

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



ES	Establishment: Don Ramon						12020	Pag	e 1 of <u>Z</u>					
Ad	dress	6 wni	they street	-	Time in12:45			Tim	e ou t: 50	No. of Repeat Risk Factor/Intervention Violation			ns 💸	
			er. Den Romon Restaurant Men	cup i	Risk Category:			:		Total Violations				
	ail:		Dev received to the Men					03) 420 8468		Inspection Status		Red	10 800	
		- T	(5-4)			C. (4						reu		
1115	Jech	on Type:		peration		7 45			vestigation	Complaint	Other			
			FOODBORNE ILLNESS RIS Circle designated compliance status (IN, OUT, I					RITIC						
										in appropriate box for				
	_		IN = in compliance OUT= not in compliance NO =	- not obs	serve	d N//	A = no	t appli	icable COS =	corrected on-site R	= repeat violation			
Con	plian	ce Status		cos	R		Com	plian	ce Status			CC	OS I	
	100		Supervision			4		1-		Protection from	Contamination			
1		but	Person in charge present, demonstrates knowledge and performs duties				15		PUT N/A NO	Food separated and	protected			
2	(IN)	UT N/A	Certified Food Protection Manager			(16	IN	OLD N/A	Food-contact surface	es cleaned and sanitized			
			Employee Health				17	IN	OUT(NANO	Proper disposition or reconditioned & unsa	returned, previously served.			
3	(N	DUT	Management/food employees & conditional employee;	T	T					Time / Temperatur				
4	(N)		knowledge, responsibilities and reporting Proper use of restriction and exclusion	+-	+	\dashv	18	LIN	OUT N/A(NO)	·	· · · · · · · · · · · · · · · · · · ·			
5	(N)		Procedures for responding to vomiting and diarrheal events	+		\dashv	19	_	OUT N/AND	Proper cooking time :	pedures for hot holding		+	
	ريب		Good Hygiene Practices			\exists	20	-	OUT N/A	Proper cooling time a		+		
6	INC	OUT 60	Proper eating, tasting, drinking, or tobacco use	T	T	1	21		OUT N/A NO	Proper hot holding ter		-	+	
7	IN	OUT (10	No discharge from eyes, nose, mouth	1		10	22		OUT N/A NO	Proper cold holding to	'		+	
			Preventing Contamination by Hands				23		DUT N/A NO	Proper date marking	and disposition	\top	\neg	
8	IN C	OUT (©	Hands clean & properly washed	T	T	1	24	IN	ONAMITUO	Time as a Public Hea	Ith Control: procedures and reco	ds	_	
9	INC	OUT N/A NO	No bare hand contact with RTE food	1	\top					Consumer				
10	(N)	UT	Adequate handwashing sinks properly supplied & accessible			7	25	(IN)	DUT N/A	Consumer advisory p	rovided for raw/undercooked foo	ak	\top	
			Approved Source							Highly Susceptil	ble Populations			
11	11470	-	Food obtained from an approved source			_	26	IN (DUT NA	Pasteurized foods use	ed; prohibited foods not offered			
12	-	OUT N/A(NO)	Food received at proper temperature	\bot							and Toxic Substances			
13 (Food in good condition, safe & unadulterated		_	-	27	+	OUT NA		ved and properly used	\bot	_	
14		UT(N/A)10	Req. records available: shell stock tags, parasite destruction			-	28		DUT N/A		perty identified, stored and used			
	R Pr	l isk factors a revalent cont	re improper practices or procedures identified as the r ributing factors of foodborne illness or injury, Public H rre control measures to prevent foodborne illness or ir	nost ealth				Т		onformance with A	pproved Procedures			
	ln	terventions a	re control measures to prevent foodborne illness or in	ijury.			19	IN C	DUT ((A)	Compliance with varia	nce/specialized process/HACCP		ĺ	
				GOOD R										
B.4	- NS-611	- hi6	Good retail practices are preventative measure											
IVIAI		n box ir num	bered item is not in compliance Mark "X" on a	propriat	ie do;	X TOF	CUS	and/or	CUS	=corrected on-site du	uring inspection R=repe	at violat	ion	
omj	lianc	e Status		cos	R		Comp	lianc	e Status			COS	SR	
			Safe Food and Water	1	1	1			T .	Proper Use	of Utensils			
30			eggs used where required	+	-	d	43	- Am		is properly stored		\bot		
32			from approved source	-	-		44	ス			ly stored, dried, & handled	+		
J2		Variatios ob	Food Temperature Control	-		45 Single-use/single-service articles: properly stored & used						+	-	
33		Proper coolin	ng methods used: adequate equipment for temp. control	1	Т	46 Gloves used properly Utensils, Equipment and Vending						_		
34			roperly cooked for hot holding	+		1 1	47 ·	Γ	Food and no	n-food contact surfaces			$\overline{}$	
35			awing methods used			1	48			gned, constructed, & us			+	
36		Thermomete	rs provided and accurate			1 1	49		Warewashing	; installed, maintained,	& used: test strips	_	\top	
			Food Identification							Physical F	acilities			
37		Food properl	y labeled: original container				50	<u> </u>	Hot & cold wa	ater available adequate	pressure			
			Prevention of Food Contamination				51		Plumbing inst	alled, proper backflow o	devices			
38	<i></i>		nts, & animals not present	\perp			52		Sewage & wa	aste water properly dispose	osed			
39	*		on prevented during food preparation, storage & display	1			53			s properly constructed, s			\perp	
40		Personal clea		 			54			fuse properly disposed,		-		
41 42	-		s: properly used & stored	-		-	55			ties installed, maintaine				
72		*Yasriing iruli	is & vegetables				56		Adequate ver	tilation & lighting, desig	naigo areas used			
Тур	e of (Operation:									License Posted:	(Y)	N	
		·	son-in-Charge:									M	NI	
Discussion with Person-in-Charge:											Follow-Up: 14 Pays	9	IN	
											Follow-Up Date:			
Sign	ature	of Person	in Charge: Sorge Huerle or: Sur								Date:			
Siar	ati ire	of Inspect	or S		_	_					Date: 11 - 2 - 20		-i	
7181	GIGIT	or mapect	11-								Date: 4-3-2020			



