

Signature of Inspector

MERRIMACK FIRE DEPARTMENT

HEALTH DIVISION

Merrimack NH, 03054



Date: 8/31/2022

432 Daniel Webster Highway (603) 420-1730 FOOD ESTABLISHMENT INSPECTION REPORT Establishment: Marcs Pizza and Subs Date:8/3//12 Page 1 of 2 No. of Risk Factor/Intervention Violations Address: 709 Miltord Road Time in[1:30 | Time out 1:15 No. of Repeat Risk Factor/Intervention Violations Owner/Permit Holder: Harc Benedetti Risk Category: **Total Violations** Email: Phone: Inspection Status: Green Yellow Red 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 Supervision Protection from Contamination Person in charge present, demonstrates knowledge and IŊ OUT IN AUT N/A NO Food separated and protected performs duties IN OUT N/A Certified Food Protection Manager 16 IN OUT N/A Food-contact surfaces cleaned and sanitized **Employee Health** IN OUT NA NO Proper disposition or returned, previously served, 17 reconditioned & unsafe food Management/food employees & conditional employee; TUO NI knowledge, responsibilities and reporting Time / Temperature Control for Safety III OUT Proper use of restriction and exclusion IN OUT N/A NO 18 Proper cooking time and temperature 5 TUO Procedures for responding to vomiting and diarrheal events IN OUT N/A NO. 19 Proper reheating procedures for hot holding Good Hygiene Practices 20 IN OUT N/A GO Proper cooling time and temperatures 6 IN OUT Proper eating, tasting, drinking, or tobacco use IN OUT N/A (O 21 Proper hot holding temperatures IN OUT No discharge from eyes, nose, mouth 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 TUON NO Hands clean & properly washed IN OUT NA NO 24 Time as a Public Health Control: procedures and records IN OUT N/A NO No bare hand contact with RTE food Consumer Advisory 10 TUOLN Adequate handwashing sinks properly supplied & accessible 25 IN OUT N/A Consumer advisory provided for raw/undercooked foods Approved Source Highly Susceptible Populations 11 / 7N OUT Food obtained from an approved source 26 IN OUT N/A Pasteurized foods used; prohibited foods not offered 12 IN OUT N/AND Food received at proper temperature Food / Color Additives and Toxic Substances 13 INDOUT Food in good condition, safe & unadulterated 27 IN OUT WA Food additives: approved and properly used 14 IN OUT NA NO Req, records available: shall stock tags, parasite destruction 28 IN OUT N/A Toxic substances properly identified, stored and used Risk factors are improper practices or procedures identified as the most Prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illness or injury. Conformance with Approved Procedures 19 IN OUT N/A Compliance with variance/specialized process/HACCP 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 violation Compliance Status COS R Compliance Status COS R Safe Food and Water Proper Use of Utensils 30 Pasteurized eggs used where required In-use utensits properly stored 43 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: 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 non-food contact surfaces cleanable, 35 Approved thawing methods used 48 Property designed, constructed, & used 36 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 properly disposed 39 Contamination prevented during food preparation, storage & display 53 Toilet facilities properly constructed, supplied, & cleaned 40 54 Garbage & refuse properly disposed, facilities maintained 41 Wiping cloths: property used & stored 55 Physical facilities installed, maintained, & clean 42 Washing fruits & vegetables Adequate ventilation & lighting, designated areas used Type of Operation: License Posted: Discussion with Person-in-Charge: Follow-Un: Follow-Up Date: Signature of Person in Charge: Date:



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



Establishme	nt: Marcs Pi	zza and su	55	Date: 6	3-31-2022	Page 7 of 7
Address: 🗂	64 Milford	Road #5			ance Achieved:	1 ago 01
			TEMPERATURE OF	SERVATIONS		
	Item / Location	Temp.	Item / Location		Item / Location	Ten
<u> </u>						
, Item	1	1	OBSERVATIONS AND/OR CO	RRECTIVE ACTIONS		
V Number	Section of Code		Descri	ption of Violation		Dated Correcte or COS
		Kitchen !				0,003
C 55	6.501.12.	7 - ((1) - 12) -	Dan I almace	2		/
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gnature of Per	son in Charge	ione VI	EURIU		Date:	
gnature of Ins	pector:	C//_	-			12620
		7.0			Date: 8/31/	1001



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



Establishment: New World Gas			Dot- A			A CO			
			Date:			ge 1 of 7	No. of Risk Factor/Intervention Vic		Ø
Address: 397 DW Highway			Time in			ne ou g -0 O	No. of Repeat Risk Factor/Intervention Vic	lations	0
Owner/Permit Holder: 39 2 OM Sk	anti OM LL	_	Risk Ca	tegory	:0		Total Vic	lations	ó
Email:			Phone:				Inspection Status: Green Yellow	Red '	7
Inspection Type: Routine Re-in-	spection Pre-op	eratio	nal	Illne	ess Ir	nvestigation	Complaint Other		
FOO	DDBORNE ILLNESS RIS								_
Circle designated com	pliance status (IN, OUT, N	/A, NO) for eacl	h item			in appropriate box for COS and/or R		
					t app	licable COS =	corrected on-site R = repeat violation		_
Compliance Status		cos					Topcat violation		
Supervisio	n	1003	R	Con	ipiiai	nce Status	Protection from Contamination	cos	R
Person in charge present, der	nonstrates knowledge and			15	IN	DUT N/A NO			
2 IN OUT N/A Certified Food Protection Man	aner	+	+	16	-		Food separated and protected		\perp
Employee He						OUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,	 	\perp
Management food and law				17	IN	OUT (VA) NO	reconditioned & unsafe food		
knowledge, responsibilities an	d reporting	<u> </u>				7	Time / Temperature Control for Safety		
4 INOUT Proper use of restriction and e		<u> </u>		18	IN	OUT N/A(NO)	Proper cooking time and temperature	T	T
5 INOUT Procedures for responding to		Ь_		19	-	OUT N/ANO	Proper reheating procedures for hot holding		
6 IN OUT NO Proper eating, tasting, drinking				20	_	OUT N/A NO	Proper cooling time and temperatures		
6 IN OUT 10 Proper eating, tasting, drinking 7 IN OUT 10 No discharge from eyes, nose.		-	+	21	_	OUT N/A NO	Proper hot holding temperatures		
Preventing Contaminat		<u> </u>		22		OUT N/A NO	Proper cold holding temperatures	ļ	_
8 IN OUT (O) Hands clean & properly washe				23		DUT N/A NO	Proper date marking and disposition		_
9 IN OUT N/A NO No bare hand contact with RTE		-		24	IIN	OU (N/A)NO	Time as a Public Health Control: procedures and records		<u> </u>
10 INOUT Adequate handwashing sinks p		-	-	25	TIM	OUT N/A	Consumer Advisory	1	
Approved Sou				-23	104	OUNIA	Consumer advisory provided for raw/undercooked foods Highly Susceptible Populations		_
11 TNOUT Food obtained from an approve	d source			26	Tin	OUT N/A	Pasteurized foods used; prohibited foods not offered	1	_
12 IN OUT N/A NO Food received at proper temper	rature				.1		d / Color Additives and Toxic Substances		Щ
13 IN DUT Food in good condition, safe &	unadulterated			27	IN	OUT N/A	Food additives: approved and properly used	1	
14 IN OUT VA 10 Req. records available: shell sto	ock tags, parasite destruction			28	(IN)	OUT N/A	Toxic substances properly identified, stored and used	 	
Risk factors are improper practices or prod Prevalent contributing factors of foodborne Interventions are control measures to prev-	edures identified as the me	ost				Co	informance with Approved Procedures		
Interventions are control measures to prev	illness or injury, Public He ent foodborne illness or inju	altin Jry.		19	IN		Compliance with variance/specialized process/HACCP		
	GC	OD R	ETAIL I	PRACT	TCES				_
Good retail practic	es are preventative measures						and physical objects into foods		-
Mark "X" in box if numbered item is not in complian	nce Mark "X" on app	ropriat	e box for	COS a	ind/or		corrected on-site during inspection R=repeat	/iolation	\dashv
ompliance Status		cos	R	Comn	lianc	e Status		loop I	
Safe Food and W				00,p	1101110	- Other	Proper Use of Utensils	cos	R
30 Pasteurized eggs used where required				43		In-use utensils	s properly stored		\dashv
31 Water & Ice from approved source				44		Utensils, equi	pment & linens: properly stored, dried, & handled		\neg
32 Variance obtained for specialized processing				45		Single-use/sir	ngle-service articles: properly stored & used		
Food Temperature (46		Gloves used p			
Proper cooling methods used: adequate equip Plant food property cooked for hot holding	ment for temp, control	-					Utensils, Equipment and Vending		
35 Approved thawing methods used				47 ·			-food contact surfaces cleanable,		_
36 Thermometers provided and accurate			-	48			aned, constructed, & used		_
Food Identificati	on		_	42		warewasning:	installed, maintained, & used: test strips Physical Facilities		
37 Food properly labeled: original container	T			50		Hot & cold wat	ter available adequate pressure		-
Prevention of Food Cont	amination			51			alled, proper backflow devices		\dashv
38 Insects, rodents, & animals not present			71	52			ste water properly disposed	\rightarrow	-
39 Contamination prevented during food preparat	ion, storage & display			53		Toilet facilities	properly constructed, supplied, & cleaned		\neg
40 Personal cleanliness				54			use properly disposed, facilities maintained		\dashv
41 Wiping cloths; properly used & stored				55		Physical faciliti	es installed, maintained, & clean		\exists
42 Washing fruits & vegetables				56		Adequate venti	ilation & lighting, designated areas used		
Type of Operation:							The second		=
<u> </u>							License Posted:	N	
Discussion with Person-in-Charge:							Follow-Up:	Y (Ñ	
	_	Λ					Follow-Up Date:		
Signature of Person in Charge:	21-2 Cethu	1/2	•				Date:		\dashv
Signature of Inspector:									\dashv
I I I I I I I I I I I I I I I I I I I							Date: 8 [\$1 202	2_	



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



ddress: 30	72.DW Highway	4_		Complian	31/2072	Page Z o
		0	TEMPERATURE OBSERVAT	Compliand	ce Achieved: 8/3	12027
	Item / Location	Temp.	Item / Location	Temp.		
				Temp.	· Item / Locati	012
					<u> </u>	
		OP				
Item		OB	SERVATIONS AND/OR CORRECTIV	VE ACTIONS		
Number	Section of Code		Description of Vid	olation		Dated Co
						or C
+	 					
 						
		No VIDI	ations observed do	ring time of	- inspection	
					V	
1						
	l l			<u></u>		
ure of Per	son in Charge:	#2 Pi	1604		Date:	



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



FOOD ESTABLISHMENT INSPECTION REPORT

Date Page 1 of 2 No.

								. 46.21	001101	TREE ORT	
Es	tablishment:	Thomas proore college		D	ate	1301	127	Pag	ge 1 of _2	No. of Risk Factor/Intervention Violation	ns //
		lanchester Street			ime i			Tim	e out		- Marie
Ov	ner/Permit I	lolder: Thomas macre collect	<u> </u>	_	isk C	B-1 -			[Pers		- 2
	nail:			+	hone		, oi y	6		Total Violation	ns //
	pection Type	: Routine Re-inspection Pr		_						Inspection Status: Green Yellow Red	
1113	pection Type	10 110/2011011	re-operati						vestigation	Complaint Other	
-		FOODBORNE ILLNES	5 KISK FZ	ACI	ORS.	AND	PUI	BLIC			
		Circle designated compliance status (IN, O							Mark "X"	in appropriate box for COS and/or R	
		IN = in compliance OUT= not in compliance	NO = not o	obse	rved	N/A =	= not	appl	icable COS =	corrected on-site R = repeat violation	
Con	pliance Statu		cc	S	R	(Comp	pliar	ice Status	[CC	OS I
	7	Supervision Person in charge present, demonstrates knowledge at	nd I			<u> </u>		~		Protection from Contamination	
1	INDUT	performs duties	10		Ĺ		15	Ų	OUT N/A NO	Food separated and protected	
2	TN DUT N/A	Certified Food Protection Manager					16	(IN	OUT N/A	Food-contact surfaces cleaned and sanitized	_
<u></u>		Employee Health					17	IN	OU NANO	Proper disposition or returned, previously served, reconditioned & unsafe food	
3	INOUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting								Time / Temperature Control for Safety	_
4	TUQIAL	Proper use of restriction and exclusion		\dashv		H	18	LINI	OUT N/A NO		
5	INDUT	Procedures for responding to vomiting and diarrheal ex	/ents	\dashv		- 1-	19	_	OUT N/A NO	Proper cooking time and temperature Proper reheating procedures for hot holding	-
		Good Hygiene Practices				-	20	+	OUT N/(NO	Proper cooling time and temperatures	-
6	IN OUT	Proper eating, tasting, drinking, or tobacco use				\vdash	21	-	OUT NA NO	Proper hot holding temperatures	
7	IN OUT N	No discharge from eyes, nose, mouth					22 (-	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 N	O Hands clean & properly washed					24	IN	OU (N) NO	Time as a Public Health Control: procedures and records	
9	IN/OUT N/A N	THE PERSON OF TH						_		Consumer Advisory	
10	INOUT	Adequate handwashing sinks properly supplied & access	sible				25	J) (DUT N/A	Consumer advisory provided for raw/undercooked foods	
44	CTD OUT	Approved Source		- 1]		7	_	6	Highly Susceptible Populations	
11	TN OUT N/A N	Food obtained from an approved source		\dashv		2	26	IN 0	DUT NIA	Pasteurized foods used; prohibited foods not offered	
13 /	INDUT	The state of the s		4	[d / Color Additives and Toxic Substances	
14	TH OUT N/AN	Food in good condition, safe & unadulterated Req. records available: shell stock tags, parasite destru-		+		-	27	ATTENDA	DUT N/A	Food additives: approved and properly used	
					_		28	JN 9	DUTTVA	Toxic substances properly identified, stored and used	
	Prevalent o	s are improper practices or procedures identified as ontributing factors of foodborne illness or injury. Pub is are control measures to prevent foodborne illness	the most lic Health			\vdash			^	informance with Approved Procedures	
	interventio	is are control measures to prevent foodborne illness	or injury.			1	19	IN C	DUT NIA	Compliance with variance/specialized process/HACCP	
			GOOD								
Mar	k "X" in box if r	Good retail practices are preventative mea umbered item is not in compliance Mark "X" (nsures to cor								
		Thank 74		- 1	DOX II	<i>y</i> 00	73 al	iu/OI	CU3 =	corrected on-site during inspection R=repeat violati	on
omp	liance Status	Safe Food and Water	cos	3	R	Co	ompli	ianc	e Status	cos	R
30	Pasteuri	zed eggs used where required		_	\dashv	4	2			Proper Use of Utensils	
31		Ice from approved source		+		4	-			s properly stored	-
32	Variance	obtained for specialized processing methods		+		4:				pment & linens: properly stored, dried, & handled ngle-service articles: properly stored & used	-
		Food Temperature Control				40	-		Gloves used p		
33	Proper o	poling methods used: adequate equipment for temp. control						-		Utensils, Equipment and Vending	
34	Plant foo	d properly cooked far hot holding				47	7 -			-food contact surfaces cleanable.	_
35	Approve	I thawing methods used				48	В		Properly desig	gned, constructed, & used	+
36	Thermon	eters provided and accurate				49	9		Warewashing:	: installed, maintained, & used: test strips	$\dashv \dashv$
27	Food	Food Identification				\vdash				Physical Facilities	
37	Food pro	perly labeled; original container			_	50	\rightarrow			ter available adequate pressure	
38	Ingests	Prevention of Food Contamination			_	51		\dashv		alled, proper backflow devices	
39		ation prevented during food preparation, storage & display		+-	-	52	_	_		ste water properly disposed	
40		cleanliness		+	-	53		\dashv		properly constructed, supplied, & cleaned	\perp
41	_	oths: properly used & stored		+	\dashv	54	-	\dashv		use properly disposed, facilities maintained	\perp
42		ruits & vegetables		+	\dashv	55 56	-	\dashv		es installed, maintained, & dean	4
						30			Adequate vent	ilation & lighting, designated areas used	
Туре	of Operation	1:								License Posted: (Y)	N
Disc	ussion with F	erson-in-Charge:									
		-								Follow-Up: Y	N
		Aland.								Follow-Up Date:	
		on in Charge:							_	Date:	
Sign	ature of Inspi	ector:			-					Date: Es Ima I as 7 7	-
				_						Date: 8/30/2022	



