

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



Establishment: pooch-Licious Routing G.	II C	Date 1	24/27	Page 1 of <u>2</u>	No. of Risk Factor/Intervention Violation	ns 1			
Establishment: 1000th - Licious Baring G. Address: 4 McQure Lane	7			Time oug: 30	No. of Repeat Risk Factor/Intervention Violation	ns /			
Owner/Permit Holder:		 Risk Ca			Total Violation				
Email:	F	Phone:			Inspection Status: Green Yellow Red				
Inspection Type: Routine Re-inspection Pre-op	eration	ial	Illne	ss Investigation	Complaint Other				
FOODBORNE ILLNESS RIS				9					
Circle designated compliance status (IN, OUT, N					in appropriate box for COS and/or R				
IN = in compliance OUT= not in compliance NO =	not obs	erved N	I/A = not	applicable COS =	corrected on-site R = repeat violation				
Compliance Status	lcos	R	Com	pliance Status	CC	S R			
Supervision	,000	1	00111	pration bracks	Protection from Contamination	)   K			
1 IN OUT Person in charge present, demonstrates knowledge and performs duties			15	IN OUT N/A NO	Food separated and protected				
2 IN OUT N/A Certified Food Protection Manager	1	I	16	IN OUT N/A	Food-contact surfaces cleaned and sanitized				
Employee Health	,		17	IN OUT N/A NO	Proper disposition or returned, previously served, reconditioned & unsafe food				
3 IN OUT Management/food employees & conditional employee;	T			-	Time / Temperature Control for Safety				
knowledge, responsibilities and reporting  INOUT Proper use of restriction and exclusion	+	$\vdash$	18	IN OUT N/A NO	Proper cooking time and temperature	7			
5 IN 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	IN OUT N/A NO	Proper cooling time and temperatures				
6 IN OUT NO Proper eating, tasting, drinking, or tobacco use			21	IN OUT N/A NO	Proper hot holding temperatures				
7 IN OUT NO No discharge from eyes, nose, mouth			22	IN OUT N/A NO	Proper cold holding temperatures				
Preventing Contamination by Hands			23	IN/OUT N/A NO	Proper date marking and disposition				
8 INOUT NO Hands clean & properly washed	-		24	IN OUT N/A NO	Time as a Public Health Control: procedures and records				
9 IN OUT N/A NO No bare hand contact with RTE food	-		-	1/22/2017	Consumer Advisory				
10 IN OUT Adequate handwashing sinks properly supplied & accessible  Approved Source		-	25	/IN OUT N/A	Consumer advisory provided for raw/undercooked foods				
Approved Source Highly Susceptible Populations  1 NOUT Food obtained from an approved source 26 IN OUT N/A Pasteurized foods used; prohibited foods not offered									
12 N OUT N/A NO Food received at proper temperature	1				od / Color Additives and Toxic Substances				
13 IN OUT Food in good condition, safe & unadulterated			2/7	IN OUT N/A	Food additives: approved and properly used				
14 IN OUT N/A NO Req. records available: shell stock tags, parasite destruction			28	IN 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		1	C	onformance with Approved Procedures				
Interventions are control measures to prevent foodborne illness or in	jury.		19	IN OUT N/A	Compliance with variance/specialized process/HACCP				
	OOD R	ETAIL	PRACI	TICES					
Good retail practices are preventative measure:  Mark "X" in box if numbered item is not in compliance Mark "X" on a					and physical objects into foods.  =corrected on-site during inspection R=repeat violat	ion			
Compliance Status	cos	R	Comp	liance Status	CO	S R			
Safe Food and Water					Proper Use of Utensils				
30 Pasteurized eggs used where required	-		43	<del>                                     </del>	ils properly stored	$\perp$			
31 Water & Ice from approved source	-		44		uipment & linens: properly stored, dried, & handled	-			
32 Variance obtained for specialized processing methods  Food Temperature Control			45		ingle-service articles: properly stored & used	$\dashv$			
33 Proper cooling methods used: adequate equipment for temp, control	T	$\Box$	40	Gloves used	Utensils, Equipment and Vending				
34 Plant food properly cooked for hot holding			47	Food and no	on-food contact surfaces cleanable.				
35 Approved thawing methods used			48	Properly des	igned, constructed, & used	$\top$			
36 Thermometers provided and accurate			49	Warewashin	g: installed, maintained, & used: test strips				
Food Identification					Physical Facilities				
37   Food properly labeled: original container		$\Box$	50		ater available adequate pressure				
Prevention of Food Contamination  38 Insects, rodents, & animals not present			51		stalled, proper backflow devices aste water properly disposed	+			
39 Contamination prevented during food preparation, storage & display			53		es properly constructed, supplied, & cleaned	+			
40 Personal cleanliness			54		efuse properly disposed, facilities maintained	+			
41 Wiping cloths: properly used & stored			55	Physical facil	ities installed, maintained, & clean	$\neg \neg$			
42 Washing fruits & vegetables			56	Adequate ve	ntilation & lighting, designated areas used				
Type of Operation:					License Posted: (Y)	N			
Discussion with Person-in-Charge:					Follow-Up: Y	(N)			
					Foilow-Up Date:				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, 1								
Signature of Person in Charge:	<u>U</u> _				Date: 424/202	2			
Date: 1/14/2027									



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



Establishme	ent: Doogh - Li	clous Baki	ng co.	Date: 2	124/2022	Page 2 of 2
Address: 4	MCCLOPE			Complia	nce Achieved:	
			TEMPERATURE OBSERVA	ATTONS		
	Item / Location	Temp.	Item / Location	Temp.	· Item / Location	n Temp.
		OF	SERVATIONS AND/OR CORREC	TIME ACTIONS		
, Item		01				B-1-4 C4
Number	Section of Code		Description of	Violation		Dated Corrected or COS
	<del></del>					
		Dre - Oper	ational Inspect	100 - 2/2	4/2022	
			186			
		<u> </u>	stolations bloser	ved, Food	license	
		1<50	ed for homester	and sound on	somtimes.	
		الرق ا	7		TICKLIO IS	
	-			<u> </u>		
					·	
	-					
						· · · · · · · · · · · · · · · · · · ·
-				<u> </u>		
	i i					
			<del></del>			
ļ						
			<u> </u>			
	1					
			<u> </u>			
ignature of F	Person in Charge:	Josep Lo	uler		Date: Z	124/2027
Signature of I	nspector:				Date:7 /2	117072
	<u> </u>					4100



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



Est	ablisl	hment: 💢	] [	<del></del>		122/22 Page 1 of 2		e 1 of <b>2</b>				
Ade	dress	404	Milford Road	-	Time	in	.00	Time	e out2:00	No. of Repeat Risk Factor/Intervention Viol	ations	0
Ow	ner/P	ermit Hold	er. Xing wang 898 inc.	F	Risk	Cat	egory:	<i>C.</i>		Total Viol	ations	2
Em	ail:			_	hon					Inspection Status: Green Yellow	Red	
Ins	pectio	on Type:	Routine Re-inspection Pre-op	eration	nal		liine	ss in	vestigation	Complaint Other		
			FOODBORNE ILLNESS RIS			S Al						
			Circle designated compliance status (IN, OUT, N							in appropriate box for COS and/or R		
			IN = in compliance OUT= not in compliance NO =	not obs	erve	1 N/	A = not	appli	icable COS =	corrected on-site R = repeat violation		
Com	nlian	ce Status		cos							leor	
0011	phan	Ce Otatus	Supervision	003	R	$\dashv$	Com	pnan	ce Status	Protection from Contamination	COS	R
11	Tille	DUT	Person in charge present, demonstrates knowledge and		Т	7	15	73	OUT N/A NO	Food separated and protected	T	
2	INX	OUT N/A	performs duties  Certified Food Protection Manager	+	+	$\exists$	16	$\sim$	DUT N/A	Food-contact surfaces cleaned and sanitized	+	-
			Employee Health			1	17	~~	OUT NA NO	Proper disposition or returned, previously served,	+	+
-	(A)	DUT	Management/food employees & conditional employee;	1	_	+				reconditioned & unsafe food		
-	1		knowledge, responsibilities and reporting	-	-	-		1		Time / Temperature Control for Safety		
5	IN C		Proper use of restriction and exclusion  Procedures for responding to vomiting and diarrheal eyents	-	+	-	18	_	OUT N/A NO	Proper cooking time and temperature	+	-
ļ .		201	Good Hygiene Practices				20		OUT NIA NO	Proper reheating procedures for hot holding  Proper cooling time and temperatures	+	-
6	INC	ON TUC	Proper eating, tasting, drinking, or tobacco use		Т	1	21		OUT N/A NO	Proper hot holding temperatures	+-	_
7	INC		No discharge from eyes, nose, mouth		T	1	22	45.3	OUT N/A NO	Proper cold holding temperatures	+	
	-		Preventing Contamination by Hands		-	1	23	(IN)	ON AN TUG	Proper date marking and disposition	+-	
8	INC	OUT TUC	Hands clean & properly washed	T	T	1	24	IN	OUT N/A NO	Time as a Public Health Control: procedures and records		
9		UT N/ANO	No bare hand contact with RTE food					,		Consumer Advisory		
10	(ÎN)	UT	Adequate handwashing sinks properly supplied & accessible				25		OUT N/A			
	<b>6</b>		Approved Source	1	1	4		6	<u> </u>	Highly Susceptible Populations		
12		UT N/A(NO)	Food obtained from an approved source	+	$\vdash$	-	26		DUT N/A	Pasteurized foods used; prohibited foods not offered		
13	IN)c		Food in good condition, safe & unadulterated	-	-	$\frac{1}{2}$	27	INL	OUT NA)	od / Color Additives and Toxic Substances Food additives: approved and properly used	_	
14	<u> </u>	ON AND TU	Req. records available; shell stock tags, parasite destruction			+	28		OUT N/A	Toxic substances properly Identified, stored and used	+	+
	-			nost		1	-			onformance with Approved Procedures	-	
	Pr	evalent cont	re improper practices or procedures identified as the r ributing factors of foodborne illness or injury. Public H re control measures to prevent foodborne illness or ir	ealth		L	19	INI	OUT (VA)	Compliance with variance/specialized process/HACCP	Τ	7
		tor voritions i			Tire a	<u>.                                    </u>		<u> </u>		Compliance with variance/specialized process/TMCCF		
			Good retail practices are preventative measure:	OOD R						and physical phierte into foods		
Mai	k " <b>X</b> " i	n box if num	bered item is not in compliance Mark "X" on a							=corrected on-site during inspection R=repeat	violatio	on
Comi	lianc	e Status		cos	R		Comr	lianc	e Status		cos	R
		o other	Safe Food and Water	1000			Comp		oc otatas	Proper Use of Utensils	000	
30		Pasteurized	eggs used where required				43		Iп-use utensi	ils properly stored		
31		Water & Ice	from approved source				44		Utensils, equ	ipment & linens: properly stored, dried, & handled		
32	Ĺ	Variance ob	ained for specialized processing methods				45		+ -	ingle-service articles: properly stored & used		
22		B	Food Temperature Control	T .	_		46		Gloves used			
33			ng methods used: adequate equipment for temp, control operly cooked for hot holding				47 .	Π	Food and no	Utensils, Equipment and Vending		
35		· · · · · · · · ·	awing methods used				48	-	+	igned, constructed, & used	$\vdash$	+
36			rs provided and accurate	<b>—</b>		1	49			g: installed, maintained, & used: test strips		+
			Food Identification						· · · · · ·	Physical Facilities		
37		Food proper	y labeled: original container				50		Hot & cold wa	ater available adequate pressure		
			Prevention of Food Contamination	,			51		Plumbing inst	talled, proper backflow devices		$\perp$
38			nts, & animals not present	-		ļ	52			aste water properly disposed		
)39	<b>X</b>		on prevented during food preparation, storage & display				53			s properly constructed, supplied, & cleaned	<u> </u>	+
40		Wining doth	erniness c: properly used & stored			0	54 55			rfuse properly disposed, facilities maintained ities installed, maintained, & clean	-	+
42			s & vegetables		-		56	X		ntilation & lighting, designated areas used	$\vdash$	+
									1 1	A STATE OF THE STA		
Тур	e of (	Operation:								License Posted:	<u>Y</u> )	N
Dis	cussic	on with Per	son-in-Charge:							Follow-Up:	Y	N
			$\alpha_1$							Follow-Up Date:		
C:-	andr :=	- f D	in Characi									$\dashv$
_			in Charge:							Date:		
Signature of Inspector:									Date: 2/11/L021			