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



Establishment: Don Ruman		Date: (1 · 3 - 2020 Page	<u></u> of				
Address: 6 whitney street		Compliance Achieved:					
Item/Location		OBSERVATIONS					
	Temp. Item/Loc	ation Temp. Item/Location	Ter				
cut tomato / in-line	42'	·					
	54						
nicion wings / cust	34						
	ORSERVATIONS AND/O	R CORRECTIVE ACTIONS					
/ Item Section of Code			Dated Correct				
Number Section of Sect	<u> </u>	escription of Violation	or COS				
kit	chan:						
F 16 4-601-11 TO	terior of lu machine	heavily spiled with mold / depric.					
	brobanty dean.		<u>.</u>				
	4	en wings , french tries , etc (TCS)					
3-3-1-1-1	H Vagrastes, Emag	ET WINGS / ITEMON HILES LETE CICS					
l le	tt out ou Lon Cout a	- cooking 54 F. Frod product	_				
	lost be maintained a	- 41 or below.					
wa	IK-in Petrigerostor: 1						
39 3-306.14-F	ood product in stores	He left uncovered.					
		rying pain being used in sources					
	e scope / observed	resting in food product. Food					
	TEME RECYST - 76016	only should the wed and may					
	not be ket stored in	tood protoct.					
 							
nature of Person in Charge:	arsc Huarla	Date:					
nature of Inspector:	9//-	Date: 11 - 3 - 2022					



