature of Person in Charge: 70							Date: 3/30/21				
								—			
Signature of Inspector:							Date: 3/30/2021				



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



Esta	blishme	int: 2 hams +	-3605				Date: 3 / 3	obzor	Page _ Z _	of 2
Addı	ress: 5	HO DOU HI	ghway					e Achieved:		
						URE OBSERVATION				
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v	Item	10.11.70.7	<u> </u>		OBSERVATIONS AN				I Pered	I Corrected
<u> </u>	Number	Section of Code				Description of Violation	on			r COS
			pairs	cooler						
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			nn	100	> Kill	Bolden		Date: 3		
ignati	ure of In	spector:	- 5-1		~			Date: 3/	30/2021	i



HEALTH DIVISION

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



FOOD ESTABLISHMENT INSPECTION REPORT

Datez / 2/1/ Page 1 of No.

	4.15 / 4						1	0	THE OWI				
	ablishment:			Date	3/3	121	Page	e 1 of 2	No. of F	Risk Factor/Inte	ervention Viol	ations	Ø
Add	dress: FOF	milford read unit 3C		Time	in:ţ	1,00	Time	out(1:57	No. of Repeat F	Risk Factor/Inte	ervention Viol	ations	12
Ow	ner/Permit Hold	derical under		Risk (Total Viol		
Em				Phon	el	051	310	2-4407	Inspection Statu	s: Green	Yellow F	Red	
Ins	pection Type:	Routing Re-inspection Pre-op			(B			estigation	Complain			100	
		FOODBORNE ILLNESS RIS			AN					. Othe			
		Circle designated compliance status (IN, OUT, N					10111		in appropriate box f	or COS and/or F	2		
		IN = in compliance OUT= not in compliance NO =					t applie						
Com	pliance Status		icos							TOPOUC TIOIGN			
		Supervision	1003	R		COM	ibilanc	e Status	Protection from	1 Contamination	n	cos	R
1	(IN)OUT	Person in charge present, demonstrates knowledge and performs duties	T		7	15	TING	OUT N/A NO	Food separated and			T	T
2	UNOUT N/A	Certified Food Protection Manager	-	-	1	16		DUT N/A	Food-contact surface		itizad	+	+
		Employee Health			1	17		OUT N/A NO	Proper disposition or	returned, previous		+	+
3	™ DUT	Management/food employees & conditional employee;			1		1.11		reconditioned & unsa		0		
4	OUT.	knowledge, responsibilities and reporting Proper use of restriction and exclusion	-	-	-		1		Time / Temperatur		ifety		
5	INCUT	Procedures for responding to vomiting and diarrheal events	-	+-	-	18	_	OUT N/A(NO)	Proper cooking time			-	
		Good Hygiene Practices			-	20		OUT N/AND	Proper reheating pro Proper cooling time a		ding	+	+
6	IN OUT 10	Proper eating, tasting, drinking, or tobacco use	T	T	1	21	_	OUT N/A TU	Proper hot holding te			+	+
7	IN OUT 60	No discharge from eyes, nose, mouth			1	22	(IN)	OUT N/A NO	Proper cold holding t	<u> </u>		+	+
		Preventing Contamination by Hands				23	IN	UT N/A NO	Proper date marking	and disposition			+
8	NO TUO	Hands clean & properly washed		1		24	INO	UTNANO	Time as a Public Hea	Ith Control: proced	ures and records		
9	NOUT N/A NO	No bare hand contact with RTE food		-		-			Сопаштег	Advisory			
10	(D) DUT	Adequate handwashing sinks properly supplied & accessible			1	25	INO	UT (VA)	Consumer advisory p		lercooked foods		
11	TUOUT	Approved Source Food obtained from an approved source	T	_	1	26	INO	UTNA	Highly Suscepti				
12	IN OUT N/A NO	Food received at proper temperature	-	+		20	INC		Pasteurized foods us d / Color Additives				1
13	INJOUT	Food in good condition, safe & unadulterated	1	1	1 1	27	INO	UT(N/A	Food additives; appro			T	7
14	IN OUT N/A NO	Req. records available: shell stock tags, parasite destruction			1 1					perly identified, store		_	+
	Risk factors a	re improper practices or procedures identified as the n ributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or in	nost					Co	onformance with A	pproved Proced	ures		
	Interventions a	are control measures to prevent foodborne illness or in	eaith jury.		Н	19	INO	UT N/A	Compliance with varia	nce/specialized pro	cess/HACCP		
		G	OOD R	ETAI	L P	RACT	TICES						
	15.5	Good retail practices are preventative measures						s, chemicals, a	ind physical objects int	o foods.	· · · · · · · · · · · · · · · · · · ·		
Man	C'X" in box if num	bered item is not in compliance Mark "X" on ap	propria	ite box	for (COS a	and/or	COS =	corrected on-site d	uring inspection	R=repeat v	iolation	
omp	liance Status		GOS	R		Comp	liance	Status				cos	R
30	Doot in d	Safe Food and Water		,					Proper Use	of Utensils			
31		eggs used where required from approved source	-	\vdash	-	43			s properly stored				
32		tained for specialized processing methods	+	\vdash	ŀ	45			ipment & linens: proper ngle-service articles; pr				
		Food Temperature Control	-		ľ	46		Gloves used		openy stored is use			
33	Proper coolin	ng methods used: adequate equipment for temp, control		\Box					Utensila, Equipme	ent and Vending			
34		operly cooked for hot holding				47 ·		Food and nor	-food contact surfaces	cleanable,			
35		awing methods used				48	\Box		gned, constructed, & us				
36	I hemomete	rs provided and accurate			-	49		Warewashing	installed, maintained,				
37	Food propert	Food Identification y labeled: original container			-	50	Ţ	Hot & cold	Physical F ter available adequate				
		Prevention of Food Contamination		-	-	51			alled, proper backflow				
38	Insects, rode	rits, & animals not present				52			ste water properly disp				-
39	Contamination	on prevented during food preparation, storage & display				53		Toilet facilities	properly constructed.	supplied, & cleaned			\dashv
40	Personal des	thlinese				54		Garbage & ret	use properly disposed,	tacilities maintaine	d		\exists
41	Wiping cloths		Ш		55		Physical facilit	ies installed, maintaine	d, & clean				
42	washing fruit	s & vegetables				56		Adequate vent	tilation & lighting, desig	nated areas used			
Туре	of Operation:	Balery							<u> </u>	License Post	red: 7	VIA	<u></u>
	ussion with Per										.urstr	-7	
										Follow-Up:		1 (7
		Ma .								Follow-Up Da	ate:		
		in Charge: Sandill								Date: 3	3 /21		
Sign	ature of Inspect	OT:								Date: 2/	2/7/21		\neg
								_			al WL		