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



Esta	ablishmer	nt: Xing w	ang			Date: 2/22/2022 Page 2 of 2					
Add	ress: 🗀	1017 Hilfo	ra Roc	d			Complia	nce Achieved:			
					TEMPERATURE						
		Item / Location		Temp.	Item/Locat	ion	Temp.	Item / Location		-+	Temp.
-					<u> </u>			<del>.</del>		$\rightarrow$	
			-				_			$\rightarrow$	
										_	
					OBSERVATIONS AND/OR	CORRECTIVE ACTION	ONS				
V	Item Number	Section of Code			Des	scription of Violation				Dated Co	
			Kitche	n 1							
	39	3-305.11	food	12100	luct in wall	c-in left	one ove	red in Storas	re		
C	55				on of grease						
					re by walk-						
			0.1	<u> </u>	- De Cours						
-							· · · · · · · · · · · · · · · · · · ·				
					<u> </u>						
_											
									Ĭ		
							_				
_									-		
					-					_	
-					· · · · · · · · · · · · · · · · · · ·	<del> </del>					
-											
-											
_											
			-//-		]						
		erson in Charge:						Date:			
Signa	ture of In	spector: / _	1)					Date: <b>Z / 2</b> 2	2/20	22	



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



Est	ablish	ment: Th	omas moore college	Date 1/19/22 Page 1 of _Z				1 of _Z_	No. of Risk Factor/Intervention Violations			
			enchester street	Т	ime in	0:00	Time	out(=\30	No, of Repeat Risk Factor/Intervention Violation	15 (2)	5	
			enthemas hoom alreas.	F	Risk Car	tegory:	G		Total Violation	ns 💍	_	
Em			THE STATE OF THE S	P	hone:				Inspection Status: Green Yellow Red			
Inst	nectio	n Type: 🎤	Routine Re-inspection Pre-open			Illnes	s Inv	estigation	Complaint Other			
1110		11 13 00.	FOODBORNE ILLNESS RISK								_	
			Circle designated compliance status (IN, OUT, N/A,						in appropriate box for COS and/or R			
		_	IN = in compliance OUT= not in compliance NO = no	ot obs	erved N	/A = not	applic	able COS =	corrected on-site R = repeat violation			
Com	nliana	e Status	T <sub>1</sub>	cos	R	Com	aliana	e Status	lCC	76	R	
Com	pliano	e Status	Supervision	LUS	IK	Com	ollant	e Status	Protection from Contamination	J3	- R	
1	IN	UT	Person in charge present, demonstrates knowledge and			15	IN)c	OUT N/A NO	Food separated and protected			
2	<b>-</b>	UT(N/A	performs duties  Certified Food Protection Manager		+	16	+	DUT N/A	Food-contact surfaces cleaned and sanitized		_	
-	<u> </u>	01691	Employee Health			17		DUT N/A NO	Proper disposition or returned, previously served,		_	
-	(C)		Management/food employees & conditional employee;			''	114 0		reconditioned & unsafe food			
3			knowledge, responsibilities and reporting		$\square$			atr.	Time / Temperature Control for Safety			
4	(IN)		Proper use of restriction and exclusion		-	18		OUT N/A NO	Proper cooking time and temperature	-		
-5	(INO	UI	Procedures for responding to vomiting and diarrheal events			19	-	DUT N/A(NO)	Proper reheating procedures for hot holding  Proper cooling time and temperatures	$\dashv$	$\dashv$	
6	INO	UT (NO)	Good Hygiene Practices  Proper eating, tasting, drinking, or tobacco use		$\Box$	21	_	OUT N/A NO	Proper hot holding temperatures	-	$\dashv$	
7	INO		No discharge from eyes, nose, mouth		$\vdash$	22 (	4 -	OUT N/A NO	Proper cold holding temperatures		$\neg$	
H			Preventing Contamination by Hands			23		OUT N/A NO	Proper date marking and disposition	$\dashv$	$\neg$	
8	INO	UT NO	Hands clean & properly washed			24	INC	ON NAME OF	Time as a Public Health Control: procedures and records		$\neg$	
9	INO	UT N/A NO	No bare hand contact with RTE food						Consumer Advisory			
10	(IN)O	UT	Adequate handwashing sinks properly supplied & accessible			25	-ii)o	UT N/A	Consumer advisory provided for raw/undercooked foods			
			Approved Source						Highly Susceptible Populations		4	
11 (			Food obtained from an approved source		$\square$	26	INC	DUT(N/A)	Pasteurized foods used; prohibited foods not offered		$\dashv$	
12	-	UT N/(NG)	Food received at proper temperature			27	LINIC	UT(N/A)	od / Color Additives and Toxic Substances Food additives: approved and properly used		-	
14	IN O	JT(N/A) NO	Food in good condition, safe & unadulterated  Req. records available; shell stock tags, parasite destruction		$\vdash$	28	7.00	OUT N/A	Toxic substances properly identified, stored and used	$\dashv$	$\dashv$	
<u> </u>			<del></del>	ef	-				onformance with Approved Procedures			
	Pro	evalent cont	re improper practices or procedures identified as the mos ributing factors of foodbome illness or injury, Public Heal are control measures to prevent foodborne illness or injur	ith		19	INC	OUT N/A	Compliance with variance/specialized process/HACCP			
		ei vei iliona a			EUR A EX				Compliance with variance/specialized process/17/00/	_	$\dashv$	
			Good retail practices are preventative measures to		·	PRACT		s chemicals	and physical objects into foods		-	
Mar	k " <b>X</b> " i	n box if num	bered item is not in compliance Mark "X" on appr						=corrected on-site during inspection R=repeat violation	tion	┪	
Comi	liono	Status	Ic	os	R	Comp	lianci	e Status	CO	Q	R	
00111	manic	3 Status	Safe Food and Water	,00	I	ООПІР	Halle	o Status	Proper Use of Utensils	-	H	
30		Pasteurized	eggs used where required			43		In-use utens	ils properly stored			
31		Water & Ice	from approved source			44		Utensils, equ	uipment & linens: properly stored, dried, & handled			
32		Variance ob	tained for specialized processing methods			45			single-service articles: properly stored & used	_	4	
			Food Temperature Control	•		46		Gloves used		_	$\dashv$	
33			ng methods used: adequate equipment for temp, control			47 ·	· .	Food and no	Utensils, Equipment and Vending		$\dashv$	
34			roperly cooked for hot holding awing methods used			48			signed, constructed, & used	-	$\dashv$	
36	$\vdash$		ers provided and accurate			49	-	<u> </u>	g: installed, maintained, & used: test strips	+	$\dashv$	
			Food Identification						Physical Facilities			
37		Food proper	ly labeled: original container			50		Hot & cold w	rater available adequate pressure		$\Box$	
			Prevention of Food Contamination			51			stalled, proper backflow devices	_	_	
38	$\square$		ents, & animals not present			52			aste water properly disposed		$\dashv$	
39		Contamination	on prevented during food preparation, storage & display			53			es properly constructed, supplied, & cleaned	-	$\dashv$	
40			aniness s: property used & stored			55			efuse properly disposed, facilities maintained lities installed, maintained, & clean	+	$\dashv$	
42			its & vegetables		$\vdash$	56			ntilation & lighting, designated areas used	+	$\dashv$	
		1.00		-			7		=			
Тур	e of (	peration:							License Posted: (Y	) N		
Dis	cussic	n with Per	son-in-Charge:						Follow-Up:	Ň	1	
									Follow-Up Date:		1	
Sign	nature	of Person	in Charge:						Date: 2 - 18 - 20).			
Sia	nature	of Inspec	tor: 5) as 1						Date: 2/18/2022			
	Hattie of Hispector.											



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



Es	tablishmer	nt: Thomas	W001	re colle	CE		Date: Z/18/20 2Z Page Z of Z							
Ad	ldress: 6	Mancrest						nce Achieved: 🗶 / (6						
					TEMPERATUR	E OBSERVATIONS			Dated Correct or COS					
		Item / Location		Temp.	Item / L	ocation	Temp.	· Item / Location		Temp.				
				OBS	ERVATIONS AND/	OR CORRECTIVE A	CTIONS							
V	Item	Section of Code			<del></del>	Description of Violation	20		Dated	Corrected				
	Number					Description of Violetic	<i>n</i> 1		ОГ	cos				
					····									
				> - 0	1 1	- 1 - 0	- 15 -							
				<u> </u>	stiblic opice	يتهم فمياز	1C1 Trime C	e inspection	1					
							7							
		-												
						-								
-														
ĺ														
$\dashv$														
- 1														
-														
-														
_														
$\dashv$														
-														
$\dashv$														
		i- Ci	AL	1 M. 1				<b>a</b> . 1	18-3-0					
		erson in Charge:	MA !		7			Date: 🎷 🦳	17097	2				
ian	ature of In	spector:		) C/	and the same of th			Date: 7 / 15	17095					