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



Establishment: Community Hospice House.						1202	Page 1 of	No. of Risk Factor/Intervention Violations			
Address: 210 paticook Road						90	Time outl: 80	No. of Repeat Risk Factor/Intervention Violations			
		der Home Health Staspice Ca	ne	Risk C	ate	gory:	ව	Total	Violatio	ns C	8
		a. Latrance @ nnhc.org		Phone	:/6	, KG	1595 -5688	Inspection Status: Green Yellow	Red	-	
	pection Type:	(Routine) Re-inspection Pre-op			_		s Investigation	Complaint Other			_
		FOODBORNE ILLNESS RIS	K FA(
		Circle designated compliance status (IN, OUT, N						in appropriate box for COS and/or R			_
	-	IN = in compliance OUT= not in compliance NO =	not ob	served	N/A	= not	applicable COS =	corrected on-site R = repeat violation			_
Com	Compliance Status (COS						oliance Status		lc(os I	R
		Supervision	R	l	Comp	Jilailoe Otatua	Protection from Contamination		20	K	
1	IN OUT	Person in charge present, demonstrates knowledge and performs duties				15	IN OUT N/A NO	Food separated and protected			
2	IN OUT N/A	Certified Food Protection Manager	+-			16	IN DUT N/A	Food-contact surfaces cleaned and sanitized	-		\dashv
		Employee Health				17	IN OUT NAMO	Proper disposition or returned, previously served.		_	_
3	ОЗ	Management/food employees & conditional employee;	1					reconditioned & unsafe food			
<u> </u>		knowledge, responsibilities and reporting		_				Time / Temperature Control for Safety			
5	CINDUT IN DUT	Proper use of restriction and exclusion	+-	+		18	IN OUT N/(NO)	Proper cooking time and temperature	-+	\dashv	\dashv
5	(IN 901	Procedures for responding to vomiting and diarrheal events Good Hygiene Practices				19 20	IN OUT N/ANO	Proper reheating procedures for hot holding Proper cooling time and temperatures		\dashv	\dashv
6	IN OUT (NO			\top		21	IN OUT N/ANO	Proper hot holding temperatures	\rightarrow	\rightarrow	
7	IN OUT (NO	No discharge from eyes, nose, mouth	+	-		22	IN OUT N/A NO	Proper cold holding temperatures	-	\dashv	\dashv
		Preventing Contamination by Hands				23	(IN)OUT N/A NO	Proper date marking and disposition	_		\dashv
8	DOUT NO	Hands clean & properly washed	T	T	1	24	IN OUT NAMO	Time as a Public Health Control: procedures and rec	ords	\dashv	\neg
9	IN OUT NA NO	No bare hand contact with RTE food			-			Consumer Advisory			
10	INOUT	Adequate handwashing sinks properly supplied & accessible				25	IN OUT (N/A)	Consumer advisory provided for raw/undercooked fo	ods		\neg
		Approved Source						Highly Susceptible Populations			
11	ТИОТ	Food obtained from an approved source				26	Pasteurized foods used; prohibited foods not offered			_	
12	IN OUT N/A NO		+	\perp	Food / Color Additives and Toxic Substances						
13	IN OUT (N/A) NO	Food in good condition, safe & unadulterated	+-	+	-	27	IN OUT N/A	Food additives: approved and properly used		\rightarrow	4
14		Req. records available: shell stock tags, parasite destruction	<u> </u>		-	28	INDOUT N/A	Toxic substances properly identified, stored and used			-
	Prevalent co	are 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	nost ealth		ŀ			onformance with Approved Procedures			-
	Intervention	are control measures to prevent foodborne illness or in	jury.		19 IN OUTNA Compliance with variance/specialized process/HACCP						
				RETAI							
Mar	k "X" in hoy if n	Good retail practices are preventative measures mbered item is not in compliance Mark "X" on ag							eat violat	tion	4
		There is not in semplated the second				JOO 01	10701 000	-corrected off-site during inspection 114-rep	SOL VIOLO	IOII	
Comp	oliance Status	Safe Food and Water	cos	R	-	Compl	iance Status	Paran Vien of Manager	CO	S	R
30	Pasteuriz	d eggs used where required	1	T	ŀ	43	In-use utensi	Proper Use of Utensils ils properly stored			-
31		e from approved source			ŀ	44	_	ripment & linens: properly stored, dried, & handled		+	\dashv
32	Variance	btained for specialized processing methods	\top		F	45	Single-use/si.	ingle-service articles: properly stored & used		+	7
		Food Temperature Control			ľ	46	Gloves used			\top	7
33	Proper co	ling methods used: adequate equipment for temp. control						Utensils, Equipment and Vending			
34	Plant food	properly cooked for hot holding				47 ·	Food and nor	n-food contact surfaces cleanable,			
35		hawing methods used		-	- 1-	48		igned, constructed, & used		\bot	_
36	Thermom	ters provided and accurate			-	49	Warewashing	a: installed, maintained, & used: test strips			_
37	Food	Food Identification		1	-	50	11-4814	Physical Facilities			4
37	rood prop	Prevention of Food Contamination		\vdash	\vdash	50		ater available adequate pressure	-	+	\dashv
38	Insects ro	dents, & animals not present		\Box	-	52		aste water properly disposed	\rightarrow	+	\dashv
39		tion prevented during food preparation, storage & display	-		\vdash	53		s properly constructed, supplied, & cleaned	-	+	\dashv
40	Personal			\Box	\vdash	54		fuse properly disposed, facilities maintained	\rightarrow	+	\dashv
41		hs: properly used & stored			\vdash	55		ities installed, maintained, & clean		+	7
42		ults & vegetables			\vdash	56		ntilation & lighting, designated areas used			1
											7
		Charitable organization					License Posted:	_ <u>(Y)</u>	N	7	
Disc	Discussion with Person-in-Charge:							Follow-Up:	Y	Ø,	
	1:: V M 2							Follow-Up Date:			
Sign	ature of Perso	n in Charge						Data: 11 //-	202	, ^	-
											\dashv
Sign	nature of Inspe	ctor:						Date: 11-6-202	D .		