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



Es	itablishmer	it creme >x	French Patin	Son Q	Da	ate: 3/3/2021	Pag	e <u>2</u> c	of
Ad	ldress: 📭	It wilton	Road 3C		C	ompliance Achieved:3 13	1202 1	1	
				TEMPERATURE OBSERV	ATIONS	313	1002		
		Item / Location	Temp.	Item / Location	Тетр	. Item / Loca	ation		Temp.
7	deor	/ dovah	39'		_				
			0	BSERVATIONS AND/OR CORREC	TIVE ACTIONS				
V	item	Section of Code		Description of	f Violation				Corrected
	Number			<u> </u>	<u> </u>			or (cos
		<u></u>	<u> </u>						
	<u> </u>								
			120	Ulalations obs	served do	ring time ins	14352	00	
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 ::	atura of D	roon in Charact	Tall Miles				10 1 = 1		—
		erson in Charge:	Lebellin	_		Date: 3	13/21		
sign	ature of In	spector:	////			Date: 2	13/202	10	



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



Est	tablishment: 🔟	errimaul	Valle 1	Bantia C	wor a	Pate:	1/5/21	Pag	e 1 of _ 2_ _	No. of Ri	sk Factor/Int	tervention	Violatic	ns (3
Ad		loston fost	-					Time	e ou to:3 0	No. of Repeat Ris	sk Factor/Int	tervention	Violatic	ons /	05
		er: Herrime		ed Rential U	15cm	Risk C	ategory	:0				Total	Violatio	ons	2
	ail: (ne.He.)	ukaustzem	VBC. ora	7		Phone	(593	<u>;) c</u>	238	Inspection Status:	Green	Yellow	Red		
Ins	pection Type:	(Routine)	Re-inspection	on Pre-op					vestigation	Complaint	Othe	er	-		
				NE ILLNESS RIS	K FAC	CTORS						-			
		Circle designa		status (IN, OUT, N						in appropriate box for	COS and/or	R			
		IN ≈ in complia	nce OUT= not i	n compliance NO =	not ob	served	N/A = no	t appli	icable COS =	corrected on-site R =	repeat violat	ion			
Com	pliance Status				cos				ce Status				- 10	os	R
		Su	pervision			7 1 15		print	oe otatus	Protection from	Contaminate	ən		03	L IX
1	IN OUT_	Person in charge pr performs duties	esent, demonstrat	es knowledge and			15	ÍN	DUT N/A NO	Food separated and p	otected				
2	IN OUT (I/A)	Certified Food Prote	ection Manager		+-		16	(IN	OUT N/A	Food-contact surfaces	cleaned and sa	nitized	_	\neg	-
		Empl	oyee Health				17	IN	OUT NA NO	Proper disposition or re		sly served.			
3	(NOUT	Management/food e			1					reconditioned & unsafe Linue / Temperature		afute			
4	TUOUT	knowledge, respons Proper use of restric			+	-	18	LINI	OUT N/A NO	Proper cooking time ar	· · · · · · · · · · · · · · · · · · ·	attry			H
5	(IN)OUT	-		and diarrheal events	+		19	_	OUT N/A NO	Proper reheating proce		olding		\dashv	\vdash
		Good Hy	giene Practices				20	-	OUT N/A(NO	Proper cooling time an		, ioning	-+		\neg
6	IN OUT	Proper eating, tastin	g, drinking, or toba	acco use		T	21		OUT N/A NO	Proper hot holding tem			$\overline{}$	\neg	_
. 7	IN OUT (NO	No discharge from e	yes, nose, mouth				22	ÍÑ	OUT N/A NO	Proper cold holding ten	peratures				
		Preventing Con	tamination by	Hands			23	IN 0	OUT N/A(NO)	Proper date marking ar	nd disposition				
8	IN OUT (NO)	Hands clean & prope	rly washed				24	IN 0	ONAMICUO	Time as a Public Health	Control: proce	dures and rec	cords		
9	IN OUT N/A (O)	No bare hand contact	t with RTE food							Consumer !	ldvisory				
10	INDUT			supplied & accessible		Щ	25	IN C	DUTATA	Consumer advisory pro	vided for raw/ur	idercooked fo	ods		
	Visit and the second		oved Source				-			Highly Susceptible					
11	INJOUT	Food obtained from a		0	-	+	26	IN	OUT(N/A)	Pasteurized foods used					_
12	IN OUT NA NO	Food received at pro			+	+		1 101 1		d / Color Additives a					
14	IN OUT NAME	Food in good condition			-	+	27	-05	OUT N/A	Food additives: approve				\rightarrow	\dashv
14				, parasite destruction	<u> </u>		28		OUT N/A	Toxic substances prope			3		-