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



Establishment. (SXXNXX) (400	re College	Date: &	130/2022 Pag	e_2_of_2
Establishment: Thomas Moo Address: Manches ler s	treel	Complian	130/2022 Pag ce Achieved: 8130/20	22
Item / Location	Temp. Item/Loc	OBSERVATIONS		
	Account and a second	ution Temp.	· Item / Location	Tem
	OBSERVATIONS AND/OR	CORRECTIVE ACTIONS		
V Item Section of Code	De	scription of Violation		Dated Corrected
				or COS
	no violations obse	ved doing time &	# inspection	
The state of the s				
nature of Person in Charge				
nature of Person in Charge:		A I A AC	Date:	



HEALTH DIVISION

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



Estal	اع :olishment	hment: Charlies Homestyle Diner				8/	24/2	Pa	ge 1 of Z	No. of Risk Factor/Intervention Violations				4
		Highu						-	ne outly:45					
Owne	er/Permit Hold	der charlies	Homestyle Diner				itegory					Total Viola		
Emai			7,1-1,1-1		Pho				<u> </u>	Inspection Status:	(Crook)			1
Inspe	ction Type:	Routine	Re-inspection Pre-o	peratio		110.	Illes						Red	
_			FOODBORNE ILLNESS RI			2C A			nvestigation	Complaint	Othe	er		
		Circle design	nated compliance status (IN, OUT,					3 113 112 11		in appropriate box for 0	OC and/or I	2		
			ance OUT= not in compliance NO					of ann						
Compl	iance Status									corrected oil-site K - I	epeat violation	on		
O O III D II	idilice Status	S	upervision	cos	<u>i F</u>	R	Con	nplia	nce Status	Destruction of the Co			cos	R
1 6	IN DUT	Person in charge p	present, demonstrates knowledge and	1	\top	\dashv	15		ON AN TUCK	Protection from Co		n		
2	IN OUT N/A	performs duties Certified Food Pro	tantion Manager		+	{	-	-		Food separated and prot			ļ	
			loyee Health			\dashv	16		OUT N/A	Food-contact surfaces of Proper disposition or retu	_		-	\perp
3	TUOM		employees & conditional employee;			_	17	IN	OWAWO	reconditioned & unsafe for		ry served,		
		knowledge, respon	sibilities and reporting		_					Time / Temperature C	outrol for Sa	ifety		
-	IN)OUT		iction and exclusion			_	18	IN	OUT N/A NO	Proper cooking time and	temperature			T
-	III JOUT		conding to vomiting and diarrheal events			_	19	-	OUT N/A NO	Proper reheating procedu	res for hot hol	ding		
6 1	N OUT NO		ygiene Practices ng, drinking, or tobacco use				20	45	OUT N/A NO	Proper cooling time and t			<u> </u>	\perp
	N OUT NO	No discharge from			+	\dashv	21		DUT N/A NO	Proper hot holding tempe			 	╀
			ntamination by Hands			\dashv	23		OUT N/A NO	Proper cold holding temp			-	╄
8 (DUT NO	Hands clean & prop		\top	T	-	24	_	OUT WANO	Time as a Public Health C				+
9 (NOUT N/A NO	No bare hand conta	ct with RTE food	+	+	\dashv	-	1 2		Consumer Ad		ures and records		
10	NDUT	Adequate handwasi	ning sinks properly supplied & accessible		+	7	25	ÎN	OUT N/A	Consumer advisory provide		dercooked foods		Т
			oved Source							Highly Susceptible				
_	TUON		an approved source	<u> </u>	\perp	_	26	IN	OUTNA	Pasteurized foods used; p	rohibited foods	s not offered		П
	N OUT N/A (10)	Food received at pro		-	\perp	_		-		l / Color Additives and	Toxic Subs	tances		
	N OUT N/A HO		on, safe & unadulterated	-	+		27	450	OUT(N/A)	Food additives: approved	and properly u	sed		
17 1			ple: shell stock tags, parasite destruction			-	28		OUT N/A	Toxic substances properly				
	Prevalent cont	re improper practic	es or procedures identified as the r codborne illness or injury, Public H as to prevent foodborne illness or ir	nost ealth			-	_	_ [nformance with Appr	oved Proced	ures		
	Intervetitions 5	are control measure	is to prevent toodoorne iliness of if	ijury.		┸	19	IN	OUT	Compliance with variance/	specialized pro	cess/HACCP		
		Cond		GOOD R										
Mark ")	(" in box if num	bered item is not in	retail practices are preventative measure n compliance Mark "X" on a	s to contro	ol the	addi	tion of pa	athoge		nd physical objects into foo corrected on-site during		-		
						~ 10				corrected on-site during	inspection	R=repeat vi	olation	
Ompna	nce Status	Safe Fo	od and Water	cos	R	+	Comp	oliano	ce Status	The Track			COS	R
30	Pasteurized	eggs used where req		T	Т	-	43		In-use utensite	Proper Use of Use properly stored	tensils			
31	Water & Ice	from approved source		 	\vdash	1	44			oment & linens: properly st	ored dried & F	andled		
32	Variance obt	tained for specialized	processing methods			1	45			gle-service articles; proper				\dashv
			perature Control				46		Gloves used p		<u> </u>			\dashv
33	-		quate equipment for temp, control							Utensils, Equipment s	ınd Vending			
34 35		operly cooked for hot	holding		<u> </u>	1	47 ·		Food and non-	food contact surfaces clea	nable,			
36		awing methods used rs provided and accur	oto		-	-	48	<u> </u>		ned, constructed, & used				
	THEITHORNE		lentification				49		Warewashing:	installed, maintained, & us				
37	Food properly	y labeled: original con					50		Hot & cold wat	Physical Facil er available adequate pres				
		Prevention of I	ood Contamination	-			51			lled, proper backflow device				\dashv
38	Insects, rode	nts, & animals not pre	sent			1	52			te water properly disposed			\rightarrow	\dashv
39	Contaminatio	n prevented during fo	od preparation, storage & display] ,	53			properly constructed, supp			\rightarrow	\dashv
10	Personal dea					_	54		Garbage & refu	use properly disposed, facil	ities maintaine	d		\neg
11		properly used & stor	ed			C	55	X	Physical faciliti	es installed, maintained, &	clean			
12	vvasning truit	s & vegetables					56	-	Adequate venti	lation & lighting, designate	d areas used		\perp	
Гуре о	f Operation:									Li	cense Post	ad: 1	, G	5
		son-in-Charge:										cu.	Y (N	7
		and go.									llow-Up:	C	ノ N	4
										Fo	llow-Up Da	ite:		
Signatu	re of Person	in Charge:	g/m								ate:			
Signatu	re of Inspect	or:	2-//-											\dashv
		1									,arc. 8 -	24 - ZOZ		



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



Establishme	ent: charties	Hom esty !	e win	er		Date: 2 -	24-2022	Page 2	of 3
Address: 6	00 DW His	Inway_		-			ce Achieved:	1 age	_ 01
				TEMPERATURE OF	SERVATIONS	Sompilari			
	Item / Location	Ten	тр.	Item / Location		Temp.	· Item / Location	n	Temp
, Item			OBSI	ERVATIONS AND/OR CO	BRECTIVE ACT	IONS			
V Number	Section of Code			Descri	ption of Violation				ed Corrected
		Kitchen:	1						or COS
C 55									
(1)	2201.15	Contra	DETOI	20 3-bour si	nk in	17stepai	<u>r. </u>		
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ignature of Pe	rson in Charge:	75. C.L					Date		
Signature of Ins		w St	1				Date:		
3.44.00 01 111	,	-/-//					Date: 8-2	4-202	



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



Protection from Contamination 1 IN UT Person in charge present, demonstrates knowledge and performs duties 2 IN DUT N/A Certified Food Protection Manager 15 IN OUT N/A NO Food separated and protected 16 IN OUT N/A Food-contact surfaces cleaned and sanitized Fundamental Proper disposition or returned, previously served, reconditioned & unsafe food reconditioned	ns ns
Owner/Permit Holder: Email: Phone: Inspection Status: Green Yellow Red Inspection Type: 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 ompliance Status COS R Compliance Status COS R Protection from Contamination 15 IN OUT N/A NO Food separated and protected Employee Health 17 IN OUT N/A NO Proper disposition or returned, previously served, reconditioned a unsafe food	ons
Email: Phone: Inspection Status: Green Yellow Red	
Inspection Type: Routine Re-inspection Pre-operational Illness Investigation Complaint Other FOODBORNE HLNESS 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 ompliance Status COS R Compliance Status Protection from Contamination 15 INOUT N/A NO Food separated and protected 16 INOUT N/A Food-contact surfaces cleaned and sanitized Froper disposition or returned, previously served, reconditioned & unsafe food	
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Employee Health 16 INOUT N/A Food-contact surfaces cleaned and sanitized Froper disposition or returned, previously served, reconditioned & unsafe food	
reconditioned & unsafe food	
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4 INOUT Proper use of restriction and exclusion 18 IN OUT N/A NO Proper cooking time and temperature	
Procedures for responding to vomiting and diarrheal events 19 IN OUT N/A 10 Proper reheating procedures for hot holding	\dashv
Good Hygiene Practices 20 IN OUT N/ANO Proper cooling time and temperatures 5 IN OUT NO Proper eating, tasting, drinking, or tabaccourse	
7 IN OUT (2) No discharge, dishalling, or total to use 21 IN OUT N/ANO Proper hot holding temperatures	
Proper cold holding temperatures	
Preventing Contamination by Hands 23 NOUT N/A NO Proper date marking and disposition 34 NOUT (ANO Transport of the Contamination by Hands) 35 NOUT N/A NO Proper date marking and disposition	
DOUT N/A NO No bare hand contact with RTE food	
O NOUT Adequate handwashing sinks prepared to a like the consumer Advisory	
Approved Source 25 INOUT N/A Consumer advisory provided for raw/undercooked foods	
1 NOUT Food obtained from an appropriations	
26 IN OUT N/A O Food received at proper temperature 26 IN OUT N/A O Food received at proper temperature 27 IN OUT N/A O Food / Color Additives and Toxic Substances	
3 (NOUT Food in good condition, safe & unadulterated 27 IN OUT (NA) Food additives; approved and properly used	
4 IN OUT NANO Req. records available: shell stock tags, parasite destruction 28 IN OUT N/A Toxic substances properly identified, stored and used	+
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Good retail practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.	
lark "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 violativ	ion
milianca Statue	OII
Safe Food and Water Compliance Status Compliance Status Compliance Status	ŝ
Pasteurized eggs used where required 43 In-use utensils properly stored	_
Water & Ice from approved source 44 Utensils, equipment & linens: properly stored, dried, & handled	+
Variance obtained for specialized processing methods 45 Single-use/single-service articles: properly shared & used	+
Food To-more Court	+
Proper cooling methods used: adequate equipment for temp, control Utensils, Equipment and Vending	_
Proper cooling methods used: adequate equipment for temp. control Plant food properly cooked for hot holding 47 Food and non-food contact surfaces cleanable,	+
Proper cooling methods used: adequate equipment for temp. control Plant food properly cooked for hot holding Approved thawing methods used Thermoenters assisted as a second and non-food contact surfaces cleanable, 48 Properly designed, constructed, & used	+
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Address: 56 3 Dw Highway TEMPERATURE OBSERVATIONS Item/Location Temp.	Establishn	ment: merrimacic	H019		Date: 8/	25/2022	Page 7 of Z
TOTAL PROPERTY AND PROPERTY A	Address: ¿	63 Dw Hian	way				
OBSERVATIONS AND/OR CORRECTIVE ACTIONS OBSERVATIONS AND/OR CORRECTIVE ACTIONS Description of Violetics C. 55 6-501-12 - proop table infront of 3-bony sink soited with acc. of cleaning age of dentile account. C. 55 6-501-12 - malk in refrigerator floors and weaks soited with acc. of account. C. 56 6-501-12 - malk in refrigerator floors and weaks soited with acc. of account. C. 56 6-501-12 - malk in refrigerator floors and weaks soited with acc. of account. C. 56 6-501-12 - malk in refrigerator floors and weaks soited with acc. of account. C. 56 6-501-12 - malk in refrigerator floors and weaks soited with acc. of account. G. 56 6-501-12 - malk in refrigerator floors and weaks soited with acc. of account. C. 56 6-501-12 - malk in refrigerator floors and weaks soited with acc. of account.				TEMPERATURE OBSERV	VATIONS		
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Kitchen : C 55 6-501-12 - prop technic infront of 3-body sink soited with acc. of cleans. Cleans. C 55 6-501-12 - walk - in refrigerator: froots and weaks soited with acc of debris - arean. C 55 6-501-12 - froot below, cook line equipment soiled with acc. of areas and froot Abouts: Clean:	V)	Section of Code		Description of	of Violation		Dated Correcte
C 55 6-501-12 - peop temble intrant of 3-boy sink soited with acc. of clotis elean. C 55 6-501-12 - walk in retrigerator floors and walk soiled with acc of debtis - execut. C 55 6-501-12 - harr below coactine equipment soiled with acc. of great and food debtis acc. Geon' Institute of Person in Charge: Date:		1.142					or COS
C 55 6-501.12 - wank in refrigerator: floors and wells soiled with acc at debris - atean. C 69 6-501.12 - than below cook line equipment soiled with acc. of great and food devirs area.	-	-					
C 55 6-501.12 - wank in refrigerator: floors and wells soiled with acc at debris - atean. C 69 6-501.12 - than below cook line equipment soiled with acc. of great and food devirs area.	C 55	6-501-12 - PI	rep touble	infront of 3-boy	Sink soiled	with acc. of	
C 55 6-501.12 - walk - in refrigerator: floors and wells soiled with acc at debris - execus. C 55 5-501.12 - theor tells cook like equipment soiled with acc. of greek and food Aebris Gran'		d.	Chris. Clear	\ ·			
all of desire steem. Assorbed the service steem. Assorbed to the service steem.	C 55	6-501-12-	mark - In se	Gineratar Com			
grature of Person in Charge: Upun Cross.				ATTIGET 2 (00)	2 and walls	soiled with	
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Ignature of Person in Charge: January and food Aerons. Gran.	C 55	6-501.12+ H	DOF below	cook line equi	ipment soiled	with acc. a	E
Ignature of Person in Charge: June Cresco Dete:		919	ess and	food despris dea	×1.		
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Date: 8/23/2022			in sec				
	ignature of II	ispector.	2-6			Date: 8/23/	2022