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



Establishment: James Mastrica Opper		Date2/16/22 Page 1 of 2_			No. of Risk Factor/Intervention Violations					
Address: 17 school street		Time i	1.00	Time oun 30	No. of Repeat Risk Factor/Intervention Violation	ons (%				
Owner/Permit Holder: SAU 26		Risk Ca	tegory:	Ō	Total Violatio	ons				
Email:		Phone:			Inspection Status: Green Yellow Rec	7				
Inspection Type: Routine Re-inspection Pre-op	eratio	nal	lilnes	ss Investigation						
FOODBORNE ILLNESS RIS										
Circle designated compliance status (IN, OUT, N	I/A, NO	) for eac	h item	Mark "X"	in appropriate box for COS and/or R					
IN ≈ in compliance OUT= not in compliance NO ≈	not ot	served N	I/A = not	applicable COS :	= corrected on-site R = repeat violation					
Compliance Status	lcos	R	Com	pliance Status	16	OS R				
Supervision	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Protection from Contamination	- 1				
Person in charge present, demonstrates knowledge and performs duties			15	IN OUT N/A NO	Food separated and protected					
2 (IN)OUT N/A Certified Food Protection Manager			16	IN DUT N/A	Food-contact surfaces cleaned and sanitized					
Employee Health			17	IN OUT NAMO	Proper disposition or returned, previously served, reconditioned & unsafe food					
3 INPUT Management/food employees & conditional employee;	T				Time / Temperature Control for Safety					
knowledge, responsibilities and reporting  4 (INOUT Proper use of restriction and exclusion	+	+	18	IN OUT NA NO	Proper cooking time and temperature					
5 INOUT Procedures for responding to vomiting and diarrheal events			19	IN OUT N/A(NO)	Proper reheating procedures for hot holding					
Good Hygiene Practices			20	IN OUT N/A NO	Proper cooling time and temperatures	$\neg \neg$				
6 IN OUT NO Proper eating, tasting, drinking, or tobacco use			21	IN OUT N/A NO	Proper hot holding temperatures					
7 IN OUT (NO) No discharge from eyes, nose, mouth			22	IN OUT N/A NO	Proper cold holding temperatures					
Preventing Contamination by Hands			23	IN OUT N/A NO	Proper date marking and disposition					
8 IN OUT NO Hands clean & properly washed			24	IN OUT NA NO	Time as a Public Health Control: procedures and records					
9 IN OUT N/A 10 No bare hand contact with RTE food	$\perp$				Consumer Advisory					
10 IN OUT Adequate handwashing sinks properly supplied & accessible			25	Consumer advisory provided for raw/undercooked foods						
Approved Source	<del> </del>				Highly Susceptible Populations					
11 (I) OUT Food obtained from an approved source	+	+	26	(IN)OUT N/A	Pasteurized foods used; prohibited foods not offered					
12 IN OUT N/A Food received at proper temperature  13 (IN)OUT Food in good condition, safe & unadulterated	-	+	07		od / Color Additives and Toxic Substances					
13 INOUT Food in good condition, safe & unadulterated  14 IN OUT NAMO Req. records available: shell stock tags, parasite destruction			27	IN OUT N/A	Food additives: approved and properly used	-				
			20		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				conformance with Approved Procedures					
			19	IN OUT (N/A)	Compliance with variance/specialized process/HACCP					
Good retail practices are preventative measure:		RETAIL			and abusinet abinate into finada					
Mark "X" in box if numbered item is not in compliance Mark "X" on a					≈corrected on-site during inspection R=repeat viol.	ation				
Compliance Status	cos	R	Comp	liamon Ctatus	in the second se	OS R				
Safe Food and Water	003	1 18	Comp	liance Status	Proper Use of Utensils	72 K				
30 Pasteurized eggs used where required			43	In-use uten	sils properly stored					
31 Water & Ice from approved source			44	Utensils, eq	juipment & 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 use	d properly					
Proper cooling methods used: adequate equipment for temp. control	<del></del>	4			Utensils, Equipment and Vending					
34 Plant food properly cooked for hot holding	<del> </del>	4—	47 ·		on-food contact surfaces cleanable,	$\rightarrow$				
35 Approved thawing methods used		-	48		signed, constructed, & used					
36 Thermometers provided and accurate  Food Identification			49	Warewashir	ng: installed, maintained, & used: test strips					
37 Food properly labeled: original container	Т	1	50	Hot & cold v	Physical Facilities water available adequate pressure					
Prevention of Food Contamination			51		stalled, proper backflow devices	$\rightarrow$				
38 Insects, rodents, & animals not present	T		52		vaste water property disposed	$\overline{}$				
39 Contamination prevented during food preparation, storage & display			53		es properly constructed, supplied, & cleaned	$\neg \neg$				
40 Personal cleanliness			54	Garbage & r	refuse property disposed, facilities maintained					
41 Wiping cloths: properly used & stored			55	Physical fac	ilities installed, maintained, & clean					
42 Washing fruits & vegetables			56	Adequate ve	entilation & lighting, designated areas used					
Type of Operation:					License Posted:	N				
Discussion with Person-in-Charge:					Follow-Up: Y	N				
/ /					Follow-Up Date:					
Signature of Person in Charge:					Date: 2/16/2022					
						3				
Signature of inspector.	gnature of Inspector: Date: 2/16/22									



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



Est	tablishmer	TMUES C	PPER				Date	2/16/2022	Page Z of _	2			
Ad	dress: 🎵	school stre	et				Com	pliance Achieved: 2/16/	Item/Location Ten  Dated Correct or COS				
					TEMPERATURE OBSERVATIO								
		Item / Location		Temp.	Item / Location	1	emp.	· Item / Location	T	emp.			
_													
_													
<u> </u>													
					OBSERVATIONS AND/OR CORRECTIVE								
V	Item Number	Section of Code			Description of Viola	ation			1				
					no vidation observed a	do 17 re	1	me & inspection					
							,						
				-									
					· · · · · · · · · · · · · · · · · · ·								
										$\neg$			
										-			
										[			
										$\neg$			
$\dashv$													
										$\dashv$			
$\dashv$			-							$\dashv$			
										—			
Sign	ature of Po	erson in Charge:						Date:					
Sign	nature of in	spector:	n )	/	6			Date: 2/1	612022				



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



Est	ablish	ment: J	ames Mas	stricola Elemen	1017	Date 2/16/22 Page 1 of 2							
Add	dress:,	26 B	apoosic	Lake Road	4	Time i	PQ:30	Time out: 1010	No. of Repeat Risk Factor/Ir	Risk Factor/Intervention Violations			
Ow	ner/Po	ermit Hold	er: SAV Z6	)		Risk C	ategory:	7		Total Violations			
Em	ail:					Phone			Inspection Status: Green	Yellow	Red	7	
<u> </u>		a Tuno:	Routine	Po inconstion B	lea anaratio						1 100		
IIIS	Dection	n Type:	Routine		re-operation			ss Investigation	· · · · · · · · · · · · · · · · · · ·	ier			
<del> </del>			0:!	FOODBORNE ILLNES									
				ated compliance status (IN, O		<del></del>	-		in appropriate box for COS and/o				
			IN = in complia	nce DUT= not in compliance	NO = not ol	oserved	N/A = not	applicable COS	corrected on-site R = repeat viola	tion			
Com	plianc	e Status			CO	S R	Com	pliance Status			cos	R	
_				pervision				13	Protection from Contaminat	ion			
1	(N)	UT	performs duties	resent, demonstrates knowledge a	ind		15	IN OUT N/A NO	Food separated and protected				
2	ÌΝο	UT N/A	Certified Food Prote	ection Manager			16	IN OUT N/A	Food-contact surfaces cleaned and a	anitized			
			Emp	loyee Health			17	IN OUT N/A NO	Proper disposition or returned, previous reconditioned & unsafe food	usly served,			
3	(iv)o	UT		employees & conditional employee	9;				Time / Temperature Control for	Safety			
Δ	INO		Proper use of restric	sibilities and reporting		_	18	IN OUT N/A NO	Proper cooking time and temperature			$\dashv$	
5	(IN)		-	conding to vomiting and diarrheal e	events	+	19	IN OUT N/A NO	Proper cooking line and temperature  Proper reheating procedures for hot if		+	+	
	10-			giene Practices			20	IN OUT N/A NO	Proper cooling time and temperature			+	
6	INO	UT (10)		ng, drinking, or tobacco use			21	IN OUT N/A NO	Proper hot holding temperatures	<u> </u>	_	+	
7	INO	UT (O)	No discharge from e				22	GIN OUT N/A NO	Proper cold holding temperatures			1	
			Preventing Con	itamination by Hands			23	IN DUT N/A NO	Proper date marking and disposition			$\Box$	
8	IN O	UT (10)	Hands dean & prop	erly washed			24	IN OUT N/A NO	Time as a Public Health Control: prod	edures and record	is	$\Box$	
9	IN O	JT N/A (VO	No bare hand conta	ct with RTE food					Consumer Advisory				
10	IN O	JT	Adequate handwash	ning sinks properly supplied & acce	essible		25	IN OUT N/A	Consumer advisory provided for raw/	indercooked foods	5		
Approved Source								Highly Susceptible Populations					
- '	11 OUT Food obtained from an approved source 26 NOUT N/A Pasteurized foods used; prohibited foods not offered												
12	100	JT N/A NO	Food received at pro	<del>`                                    </del>					od / Color Additives and Toxic St				
13	IN)OI			on, safe & unadulterated			27	IN OUT (N/A)	Food additives; approved and proper				
14 IN OUT NAME Reg. records available; shell stock tags, parasite destruction							28	IN OUT N/A	Toxic substances properly identified,				
	RI: Pre	<b>sk factors</b> a evalent cont	ire improper practic tributing factors of f	es or procedures identified as oodbome illness or injury, Pul es to prevent foodborne illnes	s the most blic Health				onformance with Approved Proc	edures .			
	Inte	erventions a	are control measure	es to prevent foodborne illnes	s or injury.		19	IN OUT (VA)	Compliance with variance/specialized	process/HACCP			
					GOOD	RETAI	L PRACI	TICES					
h 4	1 (0) (0) (1	1 10		retail practices are preventative me									
Mai	K "X" II	n DOX IT NUM	bered item is not in	compliance Mark X	on appropr	late box	ior COS a	and/or COS	=corrected on-site during inspection	n K=repea	t violation	1	
Com	oliance	Status			COS	R	Comp	liance Status			cos	_R	
				od and Water				<u> </u>	Proper Use of Utensils				
30			eggs used where req			-	43		sils properly stored		+-	+	
31			from approved source			+	44		uipment & linens: properly stored, dried,		+-	+	
JZ.		variance on	tained for specialized	perature Control			45	Gloves use	single-service articles: properly stored &	useu	+-	$\vdash$	
33		Proper cooli		equate equipment for temp, control	1		40	Gibves use	Utensils, Equipment and Vend	ine		4	
34		<del>'</del> '	roperly cooked for hot			+	47 ·	Food and n	on-food contact surfaces cleanable.		$\top$		
35		<del></del>	awing methods used				48		signed, constructed, & used		+-	$\vdash$	
36			ers provided and accu	rate		$\top$	49	<del>                                      </del>	ng: installed, maintained, & used: test str	íps		$\Box$	
			Food I	dentification					Physical Facilities				
37		Food proper	rly labeled: original cor	itainer			50	Hot & cold t	water available adequate pressure				
			Prevention of l	Food Contamination			51	Plumbing in	stalled, proper backflow devices				
38		Insects, rode	ents, & animals not pre	sent			52	Sewage & v	vaste water properly disposed			Ш	
39				ood preparation, storage & display		4	53		es properly constructed, supplied, & clea			Ш	
40 Personal cleanfiness							54		refuse properly disposed, facilities maint	ained		H	
41			s; properly used & sto	red		+	55		ilities installed, maintained, & clean		-		
42		vvasning trui	its & vegetables				56	Adequate V	entilation & lighting, designated areas us	7G			
Тур	e of C	peration:							License P	osted:	(Y)	N	
			rson-in-Charge:						Follow-Up		V	<b>**</b>	
اداب	JUGGRU	TO THE STATE OF	out-in-offarge.										
									Follow-Up	∪ate:			
Sign	nature	of Person	in Charge: (	Daga Will					Date: 2	116/200	2.2_		
		of Inspec		25:18	<b>.</b>				Date: 9	1161202	7	$\neg$	
3'				1-6									
				C									