	Prevalent conf	re improper practice tributing factors of fo are control measure	sodporne illuess	s identified as the n s or injury, Public Hi	nost ealth			_		onformance with Ap	proved Proce	dures			_
	Interventions 8	are control measure	s to prevent foo	dborne illness or in	ijury.		19	IN C	DUT (MA)	Compliance with variance	e/specialized p	rocess/HACC	P		
							L PRACI								
Mor	k "Y" in issay if name	Good n ibered item is not in		preventative measures Mark "X" on an						and physical objects into			4-7-1-	47	_
		bered Reil 13 Hot Wi	COMPILATICE	Walk A On a	phopne	ate DOX	01 003 8	allu/Ol		corrected on-site dur	ing inspection	i K=rep	eat viola	шоп	-
Com	oliance Status	6.6 F	1 377		COS	-R	Comp	Hanc	e Status				jod	23	R
30	Dacte Francis	eggs used where requ	od and Water		1	1	42	I	1 1	Proper Use of	Utensils				
31		from approved source			-	+-1	43			ls properly stored ipment & linens; properly	stared dried P	handlad	-+	\dashv	\dashv
32		tained for specialized p		e e e e e e e e e e e e e e e e e e e	_	+-	45	-		ngle-service articles: properly			+	\dashv	-
			erature Contro				46	-	Gloves used		ocity stored a d	, pad	-+	+	
33	Proper cooli	ng methods used: adec			1	T				Utensile, Equipmen	t and Vendin	2	-		\dashv
34	Plant food p	roperly cooked for hot l	holding			\top	47		Food and nor	n-food contact surfaces c		D	$\overline{}$	\top	
35	Approved th	awing methods used					48		-	gned, constructed, & use			\top	_	\dashv
36	Thermomete	ers provided and accura	ate	_			49		Warewashing	: installed, maintained, &	used: test strip	s		\top	\neg
		Food Id	lentification							Physical Fa	cilities				
37	Food proper	ly labeled: original cont	ainer			Ш	50		Hot & cold wa	ater available adequate p	ressure				
		Prevention of F	ood Contamin	ation			51		Plumbing inst	alled, proper backflow de	vices				
38	Insects, rode	ents, & animals not pre-	sent				52		Sewage & wa	ste water properly dispos	ed				
39		on prevented during for	od preparation, sto	rage & display		Ш	53		Toilet facilities	s properly constructed, su	ipplied, & dean	эd	\bot		
40	Personal cie				_	i.i.	54	<u> </u>	Garbage & ref	fuse properly disposed, f	acilities maintair	red			_
41		s: properly used & store	ed			-	55			ties installed, maintained				\perp	_
42	Washing frui	ts & vegetables					56		Adequate ven	tilation & lighting, design	ated areas used	I			_
Typ	e of Operation:	Function	HCUI								License Po	sted:	(\$	N AI	\exists
			-11											宍	Н
UIS(cussion with Per	son-in-charge:									Follow-Up:		Y	V	/
				0							Follow-Up [Date:			
Sign	nature of Person	in Charge:	Inoth.	lukanı	F						Date: 3	E 2021			\neg
	nature of Inspect	or O	inam,	MUNICION	~~~\ \ \							12100			\dashv
oigr	rature of trispect	v. Jan									Date: 3	15120	<u> </u>		
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Establishment: Marr	imack valle	Bapt	ist chor	En		Date:	31812021	P	age Z ,	of <u></u>
Establishment: Marr Address: 51 4 Bot	ston post 12	Cord				Com	pliance Achieved:	315120	21	
			TEMPE	RATURE OBSER						
Item / Loc	cation	Temp.		Item / Location		Тетр.	Item / I	ocution		Temp.
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		Oi	SERVATION	S AND/OR CORRI	ECTIVE ACTION	VS				
V Item Section of	of Code			Description	of Violation				I	Corrected COS
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		100 Ui	olations	pagetned	du rung t	ine	of inspecti	ron		
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		14	0. 10	1						
Signature of Person in C	harge:	the y	e laur	Fo			Date:	<u> 3/5/</u>	1001	
Signature of Inspector:	11.15		7	0			Date:	2/5/	2021	