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



Es	tablishment:	our lady of Mercy		Date	3/1	7/7-	Pag	ge 1 of 7	No. of Risk Factor/Intervention Vi	olations	CH
Ad	dress: 14/18	Berbooric Large Locad					7		No. of Repeat Risk Factor/Intervention Vi		
Ov	vner/Permit Hol	deroor lady of mercy choru		Risk	Cat	egory)	Total Vi		-
	nail:	Teleg Chil	- 1	Phon		-8,					0
Ins	pection Type:	Routine Re-Inspection Pre-ope			·-	Illee			Inspection Status: Green Yellow	Red	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FOODBORNE ILLNESS RISK			Z A F			vestigation	Complaint Other		
		Circle designated compliance status (IN, OUT, N/					DEIG		in appropriate box for COS and/or R		
		IN = in compliance OUT= not in compliance NO = n					t anni				
Con	npliance Status				_				corrected off-site IV = repeat violation		
-	TOTALICE OLICES	Supervision	cos	R	-	Com	ıplian	ice Status	Protection from Contamination	COS	S R
1	Поит	Person in charge present, demonstrates knowledge and		1	1	15	IN	OUT N/A NO	Food separated and protected		T
2	TINOUT N/A	Certified Food Protection Manager	-		-	16	- 3	OUT N/A		_	-
-		Employee Health			1	17		OUT N/A NO	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,		
3	TNOUT	Management/food employees & conditional employee:			-				reconditioned & unsafe food		
4	INOUT	knowledge, responsibilities and reporting		+-	4				Time / Temperature Control for Safety		
5	(IN OUT	Proper use of restriction and exclusion Procedures for responding to vomiting and diarrheal events		-	-	18	_	OUT N/A NO	Proper cooking time and temperature		
		Good Hygiene Practices	l.	+	-	19	_	OUT N/A (10)	Proper reheating procedures for hot holding	+	
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use			1	21	_	OUT N/A(NO	Proper cooling time and temperatures Proper hot holding temperatures	-	+
7	IN OUT NO	No discharge from eyes, nose, mouth		1	1	22	120000	DUT N/A NO	Proper cold holding temperatures		-
		Preventing Contamination by Hands				23	(N)	PUT N/A NO	Proper date marking and disposition	+	+
8	IN OUT NO	Hands clean & properly washed				24	IN	OUT WAND	Time as a Public Health Control: procedures and record	s	\top
9	IN OUT N/A (IO	No bare hand contact with RTE food							Consumer Advisory		
10	OUT	Adequate handwashing sinks properly supplied & accessible		1	-	25	IN C	OUT N/A	Consumer advisory provided for raw/undercooked foods	,	
11	IN DUT	Approved Source Food obtained from an approved source		1	1	26	101.4	OUTNIA	Highly Susceptible Populations		
12	IN OUT N/A NO	Food received at proper temperature		+		20	114.0		Pasteurized foods used; prohibited foods not offered d/Color Additives and Toxic Substances		
13	CINOUT	Food in good condition, safe & unadulterated		+	1	27	TINK	OUT (VA)	Food additives: approved and properly used		
14	IN OUT WANO	Req. records available; shell stock tags, parasite destruction		1		28	400	DUT N/A	Toxic substances properly identified, stored and used	+	+
	Risk factors a	are improper practices or procedures identified as the mo	st		l			Co	onformance with Approved Procedures		
	Interventions	are improper practices or procedures identified as the mo tributing factors of foodborne illness or injury. Public Hea are control measures to prevent foodborne illness or inju	ilth iry.			19	IN C	ANTUC	Compliance with variance/specialized process/HACCP	T	\Box
		GO	OD F	RETAI	LP	RACI	TICES	;			-
		Good retail practices are preventative measures t							and physical objects into foods.		
Mai	K X In box if nun	nbered item is not in compliance Mark "X" on app	ropria	ite box	for	COS a	and/or	COS =	corrected on-site during inspection R=repeat	violatio	n
om	oliance Status		cos	R		Comp	lianc	e Status		cos	R
30	Bootsuring	Safe Food and Water	* .					1	Proper Use of Utensils		
31	 	eggs used where required from approved source		+-		43			ls properly stored		\vdash
32		tained for specialized processing methods		-		44	├		ipment & linens: properly stored, dried, & handled ngle-service articles: properly stored & used		+
		Food Temperature Control		-	ł	46		Gloves used		+	+-1
33	Proper cooli	ng methods used: adequate equipment for temp, control							Utensils, Equipment and Vending		
34	Plant food p	roperly cooked for hot holding				47 ·		Food and nor	n-food contact surfaces cleanable,	T	\Box
35		awing methods used				48		Properly design	gned, constructed, & used		
36	Thermomete	ers provided and accurate		Щ		49		Warewashing	: installed, maintained, & used: test strips		Щ
37	Food proper	Food Identification ty labeled: original container			ŀ	50		Hot P cold we	Physical Facilities		_
		Prevention of Food Contamination			-	51			alled, proper backflow devices	+-	++
38	Insects, rode	ents, & animals not present		\Box		52			ste water properly disposed	+-	H
39	Contaminati	on prevented during food preparation, storage & display			Ì	53		-	properly constructed, supplied, & cleaned	+	\vdash
40	Personal cle			Ш		54		Garbage & ref	fuse properly disposed, facilities maintained		
41		s: properly used & stored			-	55		Physical facilit	ties installed, maintained, & clean		
42	vvashing frui	ts & vegetables				56		Adequate vent	tilation & lighting, designated areas used		
Тур	e of Operation:								License Posted:	₹)	N
Disc	cussion with Per	son-in-Charge;							Follow-Up:		N
									'	1	4
									Follow-Up Date:		
_	ature of Person								Date:		
Sigr	ature of Inspect	or: 5 1 5 - C							Date: 8/22/202	Z	\neg



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



Establis	hment: Our Lady	of Mercy	chorch			Date: Ç	122/2022	Page 2	of 7
Address	14/18 3000	osic Lake	Pace	d		Compliano	e Achieved: 6/2	1/7.00 7	7
			TEM	PERATURE OBSEI	RVATIONS		612	41426	_
	Item / Location	Temp.		Item / Location		Temp.	· Item / Locatio	n	Temp.
			DOUGH WAT A SHIP	The Alle Con Con-					
v Ite	m 0		BSERVATE	ONS AND/OR CORR	ECTIVE ACTIO	ONS			
Num	Section of Code			Description	of Violation				or COS
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ignature o	f Person in Charge:	4 Mars					Date:		
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



	ablishment: pc			Dat	e g	14/2	Pa	ge 1 of <u>2.</u>	No. of Risk Factor/Intervention Vic	lation	is d
Adı	dress:458 E	ow Highway unit A					_	ne out:30	No. of Repeat Risk Factor/Intervention Vic		
Ow	ner/Permit Hold	der: Portotino Restaurant LLC		_		ategory			Total Vio		_//=
Em	ail:			Pho			_עַר			Red	4 4
Ins	pection Type:	Routine Re-inspection Pre	operati	onal		fline	ss I	nvestigation	Complaint Other	Teu	_
		FOODBORNE ILLNESS	RISK FA	CTOI	RS A						
		Circle designated compliance status (iN, OU	T, N/A, N	O) for	eac	:h item			in appropriate box for COS and/or R		
		IN = in compliance OUT= not in compliance N	O = not o	bserv	ed N	I/A = no	t app	licable COS =	corrected on-sife R = reneat violation		
Com	pliance Status		Ico		R				The state of the s		
		Supervision	. 100	3 1	\rightarrow	CON	pira	nce Status	Protection from Contamination	CO	S
1	TUQ NI	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	_	-	\dashv	16	-	OUT N/A	Food-contact surfaces cleaned and sanitized	+	+
		Employee Health			\dashv	17	-	OUT NAMO	Proper disposition or returned, previously served,	+-	+
3	NOUT	Management/food employees & conditional employee:			-		165		reconditioned & unsafe food		\perp
4	INOUT	knowledge, responsibilities and reporting			4				Time / Temperature Control for Safety		
5	INOUT	Proper use of restriction and exclusion Procedures for responding to vomiting and diarrheal eve		+	\dashv	18	-	OUT N/A NO	Proper cooking time and temperature		
		Good Hygiene Practices	nus		\dashv	19	-	OUT N/A(NO)	Proper reheating procedures for hot holding	\perp	
6	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use			\dashv	20	_	OUT N/A NO	Proper cooling time and temperatures	\perp	+
7	IN OUT NO	No discharge from eyes, nose, mouth	_	+	\dashv	22		OUT N/A NO	Proper cold holding temperatures	+	+
		Preventing Contamination by Hands			\dashv	23	Willel	DUT N/A NO	Proper cold holding temperatures Proper date marking and disposition	+	+
8	IN OUT NO	Hands dean & properly washed		T	\neg	24	~~	OUT N/ANO	Time as a Public Health Control: procedures and records	-	+
9	IN OUT N/A NO	No bare hand contact with RTE food			7		-		Consumer Advisory		
10	DOUT .	Adequate handwashing sinks properly supplied & access	ible	\top	\neg	25	ΙΝ	DUT N/A	Consumer advisory provided for raw/undercooked foods	T-	
	-	Approved Source			\Box				Highly Susceptible Populations		_
11 (IN OUT N/A NO	Food obtained from an approved source		\perp	_	26	IN	OUT N/A	Pasteurized foods used; prohibited foods not offered	T	
12	IN OUT N/A(NO)	Food received at proper temperature		\perp	4				d / Color Additives and Toxic Substances		
14	IN OUT (IA)NO	Food in good condition, safe & unadulterated Req. records available: shell stock tags, parasite destruct		-	_	27	10 C	OUT (VA)	Food additives: approved and properly used		
-					\dashv	28	(IN	OUT N/A	Toxic substances properly identified, stored and used		
	Prevalent cont	re improper practices or procedures identified as the ributing factors of foodborne illness or injury. Publicate are control measures to prevent foodborne illness of the control measures to prevent foodborne illness of the control measures to prevent for the control measures to the control measures to prevent for the control measures to the control	e most Health			-	-	-	nformance with Approved Procedures		
	Interventions a	tile control measures to prevent roodborne illness o			L	19			Compliance with variance/specialized process/HACCP		
		Ocad astall	GOOD	RETA	IIL	PRACT	ICE:	S			
Mark	"X" in box if num	Good retail practices are preventative meas bered item is not in compliance Mark "X" or	ares to con	troi the	addi	ition of pa	thoge				
					× 10	1 003 a	Hu/O	005 -	corrected on-site during inspection R=repeat	/iolatio	n
omp	liance Status	Safe Food and Water	cos	R	-	Comp	liano	e Status		cos	R
30	Pasteurized	eggs used where required		T .	-	43		In tipe ofer-its	Proper Use of Utensils		_
31		from approved source		+	\dashv	44			s properly stored pment & linens: properly stored, dried, & handled	 	-
32	Variance obt	ained for specialized processing methods		+	1	45			rgle-service articles: properly stored & used	-	+
		Food Temperature Control			1	46		Gloves used p			+-
33		ng methods used: adequate equipment for temp, control							Utensils, Equipment and Vending		+
34		operly cooked for hot holding]	47 ·			-food contact surfaces cleanable,		\top
35		awing methods used	\bot	\perp		48		Properly desig	ned, constructed, & used		
36	I harmomete	rs provided and accurate				49		Warewashing:	installed, maintained, & used: test strips		
7	Food property	Food Identification y labeled; original container			-			T	Physical Facilities		
		Prevention of Food Contamination			-	50			ter available adequate pressure		
88	Insects, rode	nts, & animals not present		$\overline{}$	1	52			alled, proper backflow devices		\vdash
9		п prevented during food preparation, storage & display	1	+		53			ste water properly disposed properly constructed, supplied, & cleaned		\vdash
0	Personal clea			1	1	54		1	use properly disposed, facilities maintained		-
1	Wiping cloths	property used & stored			1	55			es installed, maintained, & clean		H
2	Washing fruit	s & vegetables			0	56	4		ilation & lighting, designated areas used		\vdash
'ype	of Operation:										
	'	on in Charac							License Posted: (<u>Y)</u>	N
иscl	ission with Pers	ion-in-Charge:							Follow-Up:	Ÿ)	N
									Follow-Up Date:	-	
igna	ture of Person	in Charge:	Pula						Date:		
	ture of Inspecto		Than						Date.		
wyi ic	nure or mapecto	" LUC	/						Date: Q -151_7 077		



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



E	iablishme	nt: Portofin	0		Date:g(7-1927	Page <u>2</u> of <u>2</u>	
H	idress:	58 PW Hic	I word on	HA		Compliano	ce Achieved:	
		Item / Location	T	ептр.	TEMPERATURE OBSERV			
				CITIP!	Mein / Location	Temp.	· Item / Location	n Ten
	_							
				OBS	ERVATIONS AND/OR CORREC	TIVE ACTIONS		
V	Item	Section of Code						Dated Correcte
	Number				Description o	T VIOIATION		or COS
			Kitchen	:				
ب	56_	6-501.14 -	Hood S	ticies i	expired - last	Service 7/70	12 00 an	
			day tre	6.1.0.06	expired - last	Carried Co.	72 2	
				-foem	The Contract to	SETUICO.		
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	turn of 5	(- 6)	00	h 1				
		rson in Charge:	Cally	BYL.			Date:	
gna	ture of Ins	pector:	2		~		Date: 😝 - U	9-2022



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



Est	ablishment: 60r	nams Coutering		Date 8	16/22	Page 1 of 2	No. of Risk Factor/Intervention Violations	8
Add	Iress: 326 PU	v Hignway				Time out?		
Ow	ner/Permit Holder:	burnams catering service		Risk C	ategory	C.	Total Violations	-
Em	ail:		-	Phone			Inspection Status: Green Yellow Red	رعوا
ins	ection Type:	Routine Re-inspection Pre-op	eratio	nal		ss Investigation	Complaint Other	
		FOODBORNE ILLNESS RIS						
		Circle designated compliance status (IN, OUT, N					in appropriate box for COS and/or R	
L.		IN = in compliance OUT= not in compliance NO =	not ob	served	N/A = no			
Com	pliance Status		COS			pliance Status		
		Supervision	1000	2	0011	phance Status	Protection from Contamination	SR
1	IN OUT P	erson in charge present, demonstrates knowledge and erforms duties			15	IN OUT N/A NO	Food separated and protected	T
2	20%	ertified Food Protection Manager			16	IN OUT N/A	Food-contact surfaces cleaned and sanitized	+
		Employee Health			17	IN OUT WAND	Proper disposition or returned, previously served,	+
3		anagement/food employees & conditional employee;	Т				reconditioned & unsafe food	
4		nowledge, responsibilities and reporting roper use of restriction and exclusion	-		18		Time / Temperature Control for Safety	-
5	7	ocedures for responding to vomiting and diarrheal events	+	+	19	IN OUT N/A NO	Proper cooking time and temperature Proper reheating procedures for hot holding	
		Good Hygiene Practices	-		20	IN OUT N/A NO	Proper cooling time and temperatures	+-
6	IN OUT NO Pri	oper eating, tasting, drinking, or tobacco use			21	IN OUT N/A RO	Proper hot holding temperatures	+-
7	IN OUT (10) No	discharge from eyes, nose, mouth			22	(IN)OUT N/A NO	Proper cold holding temperatures	+-
		Preventing Contamination by Hands			23	MOUT N/A NO	Proper date marking and disposition	
8		nds clean & properly washed		\perp	24	IN OUT NA NO	Time as a Public Health Control: procedures and records	
10	The state of the s				-		Consumer Advisory	
-10	0 (IN DUT Adequate handwashing sinks properly supplied & accessible Approved Source				25	IN OUT N/A	Consumer advisory provided for raw/undercooked foods	
11	IN DUT Foo	od obtained from an approved source		\top	26	IN OUT NIA	Highly Susceptible Populations Pasteurized foods used; prohibited foods not offered	
12							od / Color Additives and Toxic Substances	
13					27	IN OUT (IA)	Food additives: approved and properly used	
14					28	IN OUT N/A	Toxic substances properly identified, stored and used	1-1
	Risk factors are in	nproper practices or procedures identified as the m ting factors of foodborne illness or injury. Public He control measures to prevent foodborne illness or inj	ost		1	C	onformance with Approved Procedures	
	Interventions are c	control measures to prevent foodborne illness or injury.	anın ury.		19	IN OUT N/A	Compliance with variance/specialized process/HACCP	
		G	00D I	RETAIL	PRACT	ICES		
	(0.4%)	Good retail practices are preventative measures					and physical objects into foods.	
Mark	"X" in box if numbere	ed item is not in compliance Mark "X" on ap	propria	ite box f	or COS a	nd/or COS	=corrected on-site during inspection R=repeat violation	n
omp	iance Status		cos	R	Comp	liance Status	COS	R
30	Dest- visual variant	Safe Food and Water					Proper Use of Utensils	
31	Water & Ice from	s used where required		+	43		is properly stored	\perp
32		d for specialized processing methods		+	44		ipment & linens: properly stored, dried, & handled	+
		Food Temperature Control			46	Gloves used	ngle-service articles: properly stored & used	+
33	Proper cooling me	ethods used; adequate equipment for temp. control			100	0.0000000000000000000000000000000000000	Utensils, Equipment and Vending	
34		ly cooked for hot holding			47 ·	Food and no	n-food contact surfaces cleanable,	\vdash
35	Approved thawing	g methods used			48		gned, constructed, & used	\forall
36	Thermometers pro	ovided and accurate			49	Warewashing	; installed, maintained, & used: test strips	\Box
97	P	Food Identification					Physical Facilities	
37		eled: original container			50	Hot & cold wa	ater available adequate pressure	
38		revention of Food Contamination & animals not present			51		alled, proper backflow devices	
39		evented during food preparation, storage & display			52		ste water properly disposed	\square
40	Personal cleanline				53		s properly constructed, supplied, & cleaned	+
41	Wiping cloths: pro	perly used & stored			55		fuse properly disposed, facilities maintained ties installed, maintained, & clean	\vdash
42	Washing fruits & v	/egetables			56		tilation & lighting, designated areas used	\vdash
T	-60							
	of Operation:						License Posted:	N
Disc	ussion with Person-	-in-Charge;					Follow-Up; Y	N)
							Follow-Up Date:	
Siana	ture of Person in C				 -		-	
	gnature of Person in Charge: VIRIC gnature of Inspector:						Date:	_
oigi li	iture of mispector:	and the					Date: 8/16/2022	
								_