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



Es	tablishmer	# JHUES				Date: Z/16/2022 Page Z of Z				
		Baboosic		pad			Com	pliance Achieved: 2/16		
					TEMPERATURE OBSERV					
		Item / Location		Temp.	Item / Location		Тетр.	· Item / Locatio	п	Temp.
					OBSERVATIONS AND/OR CORRE	CTIVE ACTION	VS			
V	Item	Section of Code			Description	of Violation				Dated Corrected
	Number				Bookipion	, , , , , , , , , , , , , , , , , , ,				or COS
	i									ļ
									$\overline{}$	
		<u> </u>								
					0-2-					
				ľω	violations observ	red durin	19 1	ive of insmection	י רע .	
							ľ			
									-	
								78744	$\rightarrow$	
									-	
		-								
-									-+	
										ļ
$\neg$										
									T	
$\dashv$										
-	1									
	-		<i>a</i> *	1						
Sian	nature of Pr	erson in Charge:	Da	1/1	)			Date: 2	16/2	100
	nature of In		- (	7				Date: 2/1		
الاات	MEGIC OF IT	upulli, / W	~\~ \.	//2				Date. 🔏 / 🗓	-1641	_ ~



HEALTH DIVISION

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



Est	tablishment: Th	protons Ferry school		Date./	//16/22 Page 1 of <u>Z</u>			No. of Risk Factor/Intervention Violations (			
		amp sorgeant Road		Time in	Pi20	Time	014:30	No. of Repeat Risk Factor/Intervention Violations	775		
		er. SAU 26		Risk Ca	teaory:			Total Violations	795		
	nail:			Phone:				Inspection Status: Green Yellow Red	9		
<u> </u>		5.11									
ІПЅ	pection Type:	Routine Re-inspection Pre-op					estigation	Complaint Other			
<u> </u>		FOODBORNE ILLNESS RIS				3LIC I					
		Circle designated compliance status (IN, OUT, N		<u></u>				in appropriate box for COS and/or R			
		IN = in compliance OUT= not in compliance NO =	not ob	served N	/A = not	applic	able COS =	corrected on-site R = repeat violation			
Com	pliance Status		cos	R	Com	plianc	e Status	Cos	S R		
		Supervision						Protection from Contamination			
1	IN PUT	Person in charge present, damonstrates knowledge and performs duties			15	(TI)o	UT N/A NO	Food separated and protected			
2	IN OUT N/A	Certified Food Protection Manager	$\top$	1	16	ino	UT N/A	Food-contact surfaces cleaned and sanitized			
		Employee Health		$\neg \neg$	17	INO	UT N/ANO	Proper disposition or returned, previously served,			
3	(in)out	Management/food employees & conditional employee;	T					reconditioned & unsafe food Time / Temperature Control for Safety			
4	INDUT	knowledge, responsibilities and reporting  Proper use of restriction and exclusion	+	+	18	LING	UT N/A NO	T			
5	IN OUT	Procedures for responding to vomiting and diarrheal events	+-	+	19	-	UT N/A NO	Proper cooking time and temperature  Proper reheating procedures for hot holding	_		
	( 901	Good Hygiene Practices			20	-	UT N/A NO	Proper cooling time and temperatures	-		
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use	T		21	-	UT N/ NO	Proper hot holding temperatures	$\dashv$		
7	IN OUT NO	No discharge from eyes, nose, mouth	+-	+	22		UT N/A NO	Proper cold holding temperatures			
		Preventing Contamination by Hands			23	<b>*</b>	UT N/A NO	Proper date marking and disposition			
8	IN OUT O	Hands clean & properly washed	T		24		UT NA NO	Time as a Public Health Control: procedures and records			
9	IN OUT N/A NO	No bare hand contact with RTE food	+		-	] 0		Consumer Advisory			
10	NOUT	Adequate handwashing sinks properly supplied & accessible	+		25	IN O	UT N/A	Consumer advisory provided for raw/undercooked foods	$\neg \neg \neg$		
		Approved Source					Highly Susceptible Populations				
11	OUT	Food obtained from an approved source	T		26	26 ON OUT N/A Pasteurized foods used; prohibited foods not offered					
12	IN OUT N/A (O)	Food received at proper temperature					Foo	od / Color Additives and Toxic Substances			
13	IN OUT	Food in good condition, safe & unadulterated			27	INO	UT WA	Food additives; approved and properly used			
14	IN OUT (N/A)NO	Req. records available: shell stock tags, parasite destruction			28	(IN )	UT N/A	Toxic substances properly identified, stored and used			
	Risk factors a	re improper practices or procedures identified as the n	nost	$\neg$			C	onformance with Approved Procedures			
	Prevalent cont Interventions :	are improper practices or procedures identified as the n tributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or in	alth jury.		19	IN O	UT (Ā)	Compliance with variance/specialized process/HACCP			
~~~	<del></del>			RETAIL	PRACT						
		Good retail practices are preventative measures					s. chemicals.	and physical objects into foods.			
Mar	rk "X" in box if num	nbered item is not in compliance Mark "X" on ap						=corrected on-site during inspection R=repeat violation	on		
٠	allamas Status		1000				Chahua	lcos			
JOIN	pliance Status	Safe Food and Water	cos	R	Comp	Hance	Status	Proper Use of Utensils	R		
30	Pasteurized	eggs used where required	Т		43		In-use utens	sifs properly stored			
31		from approved source	$\vdash$		44		Utensils, equ	uipment & linens: properly stored, dried, & handled			
32	Variance ob	tained for specialized processing methods			45		Single-use/s	single-service articles: property stored & used			
		Food Temperature Control	-		46		Gloves used	properly			
33	Proper cooli	ing methods used: adequate equipment for temp. control		T				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	nawing methods used			48		Properly des	signed, constructed, & used			
36	Thermomet	ers provided and accurate	<u></u>		49		Warewashin	g: installed, maintained, & used: test strips	$\perp$		
		Food Identification			<u> </u>			Physical Facilities			
37	Food proper	fly labeled: original container			50		Hot & cold w	rater available adequate pressure	$\perp$		
		Prevention of Food Contamination		$\overline{}$	51			stalled, proper backflow devices	+		
38		ents, & animals not present	<del> </del>		52			aste water properly disposed	+		
39		on prevented during food preparation, storage & display			53			es properly constructed, supplied, & cleaned	+-		
40	Personal cle		<u> </u>	+-	54			efuse properly disposed, facilities maintained	+		
41		s: properly used & stored			55 56			lities installed, maintained, & clean	+		
	] wasmig mu	its & vegetables			100		-ucquate ve	ntilation & lighting, designated areas used	<u>.l</u>		
Тур	e of Operation:							License Posted: (Y)	N		
Disc	cussion with Per	rson-in-Charge:						Follow-Up: Y	AV.		
_101								, · · · · · · · · · · · · · · · · · · ·			
								Follow-Up Date:			
Sigr	nature of Person	in Charge: Quille						Date: 2/16/2022			
Sia	nature of Inspec							Date: 2/16/2022	$\neg$		
-											



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



Es	tablishmen	t Thornton	is Ferry	scnoo	1				2/16/2022			<u>z</u>
		4 camp so						Com	pliance Achieved: 2146	2022	-	
						RATURE OBS	ERVATIONS					
		Item / Location		Temp.		Item / Location		Temp.	· Item / Location			Temp.
				-								
								i				
					marketine wit & MATERIA	C AND OD CO	***************************************	N#YO				
	140-			0	BSERVATION		RRECTIVE ACTIO	JNS			Dated C	orrected
V	ltem Number	Section of Code				Descrip	tion of Violation				or C	
										-+		
			<u> </u>									
		-		_								
				ρĐ	<u>vlolati</u>	ms obse	rved duri	ing i	nspection.			
										-		
										-		
									-11-2			
								_				
					<del></del>							
		****										
												-
				ام								
Di-		ia Ch	10	11.					Date: 2	111.1.	2/000	72
		erson in Charge:	Way	wy					Date.	14/2	-66	
Sig	nature of Ir	ispector: / /	a /	/ 1/2	2				Date: 2/	16/2	oz Z	-



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



Establi	shment: Me	errimock Highschool	e 1 of <u>2</u>	No. of Risk Factor/Intervention Violations						
Addres	s: 38 H	c Elwain street		Time in	PiaD	Time	outfl:3	No. of Repeat Risk Factor/Intervention Violations	Ø	
		er: SAU 26		Risk Ca	tegory:/	$\overline{}$		Total Violations	08	
Email:	<del></del>			Phone:				Inspection Status: Green Yellow Red	140	
	lion Type:	(Routine) Re-inspection Pre-op	nenti e		Illana	a 1				
irispeci	lion Type.						estigation	Complaint Other		
		FOODBORNE ILLNESS RIS				Malti		· · · · · · · · · · · · · · · · · · ·		
		Circle designated compliance status (IN, OUT, N		·		N		in appropriate box for COS and/or R		
		IN = in compliance OUT= not in compliance NO =	not bi	oserved N	//A = not	аррис	cable COS =	corrected on-site K = repeat violation		
Complia	nce Status		CO	S R	Comp	oliano	e Status	CO	S R	
16	7	Supervision Person in charge present, demonstrates knowledge and			<u> </u>	-		Protection from Contamination		
	19UT	performs duties		$\perp$	15 (	7	סא איא דענכ	Food separated and protected		
2 (IN	OUT N/A	Certified Food Protection Manager	$\perp$		16	-	DUT N/A	Food-contact surfaces cleaned and sanitized		
		Employee Health			17	IN C	ONAMTUC	Proper disposition or returned, previously served, reconditioned & unsafe food		
3 IN	DUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Time / Temperature Control for Safety		
4	ОПТ	Proper use of restriction and exclusion			18	IN	DUT N/A(N)	Proper cooking time and temperature		
5 (i)	DUT	Procedures for responding to vomiting and diarrheal events			19	IN	OUT N/(NO	Proper reheating procedures for hot holding	$\top$	
		Good Hygiene Practices			20	IN C	OUT N/A TUC	Proper cooling time and temperatures		
	TUOI TUO	Proper eating, tasting, drinking, or tobacco use			21	IN C	DUT NIA NO	Proper hot holding temperatures		
7 IN	OUT (NO)	No discharge from eyes, nose, mouth	<u>L.</u>		22		OUT N/A NO	Proper cold holding temperatures		
		Preventing Contamination by Hands			23		OUT N/A NO	Proper date marking and disposition	$\perp$	
	OUT NO	Hands clean & properly washed	-	+	24	IN C	OUT WA NO	Time as a Public Health Control: procedures and records		
	OUT N/A NO	No bare hand contact with RTE food		l a	-60	Consumer Advisory	$\dashv$			
10 IN	OUT	Adequate handwashing sinks properly supplied & accessible  Approved Source	!		25	INC	OUT (VA	Consumer advisory provided for raw/undercooked foods Highly Susceptible Populations		
11 (IN	OUT	Food obtained from an approved source	Τ		26	IN C	UT N/A	Pasteurized foods used; prohibited foods not offered	$\neg \neg$	
	OUT N/ANO	Food received at proper temperature			25	<u> </u>		ed / Color Additives and Toxic Substances		
	OUT	Food in good condition, safe & unadulterated	<del> </del>		27	IN C	DUT I(A)	Food additives: approved and properly used	7	
	OUT N/A NO	Req. records available: shell stock tags, parasite destruction			28 (	-	OUT N/A	Toxic substances properly identified, stored and used	+-	