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



Es	tablishment: 🔑	connecto A	Γ	Date 3	16/21	Pag	e 1 of _2	No. of Ris	k Factor/Intervention Vi	olations	2
Ad	dress: 7130	Hilford Road	7	Time in	1,00	Tim	e out:[.130		k Factor/Intervention Vi		ez.
Ои	vner/Permit Hold	der: Nexdire LLC		Risk Ca		_			Total Vi		D
	nail:			Phone:			2000	Inspection Status:	Green Yellow	Red	بعر
Ins	pection Type:	Routine Re-inspection Pre-op			-,-,-		vestigation	Complaint	Other		
		FOODBORNE ILLNESS RIS					_		Other		
		Circle designated compliance status (IN, OUT, N						in appropriate box for	COS and/or R		-
		IN = in compliance OUT= not in compliance NO =				t appli					
Corr	pliance Status		cos	R							
	^	Supervision		1 1	Con	ibiisiu	ce Status	Protection from (ontamination	cos	R
1	INDUT	Person in charge present, demonstrates knowledge and performs duties	T		15	(IN	OUT N/A NO	Food separated and pri			Т
2	IN OUT N/A	Certified Food Protection Manager	+	+	16	4	OUT N/A			\rightarrow	-
		Employee Health		-	17		OUT NIA NO	Food-contact surfaces Proper disposition or re	turned, previously served,	+-	+-
3	Ооит	Management/food employees & conditional employee;				1 114		reconditioned & unsafe			
4	(N)DUT	knowledge, responsibilities and reporting		1		-		fime / Temperature	Control for Safety		
5	THOUT	Proper use of restriction and exclusion	+		18	-	OUT N/A NO	Proper cooking time an			_
-	Likyon	Procedures for responding to vomiting and diarrheal events Guod Hygiene Practices			19	_	OUT N/A(NO)	Proper reheating proces			\vdash
6	IN OUT	Proper eating, tasting, drinking, or tobacco use	_		20	_	OUT N/AND	Proper cooling time and		+-	╁
7	IN OUT NO	No discharge from eyes, nose, mouth	+	21 IN OUT N/ANO Proper hot holding to 22 IN OUT N/A NO Proper cold holding							+-
		Preventing Contamination by Hands			23 INOUT N/A NO Proper cold hold					+	+
8 4	NOUT NO	Hands clean & properly washed	T		24	IN	OUT(N/A NO		Control: procedures and record	8	\vdash
9	IN OUT N/A NO	No bare hand contact with RTE food						Consumer A			
10	INDUT	Adequate handwashing sinks properly supplied & accessible			25	ATTY OF	DUT N/A	Consumer advisory prov	rided for raw/undercooked foods	;	
4.4	Leviour	Approved Source				_		Highly Susceptible	Populations		
11	IN OUT N/A NO	Food obtained from an approved source	-		26	IN C	OUT (A)		prohibited foods not offered		
13	TUGUIT	Food received at proper temperature Food in good condition, safe & unadulterated	-			Livia		d / Color Additives ar			
14	IN OUT N/A NO	Req. records available; shell stock tags, parasite destruction	-	\vdash	27		DUT (V/A)	Food additives; approved			
			noet		20		-		ly identified, stored and used		
	Prevalent cont	are improper practices or procedures identified as the matributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or inj	alth		19 IN OUTA Compliance with variance/specialized proces						
				EVEL A XX		<u> </u>		Compliance with variance	e/specialized process/HACCP		Щ
		Good retail practices are preventative measures	OOD RI								
Mar	k "X" in box if num	bered item is not in compliance Mark "X" on ap						corrected on-site duri		t violation	
omr	oliance Status		cos	R	lc						
	and a supplied to	Safe Food and Water	<u>[668]</u>		Count	manc	e Status	Proper Use of	Iltensile	cos	R
30	Pasteurized	eggs used where required			43		In-use utensil	s properly stored	Contains	T - 1	
31	Water & Ice	from approved source			44		Utensils, equi	pment & linens: property :	stored, dried, & handled		\Box
32	Variance ob	tained for specialized processing methods			45		Single-use/sin	igle-service articles: propo	erly stored & used		
		Food Temperature Control			46		Gloves used p	эгорегту			
33		ng methods used: adequate equipment for temp, control	\vdash		-	_		Utensils, Equipment	and Vending		
35		roperly cooked for hot holding awing methods used			47 .	-		-food contact surfaces cle			\dashv
36		ers provided and accurate			48			ned, constructed, & used installed, maintained, & i		+	
		Food Identification			43		warewasting.	Physical Fac			-
37	Food proper	ly labeled: original container			50		Hot & cold wat	ter available adequate pre		T	
		Prevention of Food Contamination			51			alled, proper backflow dev		+	\dashv
38	Insects, rode	ents, & animals not present			52		Sewage & was	ste water properly dispose	d		一
39		on prevented during food preparation, storage & display		_	53		Toilet facilities	properly constructed, sup	plied, & cleaned		
40	Personal clea				54		Garbage & refi	use properly disposed, fac	cilities maintained		_]
41 42		s: properly used & stored is & vegetables		_	55			es installed, maintained, d		+	_
-2	wasning non	is a vegetaines		_	56		Adequate vent	ilation & lighting, designar	ed areas used		
Туре	e of Operation: (aleteria							icense Posted;	(Y) N	7
	ussion with Per								follow-Up:	V	
									·	' ('	ונ
									ollow-Up Date:		
	ature of Person								Date: 3/11e/2/		
Sign	ature of Inspect	or:							Date: 3 / 1 6 /20	21	
									_ , , , , , , , , , , , , , , , , , , ,	 ,	



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



Esta	blishmer	t: PG Conrec	ction,			Date: 5	116/2021	Page	of <u>Z</u>
Addr	ess: 🖷	so kilford	Road			Complia	nce Achieved:	CZ071	
					TEMPERATURE OBSERVATIONS				
		Item / Location	-	Temp.	Item / Location	Тетр.	· Item / Location	0	Temp.
rau	u be	et/WUK-	in	33'					
					OBSERVATIONS AND/OR CORRECTIVE ACTIO	NS			
V	Item	Section of Code			Description of Violation			Dated (Corrected
-	Number				Description of violation				cos
							-		
				100	utopations observed duri	man 1 American	e at majordi	28.	
					Under 2	10 411	CO4 (MS/62CT		
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ionat	ro of D-	man in Ch	_/_/	-/-	/		1.	, / ,	
		son in Charge:	10				Date: 3 //	12/3	
ignatu	are of Ins	pector:			1		Date: 3/	6/2021	