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



Establishment: GO FROMS CO	terina		Date: 6/	16/2027	Page 7 of 7
Address: 326 Pw Highwa	acu d		Compliant	0 Ashiovadi 2 / 1 / /	rage Z OI C
	T	EMPERATURE OBSERVATION	ONS	ce Achieved: 8/16/	202.7
Item / Location	Temp.	Item / Location	Temp.	· Item / Location	Ter
	OBSERVA	TIONS AND/OR CORRECTLY	E ACTIONS		
V Item Section of Code		Description of Vio		-	Dated Correct
Number Section of Code		Description of vio			or COS
 					
		<u>.</u>			
	No UTOLOTI	ons observed di	oring time	of inspect	ion.
				<u> </u>	
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				<u> </u>	
	<u> </u>	<u> </u>			
ignature of Person in Charge:	M VIRIL			Date:	
ignature of Inspector:	1				
	1/1			Date: 8/ 16	1202.2



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



Establis	shment: 13	WEEK WILL THE SECON		Dotati	· Ann	/	Dans 4 - 1 7	N. CDILLE		
Address	dress: 2 Amnerst Road						Page 1 of			
								No. of Repeat Risk Factor/Intervention Vio	lations	25
	Permit Hold	der: Mortneast foods LLC		Risk (Cate	gory:	C	Total Vio	lations	0
Email:				Phone	e:			Inspection Status: Green Yellow	Red	-
Inspecti	ion Type:	Routine Re-inspection Pre-o	peratio	onal		iline	ss Investigation	Complaint Other		
		FOODBORNE ILLNESS RI	SK FA	CTORS	AN					
		Circle designated compliance status (IN, OUT,	N/A, N	D) for ea	ach i	tem		in appropriate box for COS and/or R		
		IN = in compliance OUT= not in compliance NO	= not of	served	N/A	= not				
Complian	ice Status		COS				pliance Status			
		Supervision	100	5 10	1	COIII	priance Status	Protection from Contamination	COS	R
1 (IN	рит	Person in charge present, demonstrates knowledge and performs duties			1	15	IN DUT N/A NO	Food separated and protected		T
2 IN	OUT N/A	Certified Food Protection Manager	+		-	16	IN)OUT N/A		-	+
		Employee Health			1			Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,		+
3 (IN	but	Managemenl/food employees & conditional employee;			-	17	IN OUT NIA NO	reconditioned & unsafe food		
		knowledge, responsibilities and reporting			1			Time / Temperature Control for Safety		
7	OUT	Proper use of restriction and exclusion		<u> </u>		18	IN OUT N/A(NO)	Proper cooking time and temperature		T
2 (IN	рит	Procedures for responding to vomiting and diarrheal events				19	IN OUT N/A NO	Proper reheating procedures for hot holding		
6 IN	OUT (NO)	Good Hygiene Practices				20	IN OUT N/A(NO	Proper cooling time and temperatures		
		Proper eating, tasting, drinking, or tobacco use	-	-		21	IN OUT N/A (NO)	Proper hot holding temperatures		
7 114	7 IN OUT NO No discharge from eyes, nose, mouth						1N)OUT N/A NO	Proper cold holding temperatures		
8 (IN	OUT NO	Preventing Contamination by Hands			-	23	IN OUT N/A NO	Proper date marking and disposition		
	OUT N/A NO	Hands clean & properly washed No bare hand contact with RTE food		_		24	IN OUT N/A NO	Time as a Public Health Control: procedures and records		
10 (IN)		Adequate handwashing sinks properly supplied & accessible		-				Consumer Advisory		
· · · · · · · · · · · · · · · · · · ·	-	Approved Source	1			25	IN/OUT N/A	Consumer advisory provided for raw/undercooked foods		4
11 (II) (DUT	Food obtained from an approved source				26	IN OUT (TA)	Highly Susceptible Populations		
	OUT N/A (IO)	Food received at proper temperature	+-	+		20		Pasteurized foods used; prohibited foods not offered ad / Color Additives and Toxic Substances		Щ
13 (IN)	DUT	Food in good condition, safe & unadulterated	+	-	-	27	IN OUT N/A			
14 IN 0	OUT WATO	Req. records available: shell stock tags, parasite destruction	_	+	-	28	INJOUT N/A	Food additives: approved and properly used Toxic substances properly identified, stored and used	+	┼┤
F	Risk factors a	re improper practices or procedures identified as the	most		t			onformance with Approved Procedures		4
P. In	revalent cont iterventions a	re improper practices or procedures identified as the ributing factors of foodbome illness or injury. Public I tre control measures to prevent foodborne illness or i	lealth			19	IN OUT NA		T	
				D. 25mm a. v			L	Compliance with variance/specialized process/HACCP		Щ
		Good retail practices are preventative measure	GOOD I							
Mark "X"	in box if num	bered item is not in compliance Mark "X" on a						and physical objects into foods. =corrected on-site during inspection R=repeat	uintetie-	
omplianc				-			1 1 1	R-repeat	AOIABOII	-
Omphanic	e Status	Safe Food and Water	cos	R	1	ompl	liance Status	70 77 077 10	COS	R
30	Pasteurized	eggs used where required	Т	$\overline{}$	\vdash	43	In upp utone	Proper Use of Utensils ils properly stored		
31		from approved source	+	+	 	44		ipment & linens: properly stored, dried, & handled		\vdash
32	Variance obt	ained for specialized processing methods	+	+	-	45		ingle-service articles: properly stored & used		
		Food Temperature Control	-			46	Gloves used			
33	Proper coolin	ng methods used; adequate equipment for temp. control	T	T				Utensils, Equipment and Vending		\dashv
34	Plant food pr	operly cooked for hot holding				47 -	Food and nor	n-food contact surfaces cleanable,		\Box
35	Approved tha	awing methods used				48	Properly desi	gned, constructed, & used		\square
36	Thermomete	rs provided and accurate				49	Warewashing	r installed, maintained, & used: test strips		
		Food Identification						Physical Facilities		
37	Food properly	y labeled: original container		Ш.,		50	Hot & cold wa	ater available adequate pressure		
38	Januaria and	Prevention of Food Contamination			- 1-	51	Plumbing inst	alled, proper backflow devices		
39		nts, & animals not present	-		\vdash	52		ste water properly disposed		_
40	Personal dea	n prevented during food preparation, storage & display	┼	\vdash	-	53		s properly constructed, supplied, & cleaned		_
41		: properly used & stored	 		\vdash	54		fuse properly disposed, facilities maintained		_
42		s & vegetables	+-		_	55		ties installed, maintained, & clean		
						30	Adequate ven	tilation & lighting, designated areas used	_	
Type of C	Operation:							License Posted: 7	Y	V
Discussio	on with Pers	son-in-Charge:						Follow-Up:	Y (400
		\							1 4	2
-		00 111						Follow-Up Date:		
3ignature	of Person	in Charge:						Date: (- 12-22		
Signature	of Inspecto	or:						Date: 9/16/7017	-	\dashv
								-310. 71/LBL/11/1/.		



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



Establishme	ent: Burger Wi	19 #280S		Date: 8/	16/2022	Page 2 of 2
Address: 2	Amnerst	Road		Complianc	e Achieved: 8/(6/2022
	Item / Location	Тетр.	TEMPERATURE OBSERVA	1110/13		
	20000000	Temp.	Item / Location	Temp.	Item / Locutio	Te Te
			OBSERVATIONS AND/OR CORRECT	PESZE A CUECANIC		
V Item	Section of Code					D. (10)
Number	Section of Code		Description of	Violation		Dated Correct or COS
			<u> </u>			
					-	
		Ma Vi		1		
		NO III	plations observed d	bring time of	Tribection	
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		- 11.11				
	erson in Charge:	MANNEY			Date: 8 -	16-22
gnature of In:	spector:	1			Date: Q11	6/2022



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



FOOD ESTABLISHMENT INSPECTION REPORT

Ec	tablichmont: 4	isa's Tippy Tocs				. 1		KETOKI	
LS	tabiisiineni.				-	Page 1 of <u>2</u>	No. of Risk Factor/Intervention Violations		
Ad	dress: 33 B	aboosic Lave Road		Time i	ոկե	00	Time out: 50	No. of Repeat Risk Factor/Intervention Violations	(2)
Ov	vner/Permit Hold	der: Kay Amrock		Risk C	ateg	ory:	9	Total Violations	28
	nail:			Phone);			Inspection Status: Green Yellow Red	
ins	pection Type:	Routine Re-inspection Pre-o	peratio	nal		Illness	s Investigation	Complaint Other	
		FOODBORNE ILLNESS RI							
		Circle designated compliance status (IN, OUT,						in appropriate box for COS and/or R	
		IN = in compliance OUT= not in compliance NO							
Con	npliance Status							Topout violation	
0010	TOTAL CO DESCUE	Supervision	COS	S R	1 1	comp	liance Status	Protection from Contamination	R
1	IN OUT	Person in charge present, demonstrates knowledge and	\top		1	15	IN OUT N/A NO		_
2	IN OUT N/A	Performs duties Certified Food Protection Manager	-		{		_	Food separated and protected	\perp
_					{	16	IN)OUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,	\perp
		Employee Health Management/food employees & conditional employee;			ļ	17	IN OUT (VA) NO	reconditioned & unsafe food	
3	(IN) DUT	knowledge, responsibilities and reporting					1	Time / Temperature Control for Safety	
4	(IN)OUT	Proper use of restriction and exclusion				18	IN OUT N/A 10	Proper cooking time and temperature	T
5	NOUT	Procedures for responding to vomiting and diarrheal events	<u> </u>		L	19	IN OUT N/A	Proper reheating procedures for hot holding	
_	Lavaur G	Good Hygiene Practices				20	IN OUT N/A	Proper cooling time and temperatures	
7	IN OUT NO	Proper eating, tasting, drinking, or tobacco use	-	+	[- -	21	IN OUT N/A NO	Proper hot holding temperatures	
	IN OUT WO	No discharge from eyes, nose, mouth				22	ON AN TUCK!	Proper cold holding temperatures	
8	IN OUT NO	Preventing Contamination by Hands Hands clean & properly washed			 -		UN OUT N/A NO	Proper date marking and disposition	\perp
9	UN OUT N/A NO	No bare hand contact with RTE food	-	-		24	IN OUT MA NO	Time as a Public Health Control: procedures and records	\perp
10	DOUT	Adequate handwashing sinks properly supplied & accessible		+	-			Consumer Advisory	
	3	Approved Source	3		-	25	IN OUT (N/A)	Consumer advisory provided for raw/undercooked foods	
11	TNI OUT	Food obtained from an approved source		$\neg \neg$		26	IN OUT N/A	Highly Susceptible Populations Pasteurized foods used; prohibited foods not offered	
12					-	20		d / Color Additives and Toxic Substances	
13	IN OUT	Food in good condition, safe & unadulterated	+			27	IN OUT (IA)	Food additives: approved and properly used	T
14	IN OUT WAND	Req. records available: shell stock tags, parasite destruction		\top		_	IN OUT N/A	Toxic substances properly identified, stored and used	╁
	Risk factors a	re improper practices or procedures identified as the	most				Co	onformance with Approved Procedures	
	Interventions	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	lealth njury,			19	AND TUO NI	Compliance with variance/specialized process/HACCP	
	-		G00D 1	RETAIL				The way was a supposed to the	L.,
		Good retail practices are preventative measure						and physical phiects into foods	
Mar	k "X" in box if num	bered item is not in compliance Mark "X" on a						corrected on-site during inspection R=repeat violation	
om	oliance Status		cos	R	IC.	nene li	ance Status		
		Safe Food and Water	1000	1 17	01	DILIDIN	ance Status	Proper Use of Utensils	R
30	Pasteurized	eggs used where required			4	3	In-use utensil	s properly stored	П
31	Water & Ice	from approved source			4	4	Litensils, equi	pment & linens: properly stored, dried, & handled	\vdash
32	Variance ob	tained for specialized processing methods			4	5	Single-use/sir	ngle-service articles: properly stored & used	П
		Food Temperature Control			4	6	Gloves used p	properly	
33		ng methods used: adequate equipment for temp, control	_				1	Utensils, Equipment and Vending	
34		roperly cooked for hot holding		-	4	7	Food and non	-food contact surfaces cleanable,	
35 36		awing methods used	+	-	4	_		gned, constructed, & used	
50	Themomete	rs provided and accurate Food Identification		4	49	9	Warewashing:	: installed, maintained, & used; test strips	\Box
37	Food proper	y labeled; original container	Т		50	n T	Hot & cold was	Physical Facilities	
		Prevention of Food Contamination	1		51	-		ter available adequate pressure alled, proper backflow devices	
38	Insects, rode	nts, & animals not present	T		52	-		ste water properly disposed	\dashv
39	Contamination	on prevented during food preparation, storage & display	+		53	_		properly constructed, supplied, & cleaned	\dashv
10	Personal cle	anliness			54	4		use properly disposed, facilities maintained	\neg
\$1	Wiping cloths	s: properly used & stored			55	5		ies installed, maintained, & clean	\dashv
12	Washing fruit	s & vegetables			56	5		tilation & lighting, designated areas used	\dashv
Tr en	e of Operation:								
								License Posted:	4
Disc	ussion with Per	son-in-Charge:						Follow-Up: Y	V)
			- Marie Marie	pt. 57				Follow-Up Date:	
lian	ature of Person	in Charge: 10	Market Jahren						\dashv
								Date:	
sign	ature of Inspect	or:/i						Date: 8/10/2022	
		~ /					-		



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



Establishme	ent: Lisais Tippe	1 TOES		Date; 😭	10/2027	Page Z of Z
Address: 3	ant: Lisais Tippe 3 Baboosic (are Road		Compliano	e Achieved: 8/10	17022
			TEMPERATURE OBSERVAT	10213	8/10	1 50 5-E
	Item / Location	Temp.	Item / Location	Тетр.	· Item / Location	Temp
						
		0777				
, Item	T	ORSI	ERVATIONS AND/OR CORRECTIV	VE ACITONS		
V Number	Section of Code		Description of Vi	olation		Dated Corrected or COS
						0,000
			<u> </u>			
				<u></u>		
_						
		no violoti	ions absenced during	Ltime of in	shection.	
						