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



Establi	shment: commv	nity Hos	PICE HOUS	<u>ہو۔</u>		Date:11-6-2020 Page Z of				
	s: 210 Patta				Compliance Achiev					
				TEMPERATURE OF						
	Item / Location		Temp.	Item / Location	п.	Тетр.	Item / Location	Tem		
STAC	yle door / An	Pieut	34.							
			OBSE	RVATIONS AND/OR CO	DRRECTIVE ACTION	VS				
v II	tem Section of Co	la la			· · · · · · · · · · · · · · · · · · ·			Dated Corrected		
V Nu	mber Section of Co.	ie .		Descr	iption of Violation			or COS		
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	of Domes to Ohi	- Vil	/ Ala	<i></i>			11/11	2020		
	of Person in Charge	: UWL)	177				Date: // / (/ /			
gnature	e of Inspector:	mi)	-/-	-			Date: [[-6-2	222		
	6	-					15 - 5	- -		



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



Est	abiishment: Ke	un' wright - Tost wright by 1	alli	Datel 1-9-202Bege 1 of _2 No. of Risk Factor/Intervention Violatel							
Ad	dress: 1 49 T		Time i	ntje	20	Time out	No. of Repeat Risk Factor/Intervention Violations	Ø			
Ow	ner/Permit Hold	er kelli whight		Risk C	ateç	jory:	6	Total Violations	25		
		gritty rellie granicom		Phone	:/4	o 7.	1494-8	Angoection Status: Green Yellow Red			
	pection Type:	Routine Re-inspection Pre-op			-		s Investigation				
		FOODBORNE ILLNESS RIS	_								
		Circle designated compliance status (IN, OUT, N						(" in appropriate box for COS and/or R			
		IN = in compliance OUT= not in compliance NO =	not ob:	served	N/A	= not			_		
Corr	pliance Status		cos						-		
-	priative diagna	Supervision]003	I IX		GOIN,	pliance Status_	Protection from Contamination	R		
1	NOUT	Person in charge present, demonstrates knowledge and performs duties		1		15	IN OUT N/A NO		T		
2	IN OUT (IA)	Certified Food Protection Manager	+-	_		16	TIN OUT N/A	Food-contact surfaces cleaned and sanitized	\vdash		
		Employee Health				17	IN OUT NO NO	Proper disposition or returned, previously served,			
3	TUCKI	Management/food employees & conditional employee;						reconditioned & unsafe food True / Temperature Control for Safety	_		
4	INDUT	knowledge, responsibilities and reporting Proper use of restriction and exclusion	+	+	-	18	IN OUT NAMO				
5	TUQUI	Procedures for responding to vomiting and diarrheal events	+		-	19	IN OUT N/A NO		H		
		Good Hygiene Practices				20	IN OUT N/A NO		-		
6	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use	T	T		21	IN OUT N/A DO	Proper hot holding temperatures			
7	IN OUT NO	No discharge from eyes, nose, mouth		$\uparrow \neg \uparrow$	r	22	IN OUT N/A NO	Proper cold holding temperatures	\vdash		
		Preventing Contamination by Hands				23	IN DUT N/A NO	Proper date marking and disposition			
8	IN OUT NO	Hands clean & properly washed			Ī	24	IN OUT AND	Time as a Public Health Control: procedures and records			
9	IN OUT N/(NO	No bare hand contact with RTE food			F			Consumer Advisory			
10	INOUT	Adequate handwashing sinks properly supplied & accessible		\top		25	IN OUT N/A	Consumer advisory provided for raw/undercooked foods			
		Approved Source						Highly Susceptible Populations			
11	IN OUT	Food obtained from an approved source	J			26	IN OUT N/A	Pasteurized foods used; prohibited foods not offered			
12	IN OUT N/A	Food received at proper temperature					Fo	ood / Color Additives and Toxic Substances			
13	INDUT	Food In good condition, safe & unadulterated				27	IN OUT N/A	Food additives: approved and properly used			
14	14 IN OUT N/A NO Req. records available; shell stock tags, parasite destruction						IN OUT N/A	Toxic substances properly identified, stored and used			