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



Establishment: Fidelity					16/21	Pag	ge 1 or Z	No. of RISK Facto	r/intervention	violations	.(0)		
Add	ress: 1 spa	-	Time in:	1:36	Tim	ne outz: \S	No. of Repeat Risk Facto	Violations	8				
Owr	ner/Permit Holde	Trada Library		Risk Cal	legory:				Total	Violations	8		
		7 2	-		-		- / /	Jacon action Chalum Cross		Red			
Ema	HI YA CHOE	· Terranto @ compass - user, 10	MAI.	none:	(82)	H	91-6503	Inspection Status: Gree		reu			
Insp	ection Type:	Routine Re-inspection Pre-oper	ration	nal	Illnes	ss Ir	nvestigation	Complaint	Other				
		FOODBORNE ILLNESS RISK	FAC	TORS A	ND PU	BLI	C HEALTH I	TERVENTIONS					
		Circle designated compliance status (IN, OUT, N/A	NO.) for each	item		Mark "X" i	n appropriate box for COS an	d/or R				
		IN = in compliance OUT= not in compliance NO = n	ot obs	served N	/A = not	арр	olicable COS =	corrected on-site R = repeat v	iolation				
			1000	T = 1	lo.					lco	0 0		
Com	oliance Status	Ø	cos	R	Com	pliai	nce Status	Protection from Contami	notion	cos	SR		
		Supervision Person in charge present, demonstrates knowledge and	1		-	1			nation				
1	IN G UT	performs duties		\perp	15	111	N OUT N/A NO	Food separated and protected					
2	ÎN DUT N/A	Certified Food Protection Manager	<u></u>		16	IN	N OUT N/A	Food-contact surfaces cleaned a					
		Employee Health			17	IN	N OUT N/A NO	Proper disposition or returned, pr reconditioned & unsafe food	eviously served,				
3	(IN QUT	Management/food employees & conditional employee;		T				Fime / Temperature Control	for Safety				
		knowledge, responsibilities and reporting			40	Τ.,,	N OUT N/ANO						
4	TUC(NI)	Proper use of restriction and exclusion	<u> </u>		18		OUT N/ANO	Proper cooking time and tempera		-	+		
5	UNDUT	Procedures for responding to vomiting and diarrheal events	<u> </u>		19	+	100	Proper reheating procedures for		-	+-		
		Good Hygiene Practices			21	-	OUT N/A NO	Proper cooling time and temperatures	.ures	-+-	+-		
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use		+		-	OUT N/A NO						
7	IN OUT (NO)	No discharge from eyes, nose, mouth			22	+		Proper cold holding temperatures			-		
		Preventing Contamination by Hands			23	-12-	OUT N/A NO	Proper date marking and disposit					
ē (INJOUT NO	Hands clean & properly washed	_	-	2.4	III	ONAMATUO	Time as a Public Health Control:	procedures and re	cords			
9	IN OUT N/A NO	No bare hand contact with RTE food				V3	<u> </u>	Consumer Advisory					
10	INDUT	Adequate handwashing sinks properly supplied & accessible			25		TOUT N/A	Consumer advisory provided for		200S			
Approved Source							Highly Susceptible Populations 26 IN OUT (A) Pasteurized foods used; prohibited foods not offered						
11 IN OUT Food obtained from an approved source					26	I IIV		d / Color Additives and Toxic		<u>'</u>			
12					07	1 161	OUT (A)						
13 IN OUT Food in good condition, safe & unadulterated 14 IN OUT (IANO) Req. records available: shell stock tags, parasite destruction					27	-		Food additives: approved and pro Toxic substances properly identifi-	· · · · · · · · · · · · · · · · · · ·	200	+		
14	IN OUT WANO			28	III	N OUT N/A			,u				
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.								onformance with Approved I					
	Interventions a	Iry.		19	IN	NOUT (IA)	Compliance with variance/special	zed process/HAC0	P _				
		GC)OD 1	RETAIL	PRACI	TICE	ES						
		Good retail practices are preventative measures t	to cont	rol the add	lition of pa	athog	gens, chemicals,	and physical objects into foods.					
Mar	k "X" in box if num	bered item is not in compliance Mark "X" on app	propria	ate box fo	or COS	and/	or COS	corrected on-site during inspi	ection R=re	peat violation	on		
Corne	ilance Status		cos	-8	Come	oliar	nce Status	·		cos	R		
Jonn	menos otatas	Safe Food and Water	-					Proper Use of Utensi	lé .				
30	Pasteurized	eggs used where required			43		In-use utens	ils properly stored					
31	Water & Ice	from approved source			44		Utensils, equ	ried, & handled					
32	Variance ob	tained for specialized processing methods			45 Single-use/single-service articles: properly stored & used								
		Food Temperature Control			46								
33	Proper cooli	ng methods used: adequate equipment for temp, control					ending						
34	Plant food p	roperly cooked for hot holding			47 -		Food and no						
35	Approved th	awing methods used			48		Properly des	Properly designed, constructed, & used					
36	Thermomete	ers provided and accurate			49		Warewashin	Warewashing: installed, maintained, & used: test strips					
		Food Identification						Physical Facilities					
37	Food proper	ly labeled: original container			50	50 Hot & cold water available adequate pressure							
		Prevention of Food Contamination			51		Plumbing ins	talled, proper backflow devices					
38	Insects, rode	ents, & animals not present			52		Sewage & w	aste water properly disposed					
39	Contaminati	on prevented during food preparation, storage & display			53		Toilet facilitie	s properly constructed, supplied, &	cleaned		\perp		
40	Personal de	anliness			54		Garbage & re	efuse properly disposed, facilities π	aintained				
41	Wiping doth	s; properly used & stored			55		Physical faci	ities installed, maintained, & clean		_	$\perp \!\!\! \perp$		
42	Washing fru	its & vegetables			56		Adequate ve	ntilation & lighting, designated area	s used				
Тур	e of Operation:	cafeteria //					Licens	e Posted:	<u> </u>				
Disc	cussion with Per	rson-in-Charge:		//				Follow	-Up:	Y	(N)		
		/ 2/ ///						Follow	-Up Date:				
			//										
Sigr	nature of Person	in Charge: 1900	U						3/16/2	/			
Sia	nature of Inspec	tor: SA 9/1					-	Date:	3116121				
2191	TOTAL OF HISPOR								4				