-						·
-						
			The state of the s			
ionature of D-	erson in Charge:	130				
					Date:	
ignature of Ins	spector:	1/1	~		Date: 9/1	0/2027



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



Es	tablishment: Quality Inn			Date	10/2	Pa	ge 1 of _2	No. of Risk Factor/Intervention Violation	ne (ĆX.
Ad	dress: 242	DW Highway						No. of Repeat Risk Factor/Intervention Violation		シッ
	vner/Permit Holo	Her: Sai Allied LLC	Т	Risk C			- 34 - /	Total Violatio	-	는 동
-	nail:	C - Alived God		Phone						2
Ins	pection Type:	Routine Re-inspection Pre-or	peratio		-	000 1				
-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FOODBORNE ILLNESS RIS					nvestigation			_
		Circle designated compliance status (IN, OUT, I						in appropriate box for COS and/or R		
		fN = in compliance OUT= not in compliance NO =								+
-		The state of the s						Corrected or - site K = repeat violation		-
COL	npliance Status	Supervision	cos	R	Cor	nplia	nce Status		OS	R
1	(DOUT	Person in charge present, demonstrates knowledge and	\top		-	V.	1	Protection from Contamination		
2	IN OUT NA	performs duties	-	-	15		ON AW TUC	Food separated and protected		
-	111001107	Certified Food Protection Manager			16	-	UT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,		
<u> </u>	1	Employee Health Management/food employees & conditional employee;			17	IN	OUTWANO	reconditioned & unsafe food		
3	LINOUT	knowledge, responsibilities and reporting						Time / Temperature Control for Safety		
4	UNOUT	Proper use of restriction and exclusion		4	18	IN	OUT N/A 10	Proper cooking time and temperature		
5	(IN)OUT	Procedures for responding to vomiting and diarrheal events			19	_	OUT N/A (IO)	Proper reheating procedures for hot holding		
	6 IN OUT Proper eating, tasting, drinking, or tobacco use				20	\rightarrow	OUT N/A NO	Proper cooling time and temperatures		
7	IN OUT NO	+	+	21		OUT N/A (10)	Proper hot holding temperatures			
_	111001 00			22	- 1	OUT N/A NO	Proper cold holding temperatures	-		
8	IN OUT GO		\top	23	\rightarrow	OUT N/A NO	Proper date marking and disposition	_		
9	IN OUT N/ANO	No bare hand contact with RTE food	+	+	24	IN	OUT WAYO	Time as a Public Health Control: procedures and records		
10	IN OUT	Adequate handwashing sinks properly supplied & accessible	+-	+	25	LINI	OUT (VA)	Consumer Advisory		
		Approved Source	1		2.5	1114	COTTON	Consumer advisory provided for raw/undercooked foods Highly Susceptible Populations		
11	INOUT	Food obtained from an approved source	T		26	IN	OUT (/A)	Pasteurized foods used; prohibited foods not offered		
12	IN OUT N/A 10	Food received at proper temperature	\top					d / Color Additives and Toxic Substances		
13	INDUT	Food in good condition, safe & unadulterated			27	IN	OUT I(A)	Food additives; approved and properly used		-
14	IN OUT NA NO	Req. records available; shell stock tags, parasite destruction			28	1	OUT N/A	Toxic substances properly identified, stored and used	\dashv	\exists
	Risk factors a	re improper practices or procedures identified as the n	nost	\neg			Co	onformance with Approved Procedures		
	Interventions	re improper practices or procedures identified as the r ributing factors of foodborne illness or injury. Public Ho are control measures to prevent foodborne illness or in	aaith jury,		19	1N	OUTAR	Compliance with variance/specialized process/HACCP		
			OOD R	ETAIL	PRAC	TICE	S			
		Good retail practices are preventative measures						and physical objects into foods.		\dashv
Mar	k "X" in box if num	bered item is not in compliance Mark "X" on ap						=corrected on-site during inspection R=repeat viola	tion	\neg
omj	oliance Status		cos	R	Com	pliano	ce Status	lco	e	R
		Safe Food and Water						Proper Use of Utensils	9. 1.	
30		eggs used where required			43		In-use utensi	ls properly stored	\top	\neg
31		from approved source	<u> </u>		44		Utensils, equi	ipment & linens: properly stored, dried, & handled		\Box
32	Variance ob	tained for specialized processing methods			45	\perp	Single-use/si	ngle-service articles: properly stored & used		
33	Broons one!	Food Temperature Control ng methods used: adequate equipment for temp. control		_	46	Ц	Gloves used			
34		raperly cooked for hot holding	┼		47	1	T =	Utensils, Equipment and Vending		
35		awing methods used	-		47	+-		n-food contact surfaces cleanable,	+	\dashv
36		rs provided and accurate			49	+		gned, constructed, & used : installed, maintained, & used: test strips	+	4
		Food Identification			1	<u> </u>	Truct-vearing	Physical Facilities	_	
37	Food proper	y labeled: original container			50	T	Hot & cold wa	ater available adequate pressure	-	-
		Prevention of Food Contamination			51			alled, proper backflow devices	_	7
38	Insects, rode	nts, & animals not present			52		Sewage & wa	ste water properly disposed	\top	7
39	Contamination	on prevented during food preparation, storage & display			53		Toilet facilities	s properly constructed, supplied, & cleaned	\top	٦
40	Personal de				54		Garbage & ref	fuse properly disposed, facilities maintained		7
41		s: properly used & stored			55	\perp	Physical facilit	ties installed, maintained, & clean		
42	Washing fruit	s & vegetables			56		Adequate veni	tilation & lighting, designated areas used		
Тур	e of Operation:							License Posted:		\dashv
Disc	ussion with Per	con-in-Charge:							N	\exists
-100	COUNTY WILL LEIS						Follow-Up: Y	(M)	1	
							Follow-Up Date:			
3ign	ature of Person	in Charge:						Date: 08 10 - 22		7
Signature of Inspector:								Detail # 411 4 2 2 2		-
		1-2/-		**				Date: 8/10/2922		J



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



Establishment: Quality Ton			Date: 10	in landa	Dana 2 of 6
Establishment: Quarity Inn Address: 242 DW Hanway	_		Compliant	10 2022	Page or
		TEMPERATURE OBSERVAT	TIONS	e Achieved: 8/10	1202L
Item / Location	Temp.	Item / Location	Temp.	· Item / Location	Tem
	- - -				
		Andrew Land III and II			
, Item	NAO	SERVATIONS AND/OR CORRECTI	VE ACTIONS		
V Number Section of Code		Description of V	folation for the state of the s		Dated Corrects or COS
					0, 000
	he nier	ations observed d		(
		PATTORE OF PROPERTY PA	Bring Times 6	st justection	
+ +					
		<i>M</i> 1			
gnature of Person in Charge:	5.//	RCV		Date: & -	012022



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



Establishment: Li++1	sprouts		Date 8	17/22	Pag	e 1 of 7	No. of F	Risk Factor/Interver	ntion Viola	ations	Ø
Address: 1700 Hilf						e ou 10:50		of Repeat Risk Factor/Intervention Violations			2
	HLE SPROUTS LLC		Risk C	ategon	y: (-				Total Viola		- 8
Email:			Phone:		6		Inspection Statu			Red	
Inspection Type: Ro	utine) Re-inspection Pre-ope				ess In	vestigation	Complain		OW K	.cu	
	FOODBORNE ILLNESS RISK							t Other		-	
C	ircle designated compliance status (IN, OUT, N/	A, NC) for eac	ch item			in appropriate box f	for COS and/or R			
	= in compliance OUT= not in compliance NO = r				ot appli						
Compliance Status		COS						Topour Toution			
	Supervision	1000) K	Con	npiian	ce Status	Protestion from	2 Contamination		cos	R
1 Perso	n in charge present, demonstrates knowledge and			15	ÎN	OUT N/A NO	Food separated and			T	T
	ed Food Protection Manager	<u> </u>	\dashv	16		DUT N/A		es cleaned and sanitized		—	-
	Employee Health		-	17		OUT N/A NO	Proper disposition or	returned, previously serv	/ed,	-	+
	gement/food employees & conditional employee;			-	1		reconditioned & unsa				
	edge, responsibilities and reporting r use of restriction and exclusion	-	+	40	Live		·	e Control for Safety			
	dures for responding to vomiting and diarrheal events		+-	18		OUT N/A NO	Proper cooking time			-	-
6	Good Hygiene Practices			20		OUT N/A NO	Proper cooling time a	cedures for hot holding		 	\vdash
6 IN OUT (NO) Proper	r eating, tasting, drinking, or tobacco use			21		OUT N/A (10	Proper hat holding te			-	┈
7 IN OUT NO No dis	charge from eyes, nose, mouth			22	(IN C	UT N/A NO	Proper cold holding to				
	venting Contamination by Hands			23	(IN s	UT N/A NO	Proper date marking	and disposition			
X	dean & properly washed			24	IN C	DUT N/A NO	Time as a Public Hea	ith Control; procedures a	ind records		
	e hand contact with RTE food		1		7		Сопянтег	Advisory			
TO INDOT Adequi	ate handwashing sinks properly supplied & accessible			25	IN C	OUT (VA)		rovided for raw/undercoo	ked foods		
11 INOUT Food o	Approved Source 11 INOUT Food obtained from an approved source						Highly Suscepti				
	The state of the s					DUT N/A Foo		and Toxic Substance			
13 IN OUT Food in	good condition, safe & unadulterated			27	INC	DUT MA		ved and properly used	26		
14 IN OUT N/A NO Req. re			28	470			perly identified, stored and	d used		\dashv	
Risk factors are impro	oper practices or procedures identified as the mo factors of foodborne illness or injury. Public Hea rol measures to prevent foodborne illness or inju	st				Co	nformance with A	pproved Procedures			
Interventions are cont	rol measures to prevent foodborne illness or inju	ilth Ty.		19	IN C	U N/A	Compliance with varia	nce/specialized process/l	HACCP	$\neg \neg$	
	G0	OD F	ETAIL	PRAC	TICES						
h1 - 1 - 15/11 1 - 17	Good retail practices are preventative measures to					ıs, chemicals, a	nd physical objects into	o foods.			\exists
Mark "X" in box if numbered it	em is not in compliance Mark "X" on app	ropria	te box fo	r COS	and/or	COS =	corrected on-site di	uring inspection F	₹=repeat vi	olation	
ompliance Status		cos	R	Com	pliance	Status				cos	R
30 Pasteurized eggs use	Safe Food and Water						Proper Use	of Utensils			
31 Water & Ice from app				43	-		s properly stored				_
	specialized processing methods			44	-			ly stored, dried, & handle	d		-
	Food Temperature Control			46		Gloves used p	ngle-service articles: pr	openy stored & used	+	\rightarrow	\dashv
	ds used; adequate equipment for temp, control						Utensils, Equipme	nt and Vending		201	\dashv
34 Plant food properly co	poked for hot holding			47 ·	I		-food contact surfaces				\dashv
35 Approved thawing me				48		Properly desig	gned, constructed, & us	ed			
36 Thermometers provid				49		Warewashing:	installed, maintained,	& used: test strips			
37 Food property labeled	Food Identification		_	FO	Т	11-10 4:	Physical F				
	ention of Food Contamination			50			ter available adequate				4
38 Insects, rodents, & an				52			alled, proper backflow disposite water properly disposite			+	-
39 Contamination preven	nted during food preparation, storage & display			53			properly constructed, s			+	\dashv
40 Personal cleanliness				54			use properly disposed,			-+	\dashv
41 Wiping cloths; propert				55		Physical faciliti	es installed, maintaine	d, & dean			\neg
42 Washing fruits & vege	tables			56		Adequate vent	ilation & lighting, design	nated areas used			
Type of Operation:			-			<u> </u>		Licanos Besta-i-	(.		
Discussion with Person-in-	Charge:							License Posted:	_ 0	ノ 及	
	onergo.							Follow-Up:	Y	N	1
								Follow-Up Date:			
Signature of Person in Cha	rger tolly to							Date:			\neg
Signature of Inspector:						D : - 1 1			\dashv		
	1-6							Date: 8/3/2	072		J
6	~										



Establishment: 11+14 Sproots

MERRIMACK FIRE DEPARTMENT

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



	ent: 11446 Sproo			Date: 8/1	12022	Page 2_ of 2_
Address:	66 Hilford R	ocia		Compliance	Achieved: 8/9	12012
	To AT at		TEMPERATURE OBSERVAT	TIONS		
	Item / Location	Temp.	Item / Location	Temp.	· Item / Location	on Temp
		OBS	ERVATIONS AND/OR CORRECTI	VE ACTIONS		
V Item Number	Section of Code		Description of V	iolation		Dated Corrected
						or COS
				-		
						
-						
-						
		vo olola	tions observed a	duting time o	& Increcti	on
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	-					
			=			
1						
 						
-						
+ +						
	Δ.					
gnature of Po	erson in Charge:	Allin			Date:	
gnature of In		VY Y				
9-10:01 6 01 111	Apolioi.	1/1			Date: 8/9	12027



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



Establishment: Bestown Road Baptist Church	h	Date 3	18/22	Pag	ge 1 of 7	No. of Risk Factor	/Intervention Viola	tions	75
Address: Lit Redford Road		Time in	1:00	Tim	e out :30	No. of Repeat Risk Factor			17
Owner/Permit Holder: Beaford Road Baptist (unitru.				. 9 -	, ,	Total Viola		
Email:	Uid	Phone:				Inspection Status: Gree		ed	2
Inspection Type: Routine Re-inspection Pre-or	orotio		Ille	nna la				eu -	
FOODBORNE ILLNESS RIS					vestigation)ther		
Circle designated compliance status (IN, OUT, I				S KAILSEY.		in appropriate box for COS and	/or P		
IN = in compliance OUT= not in compliance NO =		-		nt anni					
						corrected or - site K - repeat vit	лацоп		
Compliance Status Supervision	COS	S R	Coi	nptian	ice Status	B		cos	R
1 INOUT Person in charge present, demonstrates knowledge and		-		~	1	Protection from Contamin	ation	ī	
performs duties	-	\perp	15		CUT 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			
Employee Health			17	IN	ON NA TUO	Proper disposition or returned, pre- reconditioned & unsafe food	riously served,		
Management/food employees & conditional employee; knowledge, responsibilities and reporting	-				7	Time / Temperature Control fo	r Safety		
4 DOUT Proper use of restriction and exclusion	+		18	IN	OUT N/A NO	Proper cooking time and temperatu			
5 OUT Procedures for responding to vomiting and diarrheal events			19	IN	OUT N/A NO	Proper reheating procedures for ho		 	\vdash
Good Hygiene Practices	IN	OUT N/A NO	Proper cooling time and temperatu			\vdash			
6 IN OUT (NO) Proper eating, tasting, drinking, or tobacco use	T		21	IN	OUT N/A(NO)	Proper hot holding temperatures			\vdash
7 IN OUT NO No discharge from eyes, nose, mouth			22	IN)	OUT N/A NO	Proper cold holding temperatures			\vdash
Preventing Contamination by Hands			23	TI	OUT N/A NO	Proper date marking and disposition	n		
8 IN OUT (NG) Hands clean & properly washed			24	IN:	OUT N/A NO	Time as a Public Health Control: pr	ocedures and records		
9 IN OUT NA NO No bare hand contact with RTE food						Consumer Advisory			
10 IN DUT Adequate handwashing sinks properly supplied & accessible			25	IN (OUT N/A	Consumer advisory provided for ray	w/undercooked foods		П
Approved Source						Highly Susceptible Populat	ions		
11 Food obtained from an approved source			26	IN:	OUT N/A	Pasteurized foods used; prohibited	foods not offered		
12 N OUT N/ANO Food received at proper temperature	ļ					d / Color Additives and Toxic !	Substances		
13 INOUT Food in good condition, safe & unadulterated	1	-	27	100	OUT (VA)	Food additives: approved and prop	erly used		
14 IN OUT N/A IO Req. records available: shell stock tags, parasite destruction			28		OUT N/A	Toxic substances properly identified	, stored and used		
Risk factors are improper practices or procedures identified as the r Prevalent contributing factors of foodborne illness or injury. Public H Interventions are control measures to prevent foodborne illness or in	nost ealth		-		Co	nformance with Approved Pr	scedures		
Interventions are control measures to prevent foodborne illness or in	jury.		19	IN	OUT (VA)	Compliance with variance/specialize	d process/HACCP		
		RETAIL							
Good retail practices are preventative measure									
Mark "X" in box if numbered item is not in compliance Mark "X" on a	propri	ate box fo	or COS	and/o	COS =	corrected on-site during inspec	tion R=repeat vi	olation	
Compliance Status	cos	R	Com	plianc	e Status			cos	R
Safe Food and Water						Proper Use of Utensils			
30 Pasteurized eggs used where required	-		43	<u> </u>	In-use utensi	s properly stored			
31 Water & Ice from approved source	-	1	44	-		pment & linens: properly stored, drie			_
32 Variance obtained for specialized processing methods			45	-		ngle-service articles: properly stored	& used		_
Food Temperature Control 33 Proper cooling methods used: adequate equipment for temp. control	_		46		Gloves used				_
Proper cooling methods used: adequate equipment for temp. control Plant food properly cooked for hot holding	-	-	47	Т	Lever	Utensils, Equipment and Ven	ding		-
35 Approved thawing methods used	-	+	47	-	-	-food contact surfaces cleanable,		\rightarrow	-
36 Thermometers provided and accurate		+	48			gned, constructed, & used			
Food Identification	Щ.		45		vvarewasning	: installed, maintained, & used; test s Physical Facilities	inps		-
37 Food properly labeled: original container	T	_	50	T	Hot & cold wa	ter available adequate pressure			-
Prevention of Food Contamination			51	-		alled, proper backflow devices		\rightarrow	\dashv
38 Insects, rodents, & animals not present	Τ.	T	52			ste water properly disposed		\rightarrow	\dashv
39 Contamination prevented during food preparation, storage & display	\vdash		53			properly constructed, supplied, & cle	aned	_	\dashv
40 Personal cleanliness			54		1	use properly disposed, facilities mair		-	
41 Wiping cloths: properly used & stored			55			ies installed, maintained, & clean		\dashv	\dashv
42 Washing fruits & vegetables			56		Adequate ven	tilation & lighting, designated areas u	sed		\neg
Turner of Occasions						1		*	
Type of Operation:						License	Posted:	Y) N	
Discussion with Person-in-Charge:						Follow-U	p: ``		1)
						Follow-U	p Date:		-
Signature of Borean in Charges	w	<u></u>							\dashv
		X				Date:			_
Signature of Inspector:						Date: C	318/2022		