	Risk factors a	re improper practices or procedures identified as the n	nost					onformance with Approved Procedures		
ı	Prevalent cont	re improper practices or procedures identified as the r ributing factors of foodbome illness or injury. Public H are control measures to prevent foodborne illness or in	alth		19	INIC	UT N/A	Compliance with variance/specialized process/HACCP		
				HONOR A TY				ormplanso this rangiouspaolangua propositi (100)		
		Good retail practices are preventative measure:		RETAIL				and physical phiagle into foods		
Mark "X	" in box if num	bered item is not in compliance Mark "X" on a						=corrected on-site during inspection R=repeat violation	on	
ampliar	nce Status	· · · · · · · · · · · · · · · · · · ·	lcoe			llana.	a Pástus	200		
ompilai	ice Status	Safe Food and Water	cos	R	Comp	Hanc	e Status	Proper Use of Utensils	R	
30	Pasteurized	eggs used where required			43		In-use utens	ils properly stored	$\top$	
31	Water & Ice	from approved source			44		Utensils, equ	uipment & linens: properly stored, dried, & handled	$\top$	
32	Variance ob	tained for specialized processing methods			45		Single-use/s	ingle-service articles: properly stored & used	$\Box$	
		Food Temperature Control			46		Gloves used	properly		
33	Proper cooli	ng methods used: adequate equipment for temp, control						Utensils, Equipment and Vending		
34	Plant food p	roperly cooked for hot holding	L		47 ·		Food and no	n-food contact surfaces cleanable,	4	
35	Approved th	awing methods used		$\perp$	48		Properly des	igned, constructed, & used	$\perp$	
36	Thermomete	ers provided and accurate			49		Warewashin	g: installed, maintained, & used: test strips	$\perp$	
2.7	I p	Food Identification	1					Physical Facilities		
37	Food proper	ly labeled; original container	<u> </u>		50	_		ater available adequate pressure		
38	Incade rade	Prevention of Food Contamination			51			talled, proper backflow devices	+	
39	_	on prevented during food preparation, storage & display		+	53		-	aste water properly disposed s properly constructed, supplied, & cleaned	+	
40	Personal cle				54			sfuse property disposed, facilities maintained	+	
41 Wiping cloths; properly used & stored 55 Physical facilities installed, maintained, & clean										
42		ts & vegetables			56		-	ntilation & lighting, designated areas used		
Type of	Operation:							License Posted: (Y)	N	
Discuss	sion with Per	son-in-Charge:						Follow-Up: Y	N	
								Follow-Up Date:		
01. 1		1.01	=						-	
Signatu	re of Person	In Charge: Quality						Date: 2/16/2012		
Signatu	re of Inspect	tor: > 1						Date: 2/16/2022		



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



Es	tablishmen	t: Merrimac	K HiA	nschoo	0	Dat	e: 2/16/2022	Page	of <u>Z</u>
		MCEIWOIN				Cor	npliance Achieved: Z/16	12022	
					TEMPERATURE OBSERVATIONS				
		Item / Location		Temp.	Item / Location	Temp.	- Item / Location		Temp.
					OBSERVATIONS AND/OR CORRECTIVE AC	TIONS			
	Item							Dated	Corrected
V	Number	Section of Code			Description of Violation	1		0:	r COS
					T T T T T T T T T T T T T T T T T T T				
					o violations observed dus	Dinor S	cuction.		
	<u> </u>				b) otolet bis peletteri doi	1119 [1	ispection 1-		
								,	
					·				
				<u> </u>				$\neg$	
			1						
Sigr	nature of P	erson in Charge:	Coan	20			Date: 2/	16/202	2_
	nature of Ir		. (	/			Date: 2 / I	6/202	z
٠.			>		7-7				



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



Esta	ablishment: Re	eds Ferry school		Date 2	142	Z Pag	Page 1 of _2 No. of Risk Factor/Intervention Violation					10
Add	ress: 15 L4	one Road	Γ	ime in	JO:02	Time	e out <b>(0):3</b> 0	No. of Repeat Risk	Factor/int	ervention \	/iolations	Ø
Owi	ner/Permit Hold	er. SAN Z.C	F	Risk Ca	ategory	/: D				Total \	/iolations	05
Ema			-	hone:				Inspection Status	Green	Yellow	Red	
_											1100	
insp	ection Type:	Routine Re-inspection Pre-ope					vestigation	Complaint	Othe	3r		
		FOODBORNE ILLNESS RISI				DBLIC						
		Circle designated compliance status (IN, OUT, N						in appropriate box for 0				
		IN = in compliance OUT= not in compliance NO =	not obs	erved N	I/A = n	ot appli	cable COS =	corrected on-site R = r	epeat violati	on		
Com	pliance Status		cos	R	Cor	mplian	ce Status				CO	S R
		Supervision						Protection from C	ontaminati	on		
1	TUC(NI	Person in charge present, demonstrates knowledge and performs duties			15	(11)	OUT N/A NO	Food separated and pro	tected			
2	IN DUT N/A	Certified Food Protection Manager		$\top$	16	IN	OUT N/A	Food-contact surfaces c	leaned and sa	nitized		$\top$
		Employee Health	-	`	17	IN	OUT N/A NO	Proper disposition or retoreconditioned & unsafe f		sly served,		
3	TUC(NI	Management/food employees & conditional employee;	T	$\top$					ture Control for Safety			
	~	knowledge, responsibilities and reporting	-	+	- 40	. Int	- 3			arcey		
4	(IN)DUT	Proper use of restriction and exclusion		+	18	_	OUT NA ND	Proper cooking time and Proper reheating proced		alding	_	+-
5	(IN DUT	Procedures for responding to vomiting and diarrheal events  Good Hygiene Practices			20	_	OUT N/A/NO)	Proper cooling time and		Juling	-	
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use	T	T	21		OUT N/A NO	Proper bot holding temp				+
7	IN OUT	No discharge from eyes, nose, mouth	-	+-	22	2.00	DUT N/A NO	Proper cold holding temp				_
	111 001	Preventing Contamination by Hands	<u> </u>	1	23		OUT N/A NO	Proper date marking and				
8	IN OUT (NO)	Hands clean & properly washed	T	$\top$	24	- 6	OUT WA NO	Time as a Public Health		dures and rec	ords	
9	IN OUT N/A NO	No bare hand contact with RTE food	+	+	-			Consumer A				
10 (	TUCKII	Adequate handwashing sinks properly supplied & accessible		$\vdash$	25	IN	OUT N/A	Consumer advisory prov	<del></del>	ndercooked fo	ods	
		Approved Source	1					Highly Susceptible				
11	(I) OUT	Food obtained from an approved source			26	(ÎN	DUT N/A	Pasteurized foods used;	prohibited foo	ds not offered		
12	IN OUT N/A NO	Food received at proper temperature					Foo	d / Color Additives an	d Texic Sul	stances		
13 (	INOUT	Food in good condition, safe & unadulterated			27	IN	OUT (I/A)	Food additives: approved	and properly	used		
14	IN OUT WANO	Req. records available: shell stock tags, parasite destruction			28	IN	OUT N/A	Toxic substances properl	ly identified, st	ored and use	d	
	Risk factors a	re improper practices or procedures identified as the m	ost				C	onformance with App	roved Proce	dures		
	Interventions	re improper practices or procedures identified as the matributing factors of foodborne illness or injury. Public Heare control measures to prevent foodborne illness or injury.	ury.		19	IN	OUT (IA)	Compliance with variance	e/specialized p	rocess/HACC	P	
		G	OOD R	ETAIL	PRAC	TICES	3					
		Good retail practices are preventative measures						and physical objects into fo	oods.			
Mar	k "X" in box if num	nbered item is not in compliance Mark "X" on ap	propria	te box f	or COS	and/o	r COS	=corrected on-site duri	ng inspectio	n R=rep	eat violati	on
Comr	oliance Status		cos	R	Con	npliano	e Status	<u></u>			cos	R
901111	71741100 000000	Safe Food and Water		111				Proper Use of	Utensils			
30	Pasteurized	eggs used where required			43		In-use utens	ils properly stored				
31	Water & Ice	from approved source			44	$\perp$	Utensils, equ	uipment & finens: properly	stored, dried, o	& handled		$\perp$
32	Variance of	stained for specialized processing methods	<u>L</u> .		45	$\perp$	Single-use/s	ingle-service articles: prop	erly stored & u	ışed		4
		Food Temperature Control			46		Gloves used					
33	· · · · · · · · · · · · · · · · · · ·	ing methods used; adequate equipment for temp, control		$\square$			T =	Utensils, Equipment		ng		
34		properly cooked for hot holding	-		47	-	+	on-food contact surfaces cle				$\dashv$
35		nawing methods used	-		48	-		signed, constructed, & used				$\dashv \dashv$
36	Thermomet	ers provided and accurate  Food Identification	<u> </u>		49		vvarewasnin	g: installed, maintained, & Physical Fac		08		$\pm$
37	Food prope	ry Jabeled; original container	T		50		Hat & cold w	rater available adequate pr				
37	Fuod propa	Prevention of Food Contamination			51			stalled, proper backflow de			_	$\dashv \dashv$
38	Insects rod	ents, & animals not present			52	+-		aste water properly dispos				$\neg$
39		ion prevented during food preparation, storage & display		$\Box$	53		<del></del>	es properly constructed, su		ned		$\top$
40	Personal cle				54		Garbage & n	efuse properly disposed, fa	icilities mainta	ined		
41		ns; properly used & stored			55		Physical faci	lities installed, maintained,	& clean			
42		rits & vegetables			56		Adequate ve	ntilation & lighting, designa	ited areas use	d		
						-					7.5	
Тур	e of Operation:								License Po	osted:	_(Y)	_1
Dis	cussion with Pe	rson-in-Charge:						] :	Follow-Up:	1	Y	_N)
								į,	Follow-Up	Date:		
Sia	nature of Persor	n in Charge: Out O							Date: 2	116/2	022	_
	nature of Inspec								Date: 7	11/20	22	
oig	nature of inspet	ivi. july.				•			5010. 4	116		
		4 4										



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



Establishment: Recas Ferr				6/2022	Page2_ of2_
Address: 15 Lyons Road			Compliano	e Achieved: 2/16	2027
Item / Location	-	TEMPERATURE OBSERVATION	JUS		
Hem/ Location	Temp.	Item / Location	Тетр.	· Item / Location	Temp.
	UB	SERVATIONS AND/OR CORRECTIVE	E ACTIONS		
Item Continue Continue					Dated Corrected
V Number Section of Code		Description of Vio	lation		or COS
		. I have a second			
	ho niola	tions observed durin	ightime of i	is rection.	
	<del></del>				
		AA - 4.1			
Signature of Person in Charge:	David (Q)			Date: 2/1	6/2022
Signature of Inspector:	5/10				6/2022



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



Establishment: Merrimace middle scucol		Date:2/	6/22	Page	1 of _ <b>Z</b>	No. of Risk Factor/Intervention Violations	Ø		
Address: 31 Magerine Bennett Lane	1	Time in	2:00	Time	out0:30	No. of Repeat Risk Factor/Intervention Violations			
Owner/Permit Holder: SAU 26		Risk Cat	egory:	0		Total Violations	175		
Email:		Phone:				Inspection Status: Green Yellow Red	Jer		
Inspection Type: Routine Re-inspection Pre-ope			Ilinas	e Inv	estigation	Complaint Other			
FOODBORNE ILLNESS RISK									
Circle designated compliance status (IN, OUT, N/				2010		in appropriate box for COS and/or R			
IN = in compliance OUT= not in compliance NO = r				applic					
Compliance Status Supervision	cos	R	Com	olianc	e Status	Protection from Contamination	SR		
1 IN OUT Person in charge present, demonstrates knowledge and	Т		15		117 hua 110	I I			