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



Establishme	ent: Fidelity	٧	Date: 😽 👢	Date: \$16/202 Page 2 of				
Address:1	sparton w	ay_	Compliance Achieved: 3/11/1000					
			TEMPERATURE OBSERVAT	TIONS				
15a. /	Item / Location	Temp.	Item / Location	Temp.	Item / Location	a Temp.		
TOUM!	walk-in	34'			 			
<u> </u>								
						-		
		ORSE	ERVATIONS AND/OR CORRECTI	IVE ACTIONS				
v Item	Section of Code	0.000				Dated Corrected		
Number	Section of Code		Description of V	riolation		or COS		
								
_		400 13						
		MD Chalast	ens oppermed down	ng time of	instaction			
		Anna Canada						
			M. Co.					
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		1.5						
		* irreversible	tvermoneter					
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			<u> , , , , , , , , , , , , , , , , , ,</u>					
		///	_//					
		(N, N 1)	//,					
ignature of P	erson in Charge:	The the	W		Date: 3//	6/21		
ignature of Ir		-8/1			Date: 31 (4			
		17 11			G: N			



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



-			FOOD ES	IADLI	POLITA		TADE	ECHON	REPURI				
Es	tablishm	ent: 🗗	deling	1	Date 17 2		Pag	e 1 of	No. of Ris	k Factor/Intervention Viola	ations	9	
Ad	dress: 2	_ CO (H	tra way		Time ii	n:N.:coC	Tim	e outiz !Or	No. of Repeat Ris	k Factor/Intervention Viola	ations	05	
			er: Fidelity/ Pik Hospitaut			ategory	-				-		
				•			·/~			Total Viola			
<u> </u>	nail: 9 r		toff a compassion con	<u>n</u>	Phone	:(Inspection Status:	Green Yellow F	Red		
Ins	pection	Type:		operatio				vestigation	Complaint	Other	_		
			FOODBORNE ILLNESS R	ISK FAC	TORS.	AND PU	BLIC	HEALTH I	NTERVENTIONS				
<u> </u>	<u> </u>		Circle designated compliance status (IN, OUT,	, N/A, NO) for ea	ch item		Mark "X"	in appropriate box for	COS and/or R			
			IN = in compliance OUT= not in compliance NO	= not ob	served	N/A = no	t appi	icable COS =	corrected on-site R =	repeat violation			
Corr	pliance	Status		cos	R	Con	nolian	ce Status			cos	R	
			Supervision						Protection from (Contamination	1000	-	
1	(NO)	г	Person in charge present, demonstrates knowledge and performs duties			15	/ IN	ON AVA TUD	Food separated and pro	otected	T	\Box	
2	ÍN DUT	ΓN/A	Certified Food Protection Manager			16	IN	DUT N/A	Food-contact surfaces	 cleaned and sanitized	+	+	
			Employee Health			17		OUT NA NO	Proper disposition or re-	turned, previously served,	1-	+	
3	TIDOUI	-	Management/food employees & conditional employee;	-	T 1		1		reconditioned & unsafe				
3	=		knowledge, responsibilities and reporting	_	-			-	Time / Temperature				
5	TUOUT		Proper use of restriction and exclusion		-	18	_	OUT N/A NO	Proper cooking time an		↓	$\perp \perp$	
5	INDUT		Procedures for responding to vomiting and diarrheal event	s		19	-	OUT N/A(NO	Proper reheating proces		-	1	
2	IN OUT	(NO)	Good Hygiene Practices			20		OUT N/A NO	Proper cooling time and		┼	44	
7	IN OUT	-	Proper eating, tasting, drinking, or tobacco use	_		21	100	DUT N/A NO	Proper hot holding temp		-	+	
-	114 001	NO	No discharge from eyes, nose, mouth Preventing Contamination by Hands			22	-	OUT N/A NO	Proper cold holding tem	<u> </u>	-		
8	(IN DUT	NO	Hands clean & properly washed			23		OUT N/A NO	Proper date marking an		┼		
9	-	N/A NO	No bare hand contact with RTE food		100	24	IN	OUT N/A NO		Control: procedures and records			
10	IN DUT		Adequate handwashing sinks properly supplied & accessible	1-	+	25	Luc	DUIT MA	Consumer A				
10	111,001		Approved Source	le	4	25	IN	DUT N/A		ided for raw/undercooked foods			
11 IN DUT Food obtained from an approved source						26	INI	OUT N/A	Highly Susceptible	prohibited foods not offered			
12 ÎN OUT N/A (O) Food received at proper temperature						20	1111		d / Color Additives at			-	
13	ANDUT	2007 2003 20						Food additives: approve					