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



Establishment	Bedford Room	d Ball	tist church	Date: 8/	8/1022	Page Z	of 2
Address: 617	- Redford Boa	,d		Compliand	ce Achieved 8/8	1027	
	Item / Location		TESTFERATURE OBSERVA	77.74.18.			
-	Mem / Location	Temp.	Item / Location	Тетр.	· Item / Locat	ion	Temp
							-
					 		-
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		- - -					+
			DESERVATIONS AND/OR CORRECT	TVE ACTIONS			
V Item	Section of Code					Data	d Corrected
Number	3001101 0000		Description of	Violation			or COS
					<u> </u>		
						-	
		No uso	lations observed	Ja Chen Lin	en al inche	outa	
			27/26/1960	an (ref Till	W OF HALE	(110)	
+ +							
 - -							
	_						
					<u> </u>		
+							
)					\dashv
ignature of Pers	on in Charge:	our d	1 1 10		Date:		\longrightarrow
ignature of Insp		CLA	- Jary				
5		//			Date:8/3	17027	



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



Es	tablishment:	- Eleven		Data	10/17	_	ge 1 of				_
	dress: 728								sk Factor/Intervention Viol		J <u>.</u>
				Time ir			ne out	No. of Repeat Ri	sk Factor/Intervention Viol	ations	ø_
	ner/Permit Hold	der St. Kryolos Inc.		Risk C	ategor	/: D			Total Viola	ations	₹.
Еп	ıail:			Phone:				Inspection Status:	Green Yellow F	Red	
Ins	pection Type:	Routine Re-inspection Pre-op-	eratio	nal	Illn	ess li	nvestigation	Complaint	Other		_
		FOODBORNE ILLNESS RIS							Other		
		Circle designated compliance status (IN, OUT, N	A. NC) for eac	ch item	3 23 23 2		in appropriate box for	COS andler B		
		IN = in compliance OUT= not in compliance NO =				ot onn					
C	mlia Otat	The state of the s			W/4 - 11	n app	ilicable CO3 -	corrected on-site K =	repeat violation		_
Con	pliance Status	C	cos	R	Cor	nplia	nce Status			cos	Ř
1	INOUT	Supervision Person in charge present, demonstrates knowledge and	T		-	-)	Protection from	Contamination		
<u> </u>	_	performs duties		\perp	15	44	OUT N/A NO	Food separated and p	rotected		
2	IN OUT N/A	Certified Food Protection Manager			16	IN	DUT N/A	Food-contact surfaces	cleaned and sanitized		
		Employee Health			17	IN	OUT N/A NO	Proper disposition or re reconditioned & unsafe	turned, previously served,	T	
3	D I OUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Time / Temperature			_
4	I) OUT	Proper use of restriction and exclusion	1	+	18	IN	OUT N/A NO	Proper cooking time ar			
5	INPUT	Procedures for responding to vomiting and diarrheal events		-	19	\rightarrow	OUT N/A(NO	Proper reheating proce			-
		Good Hygiene Practices	<u> </u>		20	_	OUT N/A NO	Proper cooling time an		+	
6	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use			21	-	OUT N/A NO	Proper bot holding tem		+	\vdash
7	IN OUT (NO)	No discharge from eyes, поse, mouth			22		OUT N/A NO	Proper cold holding ten		+	
		Preventing Contamination by Hands	1		23	1	OUT N/A NO	Proper date marking an	`	+	
8	ON TUO	Hands dean & properly washed	Τ		24		OUT NA NO				
9	IN OUT N/A NO	No bare hand contact with RTE food		1		1 414	OU INA IIO		Control: procedures and records		
10	INOUT	Adequate handwashing sinks properly supplied & accessible	~	+	25	LIM	OUT (IA)	Consumer A			
		Approved Source	~	1	23	IIN	OUTMAN		vided for raw/undercooked foods		
11	TUOUT	Food obtained from an approved source	· · ·	T	26	LIN	OUTATA	Highly Susceptibl			
12	IN OUT N/A NO	Food received at proper temperature		+		114		d / Color Additives a	prohibited foods not offered		
13 (IN OUT	Food in good condition, safe & unadulterated		+	27	LINI	OUT (/A)			1	
14	IN OUT NA NO	Req. records available: shell stock tags, parasite destruction		-	28	+-	OUT N/A	Food additives; approve	d and properly used		
	Risk factors a		n må			U					
	Prevalent cont	re improper practices or procedures identified as the m ributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or inju	aith	- 1	-	-	1	nformance with Ap			
	THE VEHICOIS E				19		OUT N/A	Compliance with variance	e/specialized process/HACCP		
				ETAIL							×0
Mar	c "X" in hoy if num	Good retail practices are preventative measures bered item is not in compliance Mark "X" on app									
1416411	X III DOX II NUIII	bered item is not in compliance Mark "X" on app	ropria	te box to	or COS	and/o	r COS =	corrected on-site dur	ng inspection R=repeat v	iolation	
omp	liance Status		cos	R	Com	pliano	e Status			cos	R
		Safe Food and Water						Proper Use of			
30		eggs used where required			43		In-use utensil	s properly stored			\neg
31		from approved source			44		Utensils, equi	pment & linens; properly	stored, dried, & handled		
32	Variance obt	tained for specialized processing methods			45		Single-use/sir	ngle-service articles: prop	erly stored & used		
22		Food Temperature Control			46		Gloves used	properly			
33		ng methods used; adequate equipment for temp, control						Utensils, Equipmen	t and Vending		
34		operly cooked for hot holding			47 ·	-	Food and nor	-food contact surfaces cl	eanable,		
35 36		awing methods used			48	-		gned, constructed, & used			
30	Thermomete	rs provided and accurate			49	<u> </u>	Warewashing	: installed, maintained, &			
37	Fond propod	Food Identification y labeled: original container			-	T	I area area	Physical Fac			
01	T cod properly				50	_		ter available adequate pr			_
38	Incode rada	Prevention of Food Contamination			51			alled, proper backflow de			_
39					52			ste water properly dispos			_
40	Personal clea	n prevented during food preparation, storage & display		_	53			properly constructed, su			\perp
41		properly used & stored			54	<u> </u>	-	use properly disposed, fa			_
12		s & vegetables			55			ies installed, maintained,		\perp	
	TT IN 19 IT OIL				56		Adequate vent	tilation & lighting, designa	ted areas used		
Гуре	of Operation:								License Posted:	V)N	\dashv
	ussion with Pers	son-in-Charge							LICCHSC I Cated.	-N	\forall
J-106	CONTAINING FEIS	ontar-onalys,						[-	Follow-Up:	/ (N	
		01 E 1 1							Follow-Up Date:	_	
ian:	ature of Person	in Charge							Date		\dashv
									Date:		\Box
oign	ature of Inspect	or:							Date: 8/8/2022		
		6	-								_



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



Address: 17.2 P. DEL HIGH MAJOLY TEMPERATURE DISSEVATIONS Temp	Esta	stablishment: Seven - Eleven					Date: 8-8-2-022 Page <u>z</u> of <u>2</u>					
THE TOTAL SOCIETY TO SOCIETY S					_1				Com	pliance Achieved:		
OBSKRIVATIONS AND OBSERVATIONS Description of Violation Food prep Area: 1						T						
V Number Section of Code Description of Violation Dates Connected or COS			Item/Location		Temp.		Item / Loc	ition	Temp.	Item / Location		Temp.
V Number Section of Code Description of Violation Dates Connected or COS												
V Number Section of Code Description of Violation Dates Connected or COS												
V Number Section of Code Description of Violation Dates Connected or COS			<u>.</u>									
V Number Section of Code Description of Violation Dates Connected or COS												
V Number Section of Code Description of Violation Dates Connected or COS												
Number Section of Code Food prep Area: Food prep Area: 15 10 5-205.1 Heurowan sink in backroom by clear by these mental preparations of the preparation of						OBSERVA	TIONS AND/OR	CORRECTIVE ACTI	ONS			- 11
Number South in Code South i		Item					D	and the set Welstine			Date	ed Corrected
Signature of Person in Change:	V		Section of Code				De	Scription of violation				or COS
Signature of Person in Change:				Food Pr	CP AT	Cec-	1					
Signature of Person in Chapge: Date:			c assul						4000	ad a buse to		
Signature of Person in Chapge: Date:	14	(6	5-203-11-	HALKOL	<u> Cas</u>	n Kini	Z In De	ECIZIFOOM L	je e cia	sti bol mitse. I	-27/13	
Signature of Person in Charge: Date:				Handu	بحويد	Sink	must)	e accessing	are en	t cell timps.		
Signature of Person in Charge: Date:												
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Signature of Person in Charge:	\dashv			r1								
Signature of Person in Charge:				4/2		~				Data		
Signature of Inspector: Date: 8/8/2627	Sign	nature of Person in Charge:										
	Sigr	ature of I	of Inspector:							Date: 81	8/2027	



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



Es	tablishment:	Reeds Fe	my Market	1	Date	3/8/2:	7 F	age 1 of Z	No. of Risk Factor/Intervention V	iolation	s 77
Ac	Idress: 601	pw Hig	hway.				1	Time out 2:00			-
		lolder: seem				Categor			Total V		- 120
	naii:	O	0-01-00		Phone		,,,				90
ins	pection Type	: (Routine)	Re-inspection Pre-o							Red	
-	- Poolion Type	. Itodine	FOODBORNE ILLNESS RE	peration				s Investigation	Complaint Other		
		Circle des	ignated compliance status (IN, OUT,								
									in appropriate box for COS and/or R corrected on-site R = repeat violation		
			ipitatioe Oo 1 - Not it compliance No	- 1101 005	serveu	N/A - II	IOL 3	ipplicable GUS =	corrected on-site R = repeat violation		
Con	npliance State	3	6	cos	R	Co	mpl	liance Status		CO	S F
1	INOUT	Person in charg	Supervision ge present, demonstrates knowledge and		T	 	-6	—	Protection from Contamination		
Ľ		performs duties			ļ	15	; <u>\</u>	OUT N/A NO	Food separated and protected		
2	IN OUT N/A	Certified Food I	Protection Manager			16	3	IN DUT N/A	Food-contact surfaces cleaned and sanitized		
			mployee Health			17	<i>r</i> [IN OUT N/A NO	Proper disposition or returned, previously served, reconditioned & unsafe food		
3	(IN)OUT	Management/fo knowledge, res	od employees & conditional employee; consibilities and reporting						Time / Temperature Control for Safety		
4	IN OUT		estriction and exclusion			18	3	IN OUT N/A NO	Proper cooking time and temperature		
5	OUT OUT	Procedures for	responding to vomiting and diarrheal events			19	,	IN OUT N/A(NO)	Proper reheating procedures for hot holding	_	+
		Good	Hygiene Practices			20	П	IN OUT N/A (O)	Proper cooling time and temperatures		+
6			asting, drinking, or tobacco use			21		IN OUT N/A NO	Proper hot holding temperatures	$\neg \neg$	_
7	IN OUT	No discharge fro	om eyes, nose, mouth			22		IN OUT N/A NO	Proper cold holding temperatures	\neg	\top
_	V-	Preventing	Centamination by Hands			23		IN OUT N/A NO	Proper date marking and disposition		_
8		O Hands clean & p	roperly washed			24		IN OUT NIANO	Time as a Public Health Control: procedures and recor	ds	\top
9	IN OUT N/A		intact with RTE food						Consumer Advisory		
10	IN OUT		vashing sinks properly supplied & accessible	3		25		IN PUT N/A	Consumer advisory provided for raw/undercooked food	5	
44	Kni out		pproved Source				`		Highly Susceptible Populations		
11	N OUT		om an approved source		\square	26	\perp	IN OUT NA	Pasteurized foods used; prohibited foods not offered		
12	IN OUT N/A		proper temperature				_		d / Color Additives and Toxic Substances		
14	IN OUT NAM		ndition, safe & unadulterated		Ш	27	- 10	IN OUT N/A	Food additives: approved and properly used	\perp	
14			silable: shell stock tags, parasite destruction		Щ	28		IN OUT NIA	Toxic substances properly identified, stored and used		
	Prevalent	s are improper pra- contributing factors	ctices or procedures identified as the of foodborne illness or injury. Public H sures to prevent foodborne illness or in	most łealth		-	_	Co	onformance with Approved Procedures		
	Interventio	ns are control meas	sures to prevent foodborne illness or in	njury.		19	\perp	IN OUT N/A	Compliance with variance/specialized process/HACCP		
				GOOD R							
Mai	rk "Y" in hoy if	Go numbered item is no	od retail practices are preventative measure								
IAICII	K A III DOXIII	idinbered item is no	ot in compliance Mark "X" on a	ppropriat	e box	tor COS	and	d/or COS =	corrected on-site during inspection R=repea	t violatio	'n
20m	pliance Status			cos	R	Com	- iplia	ance Status		cos	R
0.0	T		Food and Water						Proper Use of Utensils		
30		zed eggs used where				43	\perp	In-use utensil	is properly stored		
32		Ice from approved so			\square	44	+		ipment & linens: properly stored, dried, & handled		
32	varianc		red processing methods	لــــــــــــــــــــــــــــــــــــــ		45	+		ngle-service articles: properly stored & used		
33	Proper		imperature Control adequate equipment for temp, control	T		46	\perp	Gloves used			
34		od properly cooked for		-		47		F44	Utensils, Equipment and Vending		
35		d thawing methods use		+ +		47	+		n-food contact surfaces cleanable,	+	-
36		neters provided and ad		+		49	+		gned, constructed, & used	+	+
			Identification			-43		Walewasi II Ig.	: installed, maintained, & used: test strips Physical Facilities		4
37	Food pr	perly labeled; original		T		50	T	Hot & cold wa	iter available adequate pressure	T	
		Prevention of	of Food Contamination			51	+		alled, proper backflow devices	+	+
38	Insects,	rodents, & animals not	present	T		52	+		ste water properly disposed		+
39	Contam	nation prevented durin	g food preparation, storage & display			53	\top		s properly constructed, supplied, & cleaned	+	+
40	Persona	cleanliness				54	1		fuse properly disposed, facilities maintained	+	+
41	Wiping	oths: properly used &	stored			55	T	Physical faciliti	ties installed, maintained, & dean	1	
42	Washing	fruits & vegetables				56		Adequate vent	tilation & lighting, designated areas used		
Тъ гот	- of Oii-	<u> </u>	~								
	e of Operation								License Posted:	(Y)	N
Disc	cussion with	erson-in-Charge)						Follow-Up:	Y	(N)
									Follow-Up Date:	`	
Cia-	ature of Do-	on in Character									
		on in Charge:	-6-						Date:		
Sigr	nature of Insp	ector:	- >-						Date: 8 - 8 - 7.07	7	



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



Establishment: Reed's Fer	14 Market		Date: 0	7 7 - 3 -	Danie de d
Establishment: Reed's Fer Address: 601 000 High	way		Compliant	3-2022	Page _2_ of _2
		TEMPERATURE OBSERVAT	TONS	e Achieved: 8-8	3-2022
Item / Location	Temp.	Item / Location	Temp.	· Item / Locatio	n Te
	OB	SERVATIONS AND/OR CORRECTIV	VE ACTIONS		
V Item Section of Code		Description of Vi	plation		Dated Correc
					or COS
		4			
	We viol	ations were do	oring time of	increation	
			1	uspection.	
		_			
					-
	1/2				
	7	/		<u></u>	
nature of Person in Charge:				Date:	
gnature of Inspector:	2.0//	7			
	7-0			Date: 8-8	-2022