performs duties	-	$\perp$	15	1	OUT N/A NO	Food separated and protected			
2 INOUT N/A Certified Food Protection Manager		1	16		OUT N/A	Food-contact surfaces cleaned and sanitized  Proper disposition or returned, previously served,	-		
Employee Health			17	INO	UI NIA NO	reconditioned & unsafe food			
Management/food employees & conditional employee; knowledge, responsibilities and reporting					1	Time / Temperature Control for Safety			
4 INDUT Proper use of restriction and exclusion			18	IN C	NA TUC	Proper cooking time and temperature			
5 (in OUT Procedures for responding to vomiting and diarrheal events			19	-	UT N/A(NO)	Proper reheating procedures for hot holding			
Good Hygiene Practices			20	+	UT N//(NO)	Proper cooling time and temperatures	$\perp$		
7 IN OUT No discharge from eyes, nose, mouth	-	+	21		UT N/A NO	Proper hot holding temperatures	+		
7 IN OUT No discharge from eyes, nose, mouth  Preventing Contamination by Hands	<u> </u>		22		UT N/A NO	Proper cold holding temperatures	+		
8 IN OUT NO) Hands clean & properly washed	T		24	_	UZ N/AINO	Proper date marking and disposition  Time as a Public Health Control: procedures and records	-		
9 IN OUT N/A (O) No bare hand contact with RTE food	$\vdash$	+			o (MA)NO	Consumer Advisory			
10 OUT Adequate handwashing sinks properly supplied & accessible		+	25	INO	UT NA	Consumer advisory provided for raw/undercooked foods			
Approved Source	L .					Highly Susceptible Populations			
11 (ID) OUT Food obtained from an approved source			26	OML	UT N/A	Pasteurized foods used; prohibited foods not offered			
12 IN OUT N/A NO Food received at proper temperature					Foo	d / Color Additives and Toxic Substances			
13 IN OUT Food in good condition, safe & unadulterated			27		UTNA	Food additives: approved and properly used			
14 IN OUT NA NO Req. records available: shell stock tags, parasite destruction			28		UT N/A	Toxic substances properly identified, stored and used			
Risk factors are improper practices or procedures identified as the me Prevalent contributing factors of foodborne illness or injury, Public Hea Interventions are control measures to prevent foodborne illness or inju	ost alth		-		C	onformance with Approved Procedures	=		
Interventions are control measures to prevent foodborne illness or inju	ury.		19	IN O	UT WYS	Compliance with variance/specialized process/HACCP			
		RETAIL		_					
Good retail practices are preventative measures of Mark "X" in box if numbered item is not in compliance Mark "X" on app									
Mark "X" in box if numbered item is not in compliance Mark "X" on app	oropiia	HE DOX TO	LUS a	na/or	CUS	corrected on-site during inspection R=repeat violation	on		
	COS	R	Comp	liance	Status	COS	R		
Safe Food and Water  30 Pasteurized eggs used where required			43	·.	in una utomo	Proper Use of Utensils	-		
31 Water & Ice from approved source		+	44			ils properly stored  ipment & linens; properly stored, dried, & handled	+		
32 Variance obtained for specialized processing methods			45			ingle-service articles: properly stored & used			
Food Temperature Control			46		Gloves used		$\top$		
33 Proper cooling methods used: adequate equipment for temp. control		T				Utensils, Equipment and Vending			
34 Plant food properly cooked for hot holding			47 ·		Food and no	n-food contact surfaces cleanable,			
35 Approved thawing methods used			48		Properly des	igned, constructed, & used			
36 Thermometers provided and accurate			49		Warewashing	g: installed, maintained, & used: test strips			
Food Identification			50		11.10.11	Physical Facilities			
37   Food properly labeled: original container  Prevention of Food Contamination			50			ater available adequate pressure	+-		
38 Insects, rodents. & animals not present		<del>   </del>	52			talled, proper backflow devices aste water properly disposed	+		
39 Contamination prevented during food preparation, storage & display		$\vdash$	53	_		s properly constructed, supplied, & cleaned	$\vdash$		
40 Personal cleanliness		$\Box$	54			rfuse properly disposed, facilities maintained	$\top$		
41 Wiping cloths; properly used & stored			55			ities installed, maintained, & clean	$\top$		
42 Washing fruits & vegetables			56		Adequate ver	ntilation & lighting, designated areas used			
T-10-10									
Type of Operation:						License Posted:	W.		
Discussion with Person-in-Charge:						Follow-Up: Y (	N)		
A						Follow-Up Date:			
Signature of Borean in Cha						- 0/11/20			
SKILLANDER DE PROCEDE DE L'ESTRE :						Dolo: "L'III I de L'AN .I			
Signature of Person in Charge: Signature of Inspector:						Date: 2/16/2022			



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



Es	tablishmer	t Merriman	uk middle:	school			Date	:2116/2022	Pag	e <b>2</b> c	of Z
Ad	dress: 🗷 🕻	Modeline B	semeth Lane					pliance Achieved: 2 / (6/2			
				TE	MPERATURE OBSERVA						
		Item / Location	Temp.		Item / Location	7	Гетр.	Item / Location			Temp.
				_							
				OBSERVAT	IONS AND/OR CORRECT	TVE ACTION	IS				
V	Item	Section of Code			Description of	Violation				Dated C	Corrected
	Number									01(	cos
-											
			-								
			Uo.	violati	ons observed.	do ling.	ting	e of inspection			
							-				
		-									
_											
$\dashv$											
_											
											ľ
$\dashv$									$\dashv$	-	
$\dashv$											
								<u> </u>	+		
$\dashv$				<del></del>	··· <del>-</del>						
											$\neg \neg$
+									+		
+		-									
									1		
		erson in Charge:	Carl-C					Date: 2/	6/2	1022	
Sign	ature of In	spector:	1///	0				Date: 2 / 14	1 25	22 Z	



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



Esta	ablishr	ment: ဥေ	eds ferry Karlet	Date2/(S /27 Page 1 of _2_				1 of _Z_	No. of Risk Factor/Intervention Violations				
[			DW Highway	Time in:2:00 Time out:30 N			Time	out:30	No. of Repeat Risk Factor/Intervention Violations				
			or Merrimoux Village variety L	C	Risk Ca	itegory:	^		Total Violations	Ø			
Em			Helimber Village		Phone:				Inspection Status: Green Yellow Red				
<del></del>		Type:	Routine Re-inspection Pre-ope			Ilines	e Inv	estigation	Complaint Other				
1112		туре.	FOODBORNE ILLNESS RISE										
			Circle designated compliance status (IN, OUT, N/						in appropriate box for COS and/or R				
	-		IN = in compliance OUT= not in compliance NO =				applic						
			tit in complication of the title complication in										
Com	pliance	Status	Supervision	cos	R	Com	olianc	e Status	Protection from Contamination	R			
	1	I.T.	Person in charge present, demonstrates knowledge and	Τ	<del></del>	15	(1)	OUT N/A NO	Food separated and protected	T			
1	IN D		performs duties			-	<u> </u>	OUT N/A	,	-			
2	IND	JT N/A	Certified Food Protection Manager			16	-	7-5	Food-contact surfaces cleaned and sanitized  Proper disposition or returned, previously served,	+			
			Employee Health	1		17	INC	ON (NA) TUC	reconditioned & unsafe food	Щ			
3	(N)	JT :	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Time / Temperature Control for Safety				
4	(IN)OI	JT	Proper use of restriction and exclusion			18	INC	DUT N/A(10)	Proper cooking time and temperature	$\square$			
5	(LIN)	JΤ	Procedures for responding to vomiting and diarrheal events			19	+	OUT N/A (NO)	Proper reheating procedures for hot holding	$\perp$			
			Good Hygiene Practices			20	-	DUT N/A(NO)	Proper cooling time and temperatures	+			
6	IN Of	$\rightarrow$	Proper eating, tasting, drinking, or tobacco use	ļ.,	-	21	-	DUT N/A (10)	Proper hot holding temperatures	$\vdash$			
7	INOL	IT (NO)	No discharge from eyes, nose, mouth	<u> </u>		22	-	ON A'N TUC	Proper cold holding temperatures	$\vdash$			
			Preventing Contamination by Hands	1		23	-	UT N/A NO	Proper date marking and disposition	$\vdash$			
8	IN OU		Haπds clean & properly washed		+	24	INC	DUTNANO	Time as a Public Health Control: procedures and records	Щ			
9	_	JT N/A (10	No bare hand contact with RTE food		+		( ) > -		Consumer Advisory	_			
10	(IN)pr	JT	Adequate handwashing sinks properly supplied & accessible	<u> </u>	4	25	( IN)O	UT N/A	Consumer advisory provided for raw/undercooked foods	4[			
44.1	IN)OL	IT.	Approved Source			26	LINIC	DU N/A	Highly Susceptible Populations  Pasteurized foods used; prohibited foods not offered				
11 (			Food obtained from an approved source	-	+	26	INC			Н			
12	1	JT N/A(NO)	Food received at proper temperature	$\vdash$		27	LINIO	DUT MA	d / Color Additives and Toxic Substances				
13	(IN)OU		Food in good condition, safe & unadulterated		+	27	7		Food additives; approved and properly used	+-1			
14	1	JT(NÍA)NO	Req. records available; shell stock tags, parasite destruction			28	ON O	UT N/A	Toxic substances properly identified, stored and used				
	Ri	sk factors a	re improper practices or procedures identified as the m ributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or inj	ost alth					onformance with Approved Procedures				
	Inte	erventions a	re control measures to prevent foodborne illness or inj	шгу.		19	INC	DUT N/A	Compliance with variance/specialized process/HACCP	Щ			
						PRACI							
Mar	k "Y" in	boy if nur	Good retail practices are preventative measures bered item is not in compliance Mark "X" on ap						and physical objects into foods.  =corrected on-site during inspection R=repeat violation	$\dashv$			
			perod term to morniphaneo										
Com	oliance	Status	0.4.0.1.2.3.2.	cos	R	Comp	liance	e Status	Proper Use of Utensils	R			
		B 1 1 1	Safe Food and Water			43		In upo utopo	ils properly stored				
30			eggs used where required		1	44			uipment & linens: properly stored, dried, & handled	$\vdash$			
31			from approved source tained for specialized processing methods		+	45			ringle-service articles: properly stored & used	$\vdash$			
32		vanance op	Food Temperature Control			46		Gloves used		Н			
33		Proper cooli	ng methods used: adequate equipment for temp. control		_	- 10		0,0700 0000	Utensils, Equipment and Vending				
34			roperly cooked for hot holding		+	47		Food and no	on-food contact surfaces cleanable,				
35		<del></del>	awing methods used			48			signed, constructed, & used	П			
36			ers provided and accurate			49		Warewashin	g: installed, maintained, & used: test strips	П			
			Food Identification						Physical Facilities				
37		Food proper	ly labeled: original container			50		Hot & cold w	rater available adequate pressure				
			Prevention of Food Contamination			51		Plumbing ins	stalled, proper backflow devices				
38		Insects, rod	ents, & animals not present			52		Sewage & w	aste water properly disposed				