14	IN OUT	223	Req. records available: shell stock tags, parasite destruction	n	+	28	1 200	OUT N/A		ly identified, stored and used	\vdash	+	
	Risk	factors a					100		onformance with App				
	Preva Interv	re improper practices or procedures identified as the tributing factors of foodborne illness or injury. Public are control measures to prevent foodborne illness or	Health injury.		19	IN	OUT NA		e/specialized process/HACCP				
				GOOD F	RETAI	L PRÁC							
			Good retail practices are preventative measur						and physical objects into fi	oods,			
Mai	'k "X" in b	ox if num	bered item is not in compliance Mark "X" on						corrected on-site duri		iolation		
omi	pliance S	tatus		cos	R	Com	nliane	a Staitte			cos	R	
- 0111		· LELLE	Safe Food and Water		11	00111	Compliance Status Proper Use of Utensils					1.	
30	Р	asteurized	eggs used where required	\top	T	43	Τ	In-use utens					
31	V	Vater & Ice	from approved source			44		Utensils, equ	ipment & linens; properly		\Box		
32	V	ariance ob	tained for specialized processing methods			45		Single-use/si	e-use/single-service articles: properly stored & used				
			Food Temperature Control			46		Gloves used	properly				
33	P	roper cooli	ng methods used: adequate equipment for temp, control		\Box				Utensils, Equipment	and Vending			
34	P	lant food p	roperly cooked for hot holding	\perp		47 ·	47 Food and non-food contact surfaces cleanable,						
35	-		awing methods used	\bot	-	48		Properly desi	igned, constructed, & used	!			
36	TI	hermomete	ers provided and accurate			49	<u> </u>	Warewashing	g: installed, maintained, &				
07	I =		Food Identification					T	Physical Fac				
37	1 1-0	pod propen	ly labeled; original container		\perp	50	-	_	ater available adequate pr		-	\square	
20	Lin	eade rade	Prevention of Food Contamination	T:	- 	51		-	talled, proper backflow de-			\vdash	
38 Insects, rodents, & animals not present 39 Contamination prevented during food preparation, storage & display				+-		52			aste water properly dispos s properly constructed, su			\vdash	
40		ersonal cle		-		54	-						
41	-		s: properly used & stored	+		55	-		ifuse properly disposed, fa ities installed, maintained,			H	
42			ts & vegetables	+		56			ntilation & lighting, designa				
							1	1 . 10004-0010 101					
Тур	e of Ope	eration:	confeteria 200 to son-in-Charge:							License Posted: C	ا (لا	N	
Disc	cussion	with Per	son-in-Charge:							Follow-Up:	Y 7	N	
			At II , Geg Hart						J.	Follow-Up Date: ,	-		
<u></u>										2/17/21		\dashv	
Sigr	nature of	Person	in Charge:							Date: 011/10/			
Qia.	nature of	Finencot								Date # (1 17 00)			



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



Establishment: Faculty							Date	:3/14/2021		Page _2_	of 2			
Ad	dress: 2,	Contra was					Com	pliance Achieved:	BLLAI	202)				
				-	TEMPERATURE OBSERVATIONS									
-	-nton 1	Item/Location	In the last of the san	Temp.	Item/Location		emp.	· Item/l	Location		Temp.			
(10	Anne	micken/Hot	MODINE	165	"		39				-			
	T TOIYE	to /im be	Her.	39.	GOT PEPPER / in-line.		10				-			
			¥1.004	-		+					-			
			_			+					-			
		<u> </u>		<u> </u>	ODCEDS ASSAULT AND CONTROVERS AND	TITON	K4							
	Item	Γ		OBSERVATIONS AND/OR CORRECTIVE ACTIONS										
V	Number	Section of Code			Description of Violation					I	Corrected COS			
					80									
			0.	10 0v	actions observed doning	47	Mg	of inspection	<u> </u>					
	-													

			d dhoo	3	voice of dish repair									
			2		COLOR OF STEW PERSON		_							
			~ /YN	LUCYS	ibl measoring termone	<u>fe</u>								
			- spii	1 147	+ Procedures									
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				13/1					-2/1-	7/31				
		erson in Charge:	76					Date:		101				
Sian	ature of In	spector:	(/				Date:	21 43	112021				