	Risk factors a	re improper practices or procedures identified as the m	ost	\neg				Conformance with Approved Procedures			
	Prevalent cont Interventions a	re improper practices or procedures identified as the m ributing factors of foodbome illness or injury. Public He re control measures to prevent foodborne illness or inj	alth urv.	- 1		19	IN OUT WA	Compliance with variance/specialized process/HACCP			
				Tripp a Tit				Compliance with variation opening process 11/1005			
		Good retail practices are preventative measures		ETAI				and the sign of the factor of the factor			
Mar	k "X" in box if num	bered item is not in compliance Mark "X" on ap						S =corrected on-site during inspection R=repeat violation	\dashv		
					_			Te Topout Total of			
omp	liance Status	Safe Food and Water	cos	l R							
30	Pastaurizad	eggs used where required			Proper Use of Utensils 43 In-use utensils properly stored						
31		from approved source		\vdash		14			\dashv		
32		ained for specialized processing methods			\vdash	15		quipment & linens: properly stored, dried, & handled /single-service articles: properly stored & used			
	74114140	Food Temperature Control		_	\vdash	46 Gloves used properly					
33	Proper coolin	ng methods used: adequate equipment for temp, control			\vdash	, ,	0.0300 000	Utensile, Equipment and Vending	-		
34		operly cooked for hot holding		\vdash	1	17 -	Food and n	on-food contact surfaces cleanable.			
35		awing methods used			-	18		asigned, constructed, & used	\dashv		
36		rs provided and accurate			\vdash	9		ng: installed, maintained, & used: test strips	\dashv		
		Food Identification				1	1	Physical Facilities	-		
37	Food propert	y labeled; original container			5	10	Hot & cold v	water available adequate pressure	-		
		Prevention of Food Contamination			5	1		stalled, proper backflow devices	\dashv		
38	Insects, rode	nts, & animals not present			5	2	Sewage & v	waste water properly disposed	\neg		
39	Contamination	n prevented during food preparation, storage & display			5	3	Toilet faciliti	es properly constructed, supplied, & cleaned	1		
40	Personal dea	ınliness			5	4	-	refuse properly disposed, facilities maintained			
41							55 Physical facilities installed, maintained, & clean				
42	Washing fruit	s & vegetables			5	6	Adequate ve	entilation & lighting, designated areas used			
Trace of Occasion and A											
Type of Operation: Homestcad License Posted:									5		
Disc	Discussion with Person-in-Charge:							Follow-Up: Y N			
		1. 1.	1.					Follow-Up Date:			
Sian	ature of Person	in Charge: () A D D . ' A D D L'	111					Date: (1) (2) (3) (3)	\dashv		
			إنانا					THE TOWN	\dashv		
Sign	ature of Inspect	or:						Date: 11-9-2020			



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



Es	tablishme	Pircu tect in	int by kelli	Date: 1 - 9 - 2020 Page 2 of 2					
Ad	ldress: 🛭	9 Torkey Hi	11 Road	Compliance Achieved: 11-9-2020					
				TEMPERATURE OBSERVA	ATIONS				
		Item / Location	Temp.	Item / Location	Тетр.	Item / Location	on Temp.		
		· · · · · · · · · · · · · · · · · · ·							
	1	1	0B9	ERVATIONS AND/OR CORREC	TIVE ACTIONS				
V	Item Number	Section of Code		Description of	Violation		Dated Corrected or COS		
	-								
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			10 12101	altage about tal	1 1 130 a	0 >			
				ations observed	double thing &	+ webset 10v			
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		erson in Charge:	WI LINNIS	M		Date:	98080		
3ign	ature of In	spector:	SIM	_		Date: 🚜 🗸	9-2020		