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



Est	ablish	nment: KT	nder care Learning Cente		Date 5	5/22	Pag	e 1 of Z _	No. of Risk Factor/Intervention Violations	25			
Add	dress	4 001	ntinental Blud.		Time in	1:00	Time	outh : 30	No. of Repeat Risk Factor/Intervention Violations	0			
Ow	ner/P		er Kinder Care Learning cent	er	Risk Cat	egory:	_		Total Violations	1			
Em					Phone:		- O		Inspection Status: Green Yellow Red				
Insi	pectio	n Type:	(Routine) Re-inspection Pre-op	eratio	ınal	lilne	ss Inv	vestigation	Complaint Other				
		7,5	FOODBORNE ILLNESS RIS										
			Circle designated compliance status (IN, OUT, N				DLIKI		in appropriate box for COS and/or R				
			IN = in compliance OUT= not in compliance NO =				annli						
			The state of the s										
Com	pliano	e Status	Supervision	COS	S R	Com	plian	ce Status	COS	R			
_	ZIN	NIT	Person in charge present, demonstrates knowledge and	1			7	\	Protection from Contamination				
1			performs duties	_		15	\Rightarrow	DUT N/A NO	Food separated and protected				
2	(IN)	DUT N/A	Certified Food Protection Manager			16	-	DUT N/A	Food-contact surfaces cleaned and sanitized	-			
			Employee Health			17	IN	ON AIN TUC	Proper disposition or returned, previously served, reconditioned & unsafe food				
3	TIMO	DUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Time / Temperature Control for Safety				
4	(IN)	ΥUΥ	Proper use of restriction and exclusion			18	IN	OUT N/A NO	Proper cooking time and temperature				
5	(IN)	TUC	Procedures for responding to vomiting and diarrheal events			19	IN	OUT N/A (O)	Proper reheating procedures for hot holding				
			Good Hygiene Practices			20	IN C	OUT N/A NO	Proper cooling time and temperatures				
6	INC	UT NO	Proper eating, tasting, drinking, or tobacco use			21	IN C	OUT N/A TUC	Proper hot holding temperatures				
7	IN C	ON TU	No discharge from eyes, nose, mouth			22		ON ANN TUC	Proper cold holding temperatures				
			Preventing Contamination by Hands			23	INS	ON AW TU	Proper date marking and disposition				
8		UT NO	Hands clean & properly washed			24	IN C	ON AND TUC	Time as a Public Health Control: procedures and records				
9	7	UT N/A NO	No bare hand contact with RTE food						Consumer Advisory				
10	(IN)	TU	Adequate handwashing sinks properly supplied & accessible			25	IN C	DUT N/A	Consumer advisory provided for raw/undercooked foods				
	Approved Source Highly Susceptible Populations												
11	INOUT Food obtained from an approved source 26 INOUT N/A Pasteurized foods used; prohibited foods not offered												
12	-	UT N/A(NO)	Food received at proper temperature	-					d / Color Additives and Toxic Substances				
13	IND	UT N/A NO	Food in good condition, safe & unadulterated			27	1-0-	DUT (N/A)	Food additives: approved and properly used	-			
14		 /	Req. records available: shell stock tags, parasite destruction	1		28		DUT N/A	Toxic substances properly identified, stored and used				
	R Pr	isk factors a evalent cont	re improper practices or procedures identified as the rr ributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or inj	ost ealth			T		onformance with Approved Procedures				
	Int	terventions a	are control measures to prevent foodborne illness or in	jury.		19	IN C	DUT(N/A)	Compliance with variance/specialized process/HACCP				
					RETAIL								
D.d.o.	1. WWW :	- h 75	Good retail practices are preventative measures										
Mar	K X I	n box it num	bered item is not in compliance Mark "X" on ap	propri	ate box for	COS a	and/or	COS:	=corrected on-site during inspection R=repeat violation	n			
Comp	lianc	e Status		cos	R	Comp	lianc	e Status	cos	R			
			Safe Food and Water						Proper Use of Utensils				
30	\square		eggs used where required	ļ	4	43			ils properly stored	\Box			
31			from approved source		44	44	-		ipment & linens; properly stored, dried, & handled	\perp			
32		Variance ob	tained for specialized processing methods			45			ingle-service articles: properly stored & used				
22		D	Food Temperature Control			46		Gloves used		1			
33	-		ng methods used: adequate equipment for temp, control		+	47			Utensils, Equipment and Vending				
35			awing methods used			47 ·			n-food contact surfaces cleanable,				
36			ers provided and accurate	\vdash	+	48			igned, constructed, & used	-			
50		THEITHOUTER	Food Identification				L	evarewasi in iç	g: installed, maintained, & used: test strips Physical Facilities				
37		Food proper	ly labeled: original container	Ī		50		Hot & cold wa	ater available adequate pressure				
			Prevention of Food Contamination			51			talled, proper backflow devices				
38	X	Insects, rode	ents, & animals not present	<u> </u>	\top	52		-	aste water properly disposed	\vdash			
39		Contamination	on prevented during food preparation, storage & display			53			s properly constructed, supplied, & cleaned	\Box			
40		Personal de	anliness			fuse properly disposed, facilities maintained							
41		Wiping cloths	ties installed, maintained, & clean	Ш									
42		Washing frui	ts & vegetables			56		Adequate ver	ntilation & lighting, designated areas used				
Тур	e of C	operation:							License Posted:	N			
Disc	cussic	n with Per	son-in-Charge:						Follow-Up;	N			
									Follow-Up Date:				
0:		-/	100 - 100000		-				<u> </u>				
Sign	ature	of Person	in Charge: McChelle Actor:	<u> </u>	<u>_l_</u>				Date: 552				
Sigr	nature	of Inspect	tor: Suffer						Date:8/5/2027				



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



Establishmer	II Kintler corne	Leurning	center	Date: g -	5-2022	Page 2 of 2
Address: 4	continented	Blud -			e Achieved:	
			TEMPERATURE OBSER	VATIONS		
	Item / Location	Temp.	Item / Location	Temp.	· Item / Locat	tion Tem
_						
1 14		OBS	SERVATIONS AND/OR CORRE	CTIVE ACTIONS		
/ Item Number	Section of Code		Description	of Violation		Dated Correct
11/8B-	1	tchen:				or COS
ह ०६	5-501.1170	bserved dro	oppings on floo	or below me	tal skell	ing.
	Ct	entact PCC) , clean & scen	itize area.		/
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-	-					
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nature of Pe	rson in Charge: M	1 m 1 - n an	al. l. A		Deter	E-F-37
	out in only ge.	celelle	Now		Date:	25-5-8
nature of Ins	spector:	1 7/2			Date: 8 - 9	5-7027



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



Establishment: The Homesteed Date8(3/21 Page 1 of 2 No. of Risk Factor/Intervention Violations									No. of Risk Factor/Intervention Violations
		41 D	w มโลทพลัน	1	Time in; :00 Time outZ:00 No.				No. of Repeat Risk Factor/Intervention Violations
Ow	ner/P	ermit Hold	The Homestead of menimack	/ LC	Risk (Cate	gory:	ß	Total Violations 4
Em			ME Ganesieso va Harimode		Phone				Inspection Status: Green Yellow Red
_		n Type:	Routine Re-inspection Pre-or	eration	nal		filne	ss Investigation	Complaint Other
1113	CCLIO	птурс.	FOODBORNE ILLNESS RIS			AN			
			Circle designated compliance status (IN, OUT, N					-	in appropriate box for COS and/or R
-			IN = in compliance OUT= not in compliance NO =		-				
Com	plianc	e Status	Supervision	cos	R	+	Com	pliance Status	COS R Protection from Contamination
4	IN	UT	Person in charge present, demonstrates knowledge and	T .		1	15	IN OUT N/A NO	Food separated and protected
,		UT N/A	performs duties	-	-	-	16	IN OUT N/A	Food-contact surfaces cleaned and sanitized
2	CIBIC	UT NIA	Certified Food Protection Manager	ļ		1	17	IN OUT NAMO	Proper disposition or returned, previously served,
_	10		Employee Health Management/food employees & conditional employee;			-	''		reconditioned & unsafe food
3	(N)	UT	knowledge, responsibilities and reporting		+	4			Time / Temperature Control for Safety
4	TIMO		Proper use of restriction and exclusion	+	+-	-	18	IN OUT N/A NO	Proper cooking time and temperature
5		UT	Procedures for responding to vomiting and diarrheal events			-	19	IN OUT N/A NO	Proper reheating procedures for hot holding
	TINIO	UT (NO)	Good Hygiene Practices	_		┨	21	IN OUT N/A (O)	Proper cooling time and temperatures Proper hot holding temperatures
7	INO		Proper eating, tasting, drinking, or tobacco use No discharge from eyes, nose, mouth	+-	+	-	22	IN OUT N/A NO	Proper cold holding temperatures
/	INC	u1 (NO)	Preventing Contamination by Hands		1	-	23	(INOUT N/A NO	Proper date marking and disposition
8	ÎNO	UT NO	Hands clean & properly washed	Т	Τ	1	24	IN OUT NANO	Time as a Public Health Control: procedures and records
9	-	UT N/A NO	No bare hand contact with RTE food	+	+	-		1	Consumer Advisory
10	(iv)		Adequate handwashing sinks properly supplied & accessible	+	+	1	25	IN OUT N/A	Consumer advisory provided for raw/undercooked foods
H-		01	Approved Source			1			Highly Susceptible Populations
11	(IN O	ÙΤ	Food obtained from an approved source		T	1	26	IN OUT NA	Pasteurized foods used; prohibited foods not offered
12	INO	UT N/ NO	Food received at proper temperature			1		For	od / Color Additives and Toxic Substances
13	(IN)	UT	Food in good condition, safe & unadulterated			1	27	IN OUT (VA)	Food additives: approved and properly used
14	INO	UT N/A NO	Req. records available; shell stock tags, parasite destruction				28	IN OUT N/A	Toxic substances properly identified, stored and used
	R	isk factors a	re improper practices or procedures identified as the	most		1		<u> </u>	onformance with Approved Procedures
	Pr Int	evalent cont erventions a	re improper practices or procedures identified as the tributing factors of foodborne illness or injury. Public H are control measures to prevent foodborne illness or i	lealth njury.			19	IN OUT N/A	Compliance with variance/specialized process/HACCP
				GOOD I	RETA	J. EL P	RACT	TICES	<u></u>
			Good retail practices are preventative measure						and physical objects into foods.
Mai	k " X " i	n box if num	bered item is not in compliance Mark "X" on a	pproprie	ate box	x for	COS:	and/or COS	=corrected on-site during inspection R=repeat violation
Com	alianc	e Status		cos	R		Comi	pliance Status	COS R
00111	21101110	C OLULUS	Safe Food and Water	1000		1			Proper Use of Utensils
30		Pasteurized	eggs used where required			1	43	In-use utens	sils properly stored
31		Water & Ice	from approved source				44	Utensils, eq	uipment & linens; properly stored, dried, & handled
32		Variance ob	tained for specialized processing methods				45	Single-use/s	single-service articles; properly stored & used
			Food Temperature Control				46	Gloves used	property
33		Proper cool	ing methods used; adequate equipment for temp, control						Utensils, Equipment and Vending
34		Plant food p	roperly cooked for hot holding				47 ·	Food and no	on-food contact surfaces cleanable,
35		Approved th	awing methods used				48		signed, constructed, & used
36		Thermomet	ers provided and accurate				49	Warewashir	ng: installed, maintained, & used: test strips
			Food Identification					I	Physical Facilities
37	Ļ	Food proper	rly labeled: original container				50		vater available adequate pressure
			Prevention of Food Contamination		E	-	51		stalled, proper backflow devices
38	X		ents, & animals not present		+	-	52		vaste water properly disposed
39			ion prevented during food preparation, storage & display	+	+	$ \ $	53	-	es properly constructed, supplied, & cleaned
40	-	Personal cle			+-,			+ +	refuse properly disposed, facilities maintained
41	-		is: property used & stored		-	L	55 56		entilation & lighting, designated areas used
42		wasning mu	its & vegetables				30		ATTOMOTO, M. INSTITUTE AND MANUAL PROPERTY OF THE PROPERTY OF
Туг	e of (Operation:							License Posted: (Y) N
		-	rson-in-Charge:						Follow-Up: (Y) N
פוט	UUDDII	on while C	John a Policingo.						Follow-Up Date:
			() A		2				r-ollow-op Date.
Sig	nature	e of Persor	in Charge:						Date:
Sid	natur	e of Inspec	etor:		_				Date: 8-3-2027
			120						
			U						



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



Es	tablishme	nt: The Ho	mestead	Res	taurant	Date: •	3-3-2022	Page 7	of Z
Ac	dress: 💪	AI DW	Highu	, ay	— ₁₀	Complia	ance Achieved:		
		Item / Location	•		TEMPERATURE OBSERVATIONS				1
		Item / Location		Temp.	Item / Location	Temp.	· Item / Locution	<u> </u>	Temp
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					OBSERVATIONS AND/OR CORRECTIVE A	PHILANG			
V	Item	0	<u> </u>					l B-t	Corrected
	Number	Section of Code			Description of Violatio	n 		I .	COS
			Kitche	0:1					
C	55	6-501.12	CICCIOM	11.31	fon of debris/food	20 (10-0	- 1/2	0.00	
			0.5	1	COT DE GEBIST FOOL	011 - 1001	S ULXXIPU	500N11/19	
96	1.0	4			low equipment. Clea				
rr	16	7-601.11 (A)	interi	مدر	note of ice machin	e soiled	with acon	wation	
			at me	ord (debris. clean.				
C	55	6-501.12	1 accom	تلعان	on of food deprist 9	rease o	n. floor / eau	ipmant	
					c. Ciecen.				
					The state of the s				
			Basem.	051.					
-/	20				1				
74	38	2-201711-	heavy	414	activity observed	WEDDAE	out basemer	14.	
			contact	t pe	st control for service				
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 Sign:	ature of Pe	erson in Charge:	W		· (hos		Date:		
	ature of In	$\overline{}$	-01	6					
-1811	20010 01 111	ороссот.			(Date: 8-	2027	