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



Establishment: Icing Kone_		Date 3/19/2 Page 1 of 2				No. of Risk Factor/Intervention	No. of Risk Factor/Intervention Violations			
Address: 336 DW Highway		Time in too Time out: 30				No. of Repeat Risk Factor/Intervention Violations				
Owner/Permit Holder: King Kond		Risk	Cate	egory:			/iolation	-		
Email:		Phon		603	1120 80					
Inspection Type: Routine Re-inspection	Pre-operatio		<u>. (</u>				Red			
			Z A N		s investigation	n Complaint Other INTERVENTIONS				
Circle designated compliance status (IN. OUT. N/A. NO)) for e	ach i	tem						
					opplicable COS	"In appropriate box for COS and/or R = corrected on-site R = repeat violation				
Compliance Status						2 Corrected ori-site R = Tepeat Violation				
Supervision	COS	R	-	Comp	oliance Status	B	co	OS R		
1 Person in charge present, demonstrates knowle	dge and		-	15		Protection from Contamination				
performs duties 2 IN OUT N/A Certified Food Protection Manager		+	4		IN OUT N/A NO					
Employee Health			-	16	IN OUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,				
	Invee:		-	17	IN OUT NIA NO	reconditioned & unsafe food				
knowledge, responsibilities and reporting	10/66,		1			Time / Temperature Control for Safety				
4 (N)OUT Proper use of restriction and exclusion 5 (N)OUT Procedures for responding to womiting and diarrh		_	4	18	IN OUT N/A NO					
t restaure for respectantly to variously and diami	neal events		.	19	IN OUT NIA NO	7				
6 IN OUT NO Proper eating, tasting, drinking, or tobacco use				20	IN OUT (N/A) NO					
The state of the s		_	-	21	OUT N/A NO	Proper hot holding temperatures				
			4	22	IN OUT N/A NO	Proper cold holding temperatures				
8 IN OUT NO Hands clean & properly washed		_		23	IN DUT N/A NO	Proper date marking and disposition				
The state of the s			11	24	IN OUT N/A I)O	Time as a Public Health Control: procedures and reco	rds			
THE STATE OF THE PARTY OF THE P		-				Consumer Advisory				
	accessible]]	25	IN OUT (VA	Consumer advisory provided for raw/undercooked foo	ds			
11 INOUT Food obtained from an approved source			Į ļ			Highly Susceptible Populations				
		1	1	26	IN OUT N/A	Pasteurized foods used; prohibited foods not offered				
			-			od / Color Additives and Toxic Substances				
13 INDUT Food in good condition, safe & unadulterated			1	27	IN OUT N/A	Food additives: approved and properly used	T			
14 IN OU (N/A)NO Req. records available: shell stock tags, parasite of		Щ,	 	28	A/N TUS/AI	Toxic substances properly identified, stored and used		\neg		
Risk factors are improper practices or procedures identified	d as the most				(Conformance with Approved Precedures				
Risk factors are improper practices or procedures identifie Prevalent contributing factors of foodborne illness or injury Interventions are control measures to prevent foodborne ill	ness or injury,			19	IN OUT N/A	Compliance with variance/specialized process/HACCP		\top		
	GOOD I	HETTAL		EACTT		, management production				
Good retail practices are preventativ						and shortest ablasta to the Fords				
Mark "X" in box if numbered item is not in compliance Mark	"X" on appropria	te box	for C	OS ar			at violatio			
Compliance Status						N-Tepe	at violant	311		
Safe Food and Water	003	R	2	ompii	ance Status		cos	R		
30 Pasteurized eggs used where required		T	_ <u> </u> _	40		Proper Use of Utensils				
31 Water & ice from approved source			- 1-	43		sils properly stored				
32 Variance obtained for specialized processing methods			- 1-	44		uipment & linens: properly stored, dried, & handled				
Food Temperature Control		<u> </u>	<u> </u>	45		single-service articles: properly stored & used				
33 Proper cooling methods used: adequate equipment for temp. co		\vdash	- 1	46	Gloves use					
34 Plant food properly cooked for hot holding	ritrol		-	1		Utensils, Equipment and Vending				
		\vdash	-	47 ·		on-food contact surfaces cleanable,				
		\vdash	\vdash	48	Properly de	signed, constructed, & used				
			-	49	Warewashir	ng: installed, maintained, & used: test strips				
Food Identification 37 Food properly labeled: original container						Physical Facilities				
		<u> </u>	\vdash	50		vater available adequate pressure				
Prevention of Food Contamination 38 Insects, rodents, & animals not present			-	51	Plumbing in:	stalled, proper backflow devices				
			-	52	Sewage & w	raste water properly disposed				
9	xlay		5	53		es properly constructed, supplied, & cleaned				
40 Personal cleaniiness			5	54	Garbage & r	efuse properly disposed, facilities maintained				
41 Wiping cloths: properly used & stored			5	55	Physical faci	lities installed, maintained, & dean				
42 Washing fruits & vegetables			5	56	Adequate ve	ntilation & lighting, designated areas used				
Type of Operation:	· · · · · · · · · · · · · · · · · · ·					Lie Btt	83			
	<u></u>					License Posted:	<u>(Y)</u>	<u>N</u>		
Discussion with Person-in-Charge:						Follow-Up:	Υ (N		
* opening	131201	10	ZL	メ		Follow-Up Date:				
Signature of Person in Charge:	Date: 3/19/201	_	-							
Signature of Inspector:						Date: 3/9/20	21			



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



Establishment: King Kone							311912021	Page 3	of _2_
Ad	dress: ᢃ	sp Dro Hi	عطوالم		pliance Achieved: 3/19	1202			
			- 1		TEMPERATURE OBSERVATIONS				
	- 71/	Item/Location	- bld + b	Temp.	Item / Location	Temp.	Item / Location		Temp.
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					OBSERVATIONS AND/OR CORRECTIVE ACTI	ONS			
V	Item	Section of Code			Description of Violation			Date	d Corrected
<u> </u>	Number	0001011 01 0000			Description of Fiolation				or COS
							·		
				50 4	iioloctions observed dofing	4 ton	re of increased		
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_		erson in Charge:		wll-	4/		Date: 2/[1/000	
Siar	nature of In	spector:	1 (1	// =		Date: 2 / /	96707	