39		Contaminati	on prevented during food preparation, storage & display			53		Toilet facilitie	es properly constructed, supplied, & cleaned	Ш			
40		Personal cle	anliness			54		Garbage & re	efuse properly disposed, facilities maintained	Ш			
41		Wiping cloth	s: properly used & stored			55		<u> </u>	lities installed, maintained, & clean	Ш			
42	<u> </u>	Washing fru	its & vegetables			56	<u> </u>	Adequate ve	ntilation & lighting, designated areas used				
Tvr	e of C	peration:							License Posted:	N			
			non in Charge:										
DIS	cussio	ii wiiii re	son-in-Charge:										
				1					Follow-Up Date:	[			
Sign	nature	of Persor	in Charge:						Date:				
Cin	nature	of Inspec	tor: 8 = 5						Date: 2/15 [2017				
		UL TIMBUCU							Ent (0   Ent En				



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



Fst	ahlishmen	Reeds Ferr	as teacher		Date:2 / I	5/2022	Page 2_ of 2
		on Dw High				e Achieved: 2.1 15	12022
7 664	1000. PO.	st par thele		TEMPERATURE OBSERVAT			
		Item / Location	Temp.	Item / Location	Temp.	Item / Location	Temp.
					TO A CONTROL OF THE PARTY OF TH		
	,		OB	SERVATIONS AND/OR CORRECTI			Dated Corrected
V	Item Number	Section of Code		Description of V	/iolation		or COS
	Harrison		·				
				-			
			LVO Wielo	Highs observed dist	im time of	increction .	
			No Grond	tions observed du	7		
	_						
					<u></u>		
		-	<del></del>				
	-						
			<u> </u>				
	<u> </u>						
					_		<u> </u>
	-						
	_						
	-						
	-						
	J <u>.</u>						
	+						
	-			Ň			
				"		<u> </u>	
Siz	nature of	Person in Charge:				Date:	
_			-5			Date: 2./	18/2022
Si	gnature of	inspector:	2/				U- , U



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



Establishment: Tomanauk Tavern	[	Date 211412 Page 1 of 2 No. of Risk Factor/Intervention Violence							
Address: AST Pw Highway	Т	ime in	10:30	Time	out <b>!:30</b>	No. of Repeat Risk Factor/Intervention Violation	15 Ø		
Owner/Permit Holder: Tomanawik Tavern LLC	F	Risk Ca	tegory:	R		Total Violation	ns Ø		
Email:	F	hone:				Inspection Status: Green Yellow Red			
Inspection Type: Routine Re-inspection Pre-oper	ration	al	Illnes	s Inve	estigation	Complaint Other			
FOODBORNE ILLNESS RISK					_				
Circle designated compliance status (IN, OUT, N/A						in appropriate box for COS and/or R			
IN = in compliance OUT= not in compliance NO = n	ot obs	erved N	/A = not	applica	able COS ≃	corrected on-site R = repeat violation			
Compliance Status	cos	I B I	Icam.	Mana	- Ciotus		OS R		
Supervision	COS	R	COIII	manic	e Status	Protection from Contamination	72 K		
1 Person in charge present, demonstrates knowledge and			15	INO	UT N/A NO	Food separated and protected			
performs duties 2 IN OUT N/A Certified Food Protection Manager		+	16		UT_N/A	Food-contact surfaces cleaned and sanitized			
				-	UTNANO	Proper disposition or returned, previously served,			
Employee Health  Management/food employees & conditional employee;			17	INO	UIWANU	reconditioned & unsafe food			
knowledge, responsibilities and reporting					1	Finne / Temperature Control for Safety			
4 UNDUT Proper use of restriction and exclusion			18	_	UT N/A NO	Proper cooking time and temperature			
5 OUT Procedures for responding to vomiting and diarrheal events			19	_	UT N/A NO)	Proper reheating procedures for hot holding			
Good Hygiene Practices			20	_	UT N/A(NC)	Proper cooling time and temperatures			
6 IN OUT NO Proper eating, tasting, drinking, or tobacco use			21	-	UT N/A NO	Proper hot holding temperatures			
7 IN OUT (10) No discharge from eyes, nose, mouth		Щ	22	<del>- &gt;</del>	UT N/A NO	Proper cold holding temperatures			
Preventing Contamination by Hands			23		UT N/A NO	Proper date marking and disposition			
8 IN OUT (O) Hands clean & properly washed			24	INO	UT N/A NO	Time as a Public Health Control; procedures and records			
9 IN OUT N/A (O) No bare hand contact with RTE food			-	-	1= 4144 T	Consumer Advisory			
10 Adequate handwashing sinks properly supplied & accessible Approved Source			25	INJOI	JT N/A	Consumer advisory provided for raw/undercooked foods			
11 INOUT Food obtained from an approved source			26	Mo	UT N/A	Highly Susceptible Populations  Pasteurized foods used; prohibited foods not offered			
12 IN OUT N/A NO Food received at proper temperature			20			d / Color Additives and Toxic Substances			
13 (INOUT Food in good condition, safe & unadulterated		$\vdash$	27	INO	UT (I/A)	Food additives: approved and properly used			
14 IN OUT N/A NO Req. records available: shell stock tags, parasite destruction			28		UT N/A	Toxic substances property identified, stored and used			
	nst		-		Co	onformance with Approved Procedures			
Risk factors are improper practices or procedures identified as the me Prevalent contributing factors of foodborne illness or injury. Public Hea Interventions are control measures to prevent foodborne illness or inju	ilth		19	IN O	JT N/A	Compliance with variance/specialized process/HACCP			
		TOTAL A T.T.				Competence start verial incrependations produced start			
Good retail practices are preventative measures to			PRACT		e chamicale s	and physical phierte into foods			
Mark "X" in box if numbered item is not in compliance Mark "X" on app						=corrected on-site during inspection R=repeat viola	tion		
			-			lee			
Compliance Status Safe Food and Water	cos	R	Comp	liance	Status	Proper Use of Utensils	S R		
30 Pasteurized eggs used where required			43		In-use utensi	ils properly stored			
31 Water & Ice from approved source			44			ipment & linens: properly stored, dried, & handled	$\dashv \dashv$		
32 Variance obtained for specialized processing methods			45		Single-use/si	ingle-service articles; properly stored & used			
Food Temperature Control			46		Gloves used	properly			
Proper cooling methods used; adequate equipment for temp. control						Utensils, Equipment and Vending			
34 Plant food properly cooked for hot holding			47 -		Food and no	n-food contact surfaces cleanable,			
35 Approved thawing methods used			48		Properly desi	igned, constructed, & used			
36 Thermometers provided and accurate			49		Warewashing	g: installed, maintained, & used: test strips			
Food Identification						Physical Facilities			
37 Food properly labeled: original container		L	50			ater available adequate pressure			
Prevention of Food Contamination			51			talled, proper backflow devices			
38 Insects, rodents. & animals not present			52			aste water properly disposed			
39 Contamination prevented during food preparation, storage & display		_	53	-		s properly constructed, supplied, & cleaned			
40 Personal cleanliness  41 Wining clether property used 8 stored		-	54 55	$\dashv$		viruse property disposed, facilities maintained	+-		
41 Wiping cloths: properly used & stored 42 Washing fruits & vegetables	ities installed, maintained, & clean ntilation & lighting, designated areas used	+							
- I Isaamil nam a sagarana			56		- modesta sai				
Type of Operation:						License Posted:	N		
Discussion with Person-in-Charge:						Follow-Up: Y	(N)		
/\\						Follow-Up Date:			
W Comp						, onow-op bate.			
Signature of Person in Charge:						Date:			
nature of Inspector: Date: 2/14/2022									



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



Es	tablishmer	it: Tomaha	WK T	שהכנט		D	ate: 2/14/2022	Page	Z.
Ad	dress: 54	14 DW Hig	hway			C	ompliance Achieved: 2/14		
					TEMPERATURE OBSERVATI	ONS			
		Item / Location		Temp.	Item / Location	Temp	· Item / Location	n Te	етр.
		<del></del>							
					OBSERVATIONS AND/OR CORRECTIV	E ACTIONS			7.1
V	Item	Section of Code			Description of Vic	olation		Dated Correc	cted
	Number				· · · · · · · · · · · · · · · · · · ·			or COS	
			44	lan antani	ation appealed during	-19-a aC	Description of the management of the second		
				G. OIG	- HOS SPECIOES ACTIVE	TIME OF	ristection.		_
									-
_									_
									$\neg$
$\neg$									$\dashv$
-									
									_
									$\neg$
									$\dashv$
$\dashv$									$\dashv$
									_
									$\neg$
			1/1/						$\neg$
ا ا	oturo -f D	amon in Character	<del>-                                      </del>	ures //			Data:		$\dashv$
		erson in Charge:	with.		,		Date:		_
Sigr	ature of In	spector:	74	-	~		Date: 2 / a	14/2022	



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



Est	ablishr	ment: 🛌	bit systems		Date Z/	4/22	Pag	e 1 of	No. of Risk Factor/Intervention Violation	ns Ø
Add	dress:	220	bu Highway		Time in:( )OO Time			e out:2100	No. of Repeat Risk Factor/Intervention Violation	ns/S
			er. Elbit systems of America		Risk Ca	tegory:	A		Total Violation	13 🔨
Em			2/2/10/10/10/10/10/10/10/10/10/10/10/10/10/	_	Phone:		-		Inspection Status: Green Yellow Red	-
ins	nection	Type:	Routine Re-inspection Pre-ope	ratio		Illne	ee lo	vestigation		
1110	Dection	туре.	FOODBORNE ILLNESS RISK							
			Circle designated compliance status (IN, OUT, N/				BLIC			
					<u> </u>		P1		in appropriate box for COS and/or R	
			IN = in compliance OUT= not in compliance NO = n	Of Of	served N	A = not	арри	cable COS =	corrected on-site K = repeat violation	
Com	pliance	Status		COS	R	Com	plian	ce Status		OS R
_			Supervision Person in charge present, demonstrates knowledge and				Z <sup>m</sup> \		Protection from Contamination	
1	NO(NI		performs duties		$\perp$	15	$\sim$	DUT N/A NO	Food separated and protected	
2	Mypu	JT N/A	Certified Food Protection Мападег			16		DUT N/A	Food-contact surfaces cleaned and sanitized	
	12.3		Employee Health			17	IN	OUT WA NO	Proper disposition or returned, previously served, reconditioned & unsafe food	
3	(IN)Or	TU	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Time / Temperature Control for Safety	
4	INOL	JΤ	Proper use of restriction and exclusion			18	IN	OUT N/A NO	Proper cooking time and temperature	$\top$
5	INJOL	JT	Procedures for responding to vomiting and diarrheal events			19	IN+	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 OU	IT (NO	Proper eating, tasting, drinking, or tobacco use			21	IN	OUT N/A(NO)	Proper hot holding temperatures	
7	IN OL	IT (NO)	No discharge from eyes, nose, mouth			22		DUT N/A NO	Proper cold holding temperatures	
			Preventing Contamination by Hands			23	(IN)	OUT N/A NO	Proper date marking and disposition	
8	IN OU	407	Hands dean & properly washed			24	IN	OUT N/A NO	Time as a Public Health Control: procedures and records	
9		IT N/A(NO)	No bare hand contact with RTE food			1 1			Consumer Advisory	
10	(IN OU	IT ]	Adequate handwashing sinks properly supplied & accessible			25	(IN)	DUT N/A	Consumer advisory provided for raw/undercooked foods	