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



Es	tablishment: д	titude Tranpoline park		Date	12/	ZZ	Page 1 of 2	No. of Risk Factor/Intervention \	/iolation	s (>)
Ad	dress: 360	On Hieroray out # 100		Time	in[['00'	Time out 50			- 2
Ow	/ner/Permit Hot	der. Attitude Teampolicae of merric	10[]						/iolation:	
Em	nail:			Phone	9:			Inspection Status: Green Yellow	Red	7 920
Ins	pection Type:	Routine Re-inspection Pre-or	peratio	nal		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 =								
Corr	pliance Status		COS				oliance Status		loo	
		Supervision	1000	<i>y</i>	1	COM	onance otatus	Protection from Contamination	co	SR
1	INOUT	Person in charge present, demonstrates knowledge and performs duties			1	15	FIN OUT N/A NO	Food separated and protected		T
2	IN OUT (VA)	Certified Food Protection Manager	+	-	1	16	IN OUT N/A	Food-contact surfaces cleaned and sanitized		+
		Employee Health	·	-	1	17	IN OUT WAND	Proper disposition or returned, previously served,		+
3	INDUT	Management/food employees & conditional employee;	7	Ť	┨┠			reconditioned & unsafe food		
4	TUOVAT	knowledge, responsibilities and reporting Proper use of restriction and exclusion	-	-	1	40		Time / Temperature Control for Safety		
5	Nout	Procedures for responding to vomiting and diarrheal events	-	_	┨┞	18 19	ON ANTUO NI	Proper cooking time and temperature		
_	<u> </u>	Good Hygiene Practices			┧┠	20	IN OUT N/A NO	Proper reheating procedures for hot holding	-	+
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use	_		┨	21	IN OUT N/A NO	Proper cooling time and temperatures Proper hot holding temperatures		+
7	IN OUT NO	No discharge from eyes, nose, mouth	 -	+	1	22	IN OUT N/A NO	Proper cold holding temperatures	_	+
		Preventing Contamination by Hands			1	23	IN OUT N/A NO	Proper date marking and disposition	+	-
8	IN OUT NO	Hands clean & properly washed	1	T	1	24	IN OUT NAMO	Time as a Public Health Control; procedures and reco	rde	-
9	IN OUT N/ANO	No bare hand contact with RTE food		_	ĺŀ			Consumer Advisory	43	
10	TUCKI	Adequate handwashing sinks properly supplied & accessible				25	IN OUT N/A	Consumer advisory provided for raw/undercooked for	ds	
		Approved Source						Highly Susceptible Populations		
11	TUOUT	Food obtained from an approved source				26	IN OUT NA	Pasteurized foods used; prohibited foods not offered	T	T
12	IN OUT N/A NO	Food received at proper temperature					Foo	d / Color Additives and Toxic Substances		
13	NOUT	Food in good condition, safe & unadulterated				27	IN OUT VA	Food additives; approved and properly used		
14	IN OUT NIA NO	Req. records available; shell stock tags, parasite destruction				28	IN OUT N/A	Toxic substances properly identified, stored and used		
	Risk factors a	are improper practices or procedures identified as the r tributing factors of foodborne illness or injury. Public H are control measures to prevent foodborne illness or in	nost				Co	onformance with Approved Procedures		
	Interventions	are control measures to prevent foodborne illness or in	jury.			19	IN OUT WA	Compliance with variance/specialized process/HACCP		
			COOD	RETAI	L PR	ACT	ICES			
		Good retail practices are preventative measures	s to cont	rol the a	ddition	ofpat	hogens, chemicals, a	and physical objects into foods.		
Mar	k "X" in box if nun	bered item is not in compliance Mark "X" on a	propria	ate box	for C	OS ar	nd/or COS =	corrected on-site during inspection R=repe	at violatio	on
om	oliance Status		cos	R	c	ompl	iance Status		cos	R
		Safe Food and Water						Proper Use of Utensils	1000	
30		eggs used where required		\perp	L	43	In-use utensil	ls properly stored		
31		from approved source		\perp	Ľ	44	Utensils, equi	ipment & linens: properly stored, dried, & handled		
32	Variance of	tained for specialized processing methods		1		45	Single-use/sir	ngle-service articles: properly stored & used		
22	Brance	Food Temperature Control			-	46	Gloves used			\perp
33		ing methods used: adequate equipment for temp, control	-	-		· ·		Utensils, Equipment and Vending		
35		roperly cooked for hot holding awing methods used	-	-	\vdash	47		n-food contact surfaces cleanable,		\perp
36		ers provided and accurate	-	+-	-	48 49		gned, constructed, & used	+-	+
	***************************************	Food Identification	1	\perp	-	49	warewasning	: installed, maintained, & used: test strips		
37	Food proper	ly labeled: original container	Γ	T	-	50	Hot & cold wa	Physical Facilities iter available adequate pressure		
		Prevention of Food Contamination			\vdash	51		alled, proper backflow devices	+-	+
38	Insects, rode	ants, & animals not present			5	52		ste water properly disposed	-	+
39	Contaminati	on prevented during food preparation, storage & display			- 1-	53		properly constructed, supplied, & cleaned	-	+
40	Personal cle	anliness			5	54		fuse properly disposed, facilities maintained	\top	+
41	Wiping cloth	s: properly used & stored			5	55	Physical facilit	ties installed, maintained, & clean		+
42	Washing fru	ts & vegetables			5	6	Adequate vent	tilation & lighting, designated areas used		
Tvn	e of Operation:							Linear D. C.	()	<u>.</u>
		1- 01-						License Posted:	<u> </u>	N
∪ISC	ussion with Per	son-in-charge;						Follow-Up:	Υ	4
								Follow-Up Date:		7
Sign	ature of Person	in Charge: Con bold						Date:		-
Sian	ature of Inspec	in Charge: (in hor)						Date.		-
		pay-ca						Date: 8 - 2 - 201	<u> ۲</u>	



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



Es	stablishment: Attitude Trampoline park					Date	:8-z - 1022	Page 2	of Z
Ad	dress: 3	bo ow Hic	mway #	101		Com	pliance Achieved: 8-2-2	2022	
-				TEMPERATURE OBSERVA	TIONS				
		Item / Location	Temp.	Item / Location		Cemp.	· Item / Location		Temp.
									+
		<u> </u>							
				OBSERVATIONS AND/OR CORRECT	TIVE ACTION	S			
V	Item	Section of Code		Description 6				Dated	Corrected
	Number	Occupit of Code		Description of	Violation			I	r COS
								_	
			<u> </u>						
			NIO Vie	plations absenced di	settor #	im-	-4. lacasar 1.		
			100	ACCIONS POSE OF A	Diriid T	1146	of inspection.		-
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Signa	ature of Pe	rson in Charge:	Cer 20%				Date:		
Signa	ature of Ins	spector:					Date: 🖒 a	2	
			~/-		· · · · · · · · · · · · · · · · · · ·		Date: 8-2	- (072	



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



Establishment.	Friendiys		Date	8/	12 Z	Pag	ge 1 of <u>4</u>	No. of Risk Factor/Intervention Violation	is 🕿
Address: 1400	Hilford Road		Time	inț	2:00	Tim	ne outt:00	No. of Repeat Risk Factor/Intervention Violation	is Ø
Owner/Permit F	Holder:		Risk	Cat	egory	:		Total Violation	-
Email:			Phon	_				Inspection Status: Green Yellow Red	-
Inspection Type	e: Routine Re-inspection Pre-o	operatio	nal		Illne	see In	nvestigation	Complaint Other	
	FOODBORNE ILLNESS R			SAR			~		
	Circle designated compliance status (IN, OUT,							in appropriate box for COS and/or R	
-	IN = in compliance OUT= not in compliance NO					t appl			
Compliance Statu		cos					nce Status		
	Supervision	1000	, K	1	COIL	ipnar	rce status	Protection from Contamination	S R
1 (1) OUT	Person in charge present, demonstrates knowledge and performs duties		T	7	15	ÎN	OUT N/A NO	Food separated and protected	
2 TIN OUT N/A	Certified Food Protection Manager	-		\dashv	16	→	DUT N/A	Food-contact surfaces cleaned and sanitized	+
0	Employee Health			1	17	1	OUT WAND	Proper disposition or returned, previously served,	-
3 1 0 OUT	Management/food employees & conditional employee;		-	4				reconditioned & unsafe food	
4 (IN OUT	knowledge, responsibilities and reporting Proper use of restriction and exclusion	_	+	-	40			Time / Temperature Control for Safety	
5 IN OUT	Procedures for responding to vomiting and diarrheal event	s	+	-	18	\rightarrow	OUT N/A (O)	Proper cooking time and temperature Proper reheating procedures for hot holding	-
	Good Hygiene Practices	<u>l</u>		1	20	_	OUT N/A NO	Proper cooling time and temperatures	
6 INOUT	Proper eating, tasting, drinking, or tobacco use		T	1	21		OUT N/A IO	Proper hot holding temperatures	+-
7 IN OUT	No discharge from eyes, nose, mouth				22	ÍΝ	DUT N/A NO	Proper cold holding temperatures	
	Preventing Contamination by Hands				23	Th	OUT N/A NO	Proper date marking and disposition	
	NO Hands clean & properly washed			_	24		OUT N/A NO	Time as a Public Health Control; procedures and records	
9 (II) OUT N/A N			1	4		~		Consumer Advisory	
10 (J) OUT	Adequate handwashing sinks properly supplied & accessib	le		-	25		IOUT N/A	Consumer advisory provided for raw/undercooked foods	
11 DOUT	Approved Source Food obtained from an approved source	·	Ť	-	26	P IN	OUT N/A	Highly Susceptible Populations Pasteurized foods used; prohibited foods not offered	
12 IN OUT N/A			+	+	20			d / Color Additives and Toxic Substances	
13 IN DUT	Food in good condition, safe & unadulterated		+	1	27	(1)	OUT N/A	Food additives: approved and properly used	\neg
14 IN OUT N/A N	Req. records available: shell stock tags, parasite destruction	n	1	1	28		OUT N/A	Toxic substances properly identified, stored and used	
Risk facto	rs are improper practices or procedures identified as the	most		1			Co	onformance with Approved Procedures	
Intervention	ors are improper practices or procedures identified as the contributing factors of foodborne illness or injury. Public ons are control measures to prevent foodborne illness or	Health injury.			19	(IN)	OUT N/A	Compliance with variance/specialized process/HACCP	
		G00D I	RETA	IL F	RACI	FICES	S		
	Good retail practices are preventative measur	res to cont	rol the	additi	ion of p	athoge	ens, chemicals, a	and physical objects into foods.	
Mark "X" in box if	numbered item is not in compliance Mark "X" on	approprie	ate box	cfor	COS a	and/o	r COS =	-corrected on-site during inspection R=repeat violati	on
ompliance Status	The state of the s	cos	R		Comp	pliano	ce Status	cos	R
80 8	Safe Food and Water		-1-	-	<u> </u>			Proper Use of Utensils	
	rized eggs used where required Lice from approved source	-	+-		43	\vdash		Is properly stored	+
	se obtained for specialized processing methods	-		1	45			ipment & linens: properly stored, dried, & handled ngle-service articles: properly stored & used	+
	Food Temperature Control			1	46		Gloves used		+
33 Proper	cooling methods used: adequate equipment for temp, control		T	1				Utensils, Equipment and Vending	
34 Plant fo	od properly cooked for hot holding				47 ·		Food and nor	n-food contact surfaces cleanable,	
35 Approve	ed thawing methods used				48		Properly design	gned, constructed, & used	
36 Thermo	meters provided and accurate		<u> </u>	1	49	<u>L_</u>	Warewashing	: installed, maintained, & used: test strips	
37 Food pr	Food Identification						Turn II	Physical Facilities	
37 F000 pi	operly labeled: original container Prevention of Food Contamination				50 51	-		ater available adequate pressure	+
38 Insects.	rodents, & animals not present	1	T		52			alled, proper backflow devices ste water properly disposed	+
	ination prevented during food preparation, storage & display		-		53			s properly constructed, supplied, & cleaned	+
40 Persona	ai cleanliness				54			fuse properly disposed, facilities maintained	
41 Wiping	cloths: properly used & stored			2	55	X	Physical facilit	ties installed, maintained, & clean	
42 Washing	g fruits & vegetables			\preceq	56		Adequate ven	tilation & lighting, designated areas used	
Type of Operation	on'							License Bested:	h.I
	4							License Posted: (Y)	N
DISCUSSION WITH	Person-in-Charge:							Follow-Up:	N
	- OKAL							Follow-Up Date:	
Signature of Per	son in Charge:							Date: 8-1 2022	
Signature of Insp	pector:							Date: 8-1-ZOZZ	\neg
	1 11							In Count	
	Mayor .								



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



Establishment: Friend 196	Date: g-	Date: 8-1-2022 Page 2 of 2.					
Address: 140 Hittord Ro	ad	Compliano	Compliance Achieved:				
	TE.	MPERATURE OBSERVATIO					
Item / Location	Temp.	Item / Location	Тетр.	· Item / Local	tion Temp		
	OBSERVAT	IONS AND/OR CORRECTIVE	E ACTIONS				
V Item Section of Code		Description of Viol	ation		Dated Corrected or COS		
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	ren:				_		
c 55 6-501.12 - acc	omulation o	+ grease 1 food	debris be	-low cook	ווחב		
c. 55 6.501.17 & eq	signent - clear	า .					
		dish machine-	CICCIUM O ICI	ction of	debril		
	The state of	The second secon					
 							
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	41111	·		^	1-1017		
ignature of Person in Charge:					1-2022		
signature of Inspector:	2.00			Date: 8.	1-2022		



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



Establishment: Horseshoe Fish & Gane, club					Date #	ate \$/. 22 Page 1 of No. of Risk Factor/Intervention Violations [2]					8	
Address: 44 Greens Pond Road								OS:0/tuo	No. of Repeat Risk Factor/Intervention Violations			
Owner/Permit Holder: Horseshoe Fish Ecome Clob				Risk Category:				Total Violations				
Email:				<u>v</u>	Phone: Inspection Status: Green				Inspection Status: Green Yellow Rec	1		
Inspection Type: Re-inspection Pre-operational Illness Investigat							estigation/	Complaint Other				
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS										\neg		
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											
Com	nlianc	e Status		lco:	S R	Com	plian	ce Status		cos	R	
-	pilatto.	- Clare	Supervision	17.7	- 1 - 1 - 1				Protection from Contamination			
1	(IN)	UT Person in charge present, demonstrates knowledge and performs duties				15	IN	DO AND TUE	Food separated and protected			
2						16		DUT N/A	Food-contact surfaces cleaned and sanitized			
			Employee Health			17 IN OUT NO Proper disposition or returned, previously served, reconditioned & unsafe food						
3	Mo	UT	Management/food employees & conditional employee;			Time / Temperature Control for Safety						
4	INO		knowledge, responsibilities and reporting Proper use of restriction and exclusion						Proper cooking time and temperature			
5	INDO		Procedures for responding to vomiting and diarrheal events				OUT N/A(NO)	Proper reheating procedures for hot holding				
			Good Hygiene Practices			20	IN	OUT N/A NO	Proper cooling time and temperatures			
6	IN O	UT (NO	Proper eating, tasting, drinking, or tobacco use			21	IN	OUT N/A	Proper hot holding temperatures		\square	
7	IN O	UT NO	No discharge from eyes, nose, mouth			22					\square	
	1	7	Preventing Contamination by Hands			23					\dashv	
8	IN O	$\overline{}$	Hands clean & properly washed			24	IN	OUT N/A NO	Time as a Public Health Control: procedures and records			
9	1	UT N/A(10)	No bare hand contact with RTE food	_		Consumer Advisory						
10	(IN)	UI	Adequate handwashing sinks properly supplied & accessible Approved Source.			25 IN OUT N/A Consumer advisory provided for raw/undercooked foods Highly Susceptible Populations					\dashv	
11	INO	UT	Food obtained from an approved source			26	IN	OUT N/A	Pasteurized foods used; prohibited foods not offered			
12		UT N/A NO	Food received at proper temperature				Food / Color Additives and Toxic Substances					
13	(IN)OI	UT	Food in good condition, safe & unadulterated			27	IN	OUT(N/A)	Food additives: approved and properly used			
14 IN OUT NANO Req. records available: shell stock tags, parasite destruction					28							
	RI	sk factors a	re improper practices or procedures identified as the m	ost			Conformance with Approved Procedures					
Risk factors are improper practices or procedures identified as the most Prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illness or injury.					1	19 IN OUT Compliance with variance/specialized process/HACCP						
			the state of the s		RETAIL			·				
	1 (D. (D) 1	1 16	Good retail practices are preventative measures						and physical objects into foods. =corrected on-site during inspection R=repeat vic	dation	_	
Mai	'K "X" 11	n box if num	bered item is not in compliance Mark "X" on app	морі	late box is	or COS	and/o	1 003				
Com	pliance	e Status		COS	R	Com	pliand	e Status		os	R	
Safe Food and Water				\dashv	Proper Use of Utensils 43 In-use utensils properly stored							
30	\vdash		eggs used where required from approved source			44	+		uipment & linens; properly stored, dried, & handled		\dashv	
32			tained for specialized processing methods		-	45	+		single-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 p	roperly cooked for hot holding			47		Food and no	on-food contact surfaces cleanable,			
35		Approved th	awing methods used			48	1	 	signed, constructed, & used		-	
36		Thermomet	ars provided and accurate			49		Warewashin	ng: installed, maintained, & used: test strips		-	
0.7			Food Identification			50	Physical Facilities 50 Hot & cold water available adequate pressure					
37 Food properly labeled: original container Prevention of Food Contamination				51	+		stalled, proper backflow devices	\neg	\dashv			
38					52			vaste water properly disposed				
39 Contamination prevented during food preparation, storage & display				53	1	Toilet facilitie	pilet facilities properly constructed, supplied, & cleaned					
40					54		Garbage & r	refuse properly disposed, facilities maintained				
41 Wiping cloths: properly used & stored					55		Physical fac	ilities installed, maintained, & clean				
42 Washing fruits & vegetables 56 Adequate ventilation & lighting, designated areas used									\dashv			
Type of Operation:								N	1			
						Follow-Up:	7	7				
Discussion with Person-in-Charge:							Follow-Up Date:		7			
								_	\dashv			
Sig	nature	of Persor	in Charge: Stephe ochoc	1					Date: 8-1-308	<u> </u>		
Sig	nature	e of Inspec	tor: 50						Date: 8-1-2022			



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



Establishment: Horsesnoe Fish & Game UDB						Date: 18	Date: 8-1-2027 Page 2 of 2.				
Address: 44 Greens Pond Road						Complia	Compliance Achieved: 8-1 - 2022_				
		Oreens	10.4	10	TEMPERATUR	E OBSERVATION					
		Item / Location		Тетр.	Item / Lo	eation	Temp.	· Item / Location		Temp.	
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Sig	nature of F	erson in Charge.		Shith	n nalled			Date: 8	1-202	32	
	nature of I			2	7			Date: 8-	1-202	7.	