	-		Approved Source					-	Highly Susceptible Populations	
11	חסאור		Food obtained from an approved source		-	26	IN	DUT(N/A)	Pasteurized foods used; prohibited foods not offered	
12	T-SPERSON.	T N/A(NO)	Food received at proper temperature		$\perp$		. ·		d / Color Additives and Toxic Substances	
13	ÎNOU		Food in good condition, safe & unadulterated			27	-	OUT(N/A)	Food additives: approved and properly used	_
14		N7A NO	Req. records available: shell stock tags, parasite destruction	_		28	INX	OUT N/A	Toxic substances properly identified, stored and used	
	Ris Pre	s <b>k factors</b> ar valent contr	re improper practices or procedures identified as the mo ributing factors of foodbome illness or injury. Public Hea ire control measures to prevent foodbome illness or inju	st Ith					onformance with Approved Procedures	
	Inte	rventions a	re control measures to prevent foodborne illness or inju	ry.		19	IN	DU (N/A)	Compliance with variance/specialized process/HACCP	
			GO	OD.	RETAIL	PRACI	TICES			
11	1 - 10 - PH 7 -	b	Good retail practices are preventative measures t							
IVIAI	K A III	DOX II JIUM	bered item is not in compliance Mark "X" on app	ropri	ate box to	r COS a	and/or	COS	=corrected on-site during inspection R=repeat viola	tion
Com	oliance	Status		cos	R	Comp	olianc	e Status	co	SR
	1 1		Safe Food and Water						Proper Use of Utensils	
30	<del></del>		eggs used where required			43	-	-	ils properly stored	$\dashv$
31	1-		from approved source			44	-		sipment & linens; properly stored, dried, & handled	$\dashv$
32		Variance obt	tained for specialized processing methods			45	-		ingle-service articles; properly stored & used	$\dashv$
33	1	O	Food Temperature Control		_	46		Gloves used		
34	-		ng methods used: adequate equipment for temp. control roperly cooked for hot holding		-	47	1	Ened and no	Utensils, Equipment and Vending	-
35	$\vdash$		awing methods used		+	48			igned, constructed, & used	$\dashv$
36	-		rs provided and accurate		+	49			g: installed, maintained, & used: test strips	+
		711011110111011	Food Identification			10	-	**************************************	Physical Facilities	
37		Food properl	ly labeled: original container		T	50		Hot & cold wa	ater available adequate pressure	
			Prevention of Food Contamination			51			talled, proper backflow devices	$\dashv$
38		Insects, rode	nts, & animals not present			52		Sewage & wa	aste water properly disposed	
39		Contamination	on prevented during food preparation, storage & display			53		Toilet facilitie	s properly constructed, supplied, & cleaned	
40		Personal clea	anliness			54		Garbage & re	rfuse properly disposed, facilities maintained	$\neg \neg$
41		Wiping cloths	s: properly used & stored			55		Physical facili	ities installed, maintained, & clean	
42		Washing fruit	ts & vegetables	56		Adequate ver	ntilation & lighting, designated areas used			
Тур	e of O	peration:							License Posted:	N
			son-in-Charge:						Follow-Up: Y	Thi
וכום	JUSSIUI	I WILL FER	Sorrii Sharge.						,	
									Follow-Up Date:	
Sigr	nature	of Person	in Chargey						Date:	
		of Inspect							Date: 9 /1/L line are	
Oigi	MENIC	or mapeul	r / / / / / / / / / / / / / / / / / / /					Date: 2/14/2022		



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



Es	tablishmer	nt: 巨心计 S	ystems					: 2/14/2022	Page Z	of Z
Ad	dress: 2	20 Des Ai	ahrua4				Com	pliance Achieved: 2/14/	2022	
			C. C.		TEMPERATURE	OBSERVATIONS				
		Item / Location		Temp.	Item / Loca	tion	Temp.	Item / Location		Temp.
					OBSERVATIONS AND/OR	CORRECTIVE ACTIO	INC			
	Item						11473		Dated	Corrected
V	Number	Section of Code			De	scription of Violation				COS
			1		·					
			1							
		<u>                                     </u>								
						·····				
			_ n	a Dial	ations observe	a docina Li	no a	Finesalation		
			**			<del> </del>	100			
-								****		
$\neg$					<del></del>					
-										
$\dashv$										
$\dashv$					<u> </u>					
-		-	-				-			
	T									
$\dashv$				<del></del>						
_										
				A.						
				111						
	ature of D	arcon in Charac	10 1	4	and the state of t			Date:		
		erson in Charge:								
Sign	ature of In	spector	7/1					Date: 2/ L	H 203	



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



Es	tablishme	nt: Ho	eywords			1	Date.2	101/	122 F	age 1 of Z	No. of Ri	sk Factor/int	ervention '	Violation	s 65
Ad	dress: 36	·4 1	ow Haki	way					-		No. of Repeat Ri	sk Factor/Int	ervention 1	Violation	s vs
Ow	ner/Perm	it Hold	er. Haywa	ELS ICE CVE	am	F	Risk C	atego	ory: J	D			Total '	Violation	
Em							hone:			<u></u>	Inspection Status	Green	Yellow	Red	14)
Ins	pection T	vne.	(Routine)	Re-inspection	Pre-ope				Inecc	Investigation	·	Othe		1100	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , ,	(Hodalino)	<u>:</u>							NTERVENTIONS	Othe	71		
			Circle design	ated compliance status		-					in appropriate box for	COS and/or l	R		
				ance OUT= not in comp											
Carr	pliance St	lailue.													
COIL	ipilance 3	iaius	Sı	pervision		cos	R	-	ompi	liance Status	Protection from	Contaminatio	ATT)	CO	SR
1	TUO NI		Person in charge p	resent, demonstrates know	riedge and				15	IN OUT N/A NO	Food separated and p				
2	FINOUT	N/A	performs duties Certified Food Prote	ection Manager		<del>                                     </del>	+		16	IN DUT N/A	Food-contact surfaces		nitiand		
				loyee Health					17	IN OUT MANO	Proper disposition or re	aturned, previous			-
2	(IN) DUT	Т		employees & conditional er	mployee;		$\overline{}$	$\vdash$	• /	111 001 (117)10	reconditioned & unsafe				
3			knowledge, respons	sibilities and reporting			$\vdash$	-			Time / Temperature		afety		
5	TUOMI TUOMI		Proper use of restri	ction and exclusion conding to vorniting and dia	erhaal evente	-	+	-	18	IN OUT N/A NO	Proper cooking time at		ı-lt		+
-	11,001			giene Practices	initical events			$\vdash$	20	IN OUT N/A NO	Proper reheating proof		rang		
6	IN OUT	NO		ng, drinking, or tobacco use				-	21	IN OUT N/A NO	Proper hot holding tem			_	$\dashv$
7	IN OUT	(a)	No discharge from e	eyes, nose, mouth				2	22	IN PUT N/A NO	Proper cold holding ter				$\dashv \dashv$
			Preventing Cor	itamination by Hands	3			2	23	IN OUT N/A NO	Proper date marking a	nd disposition			
8	IN OUT	NO	Hands clean & prop	erly washed				2	24	IN OUT NA NO	Time as a Public Healt	h Control: proce	dures and rec	ords	
9	IN OUT N	I/A(NO)	No bare hand conta	ct with RTE food			$\perp$	L	1		Consumer				
10	IN DUT			ning sinks properly supplied	d & accessible		4	2	25	AN TUCKI	Consumer advisory pro			ods	
11	NOUT		Food obtained from	an approved source	· · · · · · · · · · · · · · · · · · ·				26	IN DUT N/A	Highly Susceptib				
12	IN OUT N	IANO	Food received at pro				+-+	-			od / Color Additives a				
13	IN)DUT	-		on, safe & unadulterated			+	2	7 1	IN DUT N/A	Food additives; approve				
14	IN OUT N	/A NO	Req. records availab	le: shell stock tags, parasi	te destruction		$\Box$	2	8	IN OUT N/A	Toxic substances prope			d	
	Risk fa	actors ar	e improper practic	es or procedures ident	ified as the me	ost					onformance with Ap	proved Proce	dures		
	Interve	entions a	ributing factors of the control measure	es or procedures ident oodbome illness or inju es to prevent foodborne	iry. Public Hea a illness or inju	alth Jry,		1	9	IN OUT N/A	Compliance with varian	ce/specialized p	ocess/HACC	Р	
					G	OOD R	ETAIL	PRA	ACTIO	CES	L				
				retail practices are prevent	ative measures	to contr	ol the ad	dition (	of path	nogens, chemicals,	and physical objects into	foods.			
Mar	k "X" in bo	x if numl	bered item is not in	compliance M	ark "X" on apr	oropria	te box f	or CC	)S an	d/or COS	=corrected on-site du	ring inspection	R=rep	eat violati	on
Com	oliance Sta	atus				cos	R	Co	mpli	ance Status				cos	R
				od and Water						1	Proper Use o	f Utensils			
30			eggs used where req					4:	$\rightarrow$		sils properly stored				+
32			from approved source ained for specialized					4:	_	_	uipment & linens: properly single-service articles: pro				+
	461	iasioc obc		perature Control				41	-	Gloves used		perry stored & us	en .	-	+
33	Pro	per coolir		quate equipment for temp.	. control				- 1		Utensils, Equipme	at and Vendin	AK.	-	
34	Pla	nt food pr	operly cooked for hot	holding				47	7 -	Food and no	on-food contact surfaces	deanable,	0	$\Box$	$\Box$
35	App	proved that	wing methods used					48	8	Properly des	signed, constructed, & use	ed			
36	The	mometer	rs provided and accur					49	9	Warewashir	g: installed, maintained, l		S		Щ
37	Enn	d noned	Food 10 y labeled: original cor	dentification	T			50	<u> </u>	Hot & cold	Physical F				
37	FBU	o broberi		Food Contamination				51		_	rater available adequate p stalled, proper backflow d			-	
38	Inse	cts, rode	nts, & animals not pre		· · · · · · · · · · · · · · · · · · ·			52	-		aste water properly dispo				+-
39	Con	taminatio	n prevented during fo	od preparation, storage &	display			53	-		es properly constructed, s		∌d		+-
40	Per	sonal clea	ınliness					54	4	Garbage & r	efuse properly disposed,	facilities maintair	ned		
41_	Wip	ing cloths	property used & stor	red				55	5	Physical faci	lities installed, maintained	l, & clean			
42	Was	shing fruit	s & vegetables					56	3	Adequate ve	ntilation & lighting, design	ated areas used			
Tvn	e of Oper	ation:						- 1				License Po	sted:	(V)	N.
			son-in-Charge:	<del></del>					,				o.com.	_ <del></del>	(A)
اداب	Jubbill W	mirek	sorriironarge:									Follow-Up:	2.1.	Ť	
												Follow-Up [	ate:		
Sigr	ature of F	Person	in Charge:	0 1								Date:			
Sigr	nature of I	nspect	or:	>//	-							Date: 2 /	11/27		
		(									-	<u>a *</u>	- y		



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



Est	ablishmen	: HOY Word	5					Date: 2/	11/2022	Page_	2_ of	<u>z</u>
Ad	dress: 36	4 DW H	ian way					Complian	ce Achieved: 7/11/	2072		
					TEMPERA	TURE OBSERVA	TIONS					
		Item / Location		Temp.	Ite	m / Location	Т	emp.	Item / Location			Temp.
											-	
			-									
							A CONTON	75				
	1 4			0	BSERVATIONS A	ND/OR CORRECT		3			Dated Co	orrected
٧	Number	Section of Code				Description of	Violation				or C	
				-								
	_											
	<u> </u>											
				<u>.</u>								
				10 h	into Long	ancelved	doctne	Line	oc inspection			
				110 .0			ı					
	<del> </del>											
							<u></u>					
					-							
						· · · · · · · · · · · · · · · · · · ·	<u> </u>					
-												
	-					<u> </u>						
										_		
	-		·			· · · · · · · · · · · · · · · · · · ·						
	-											
	-											
								_				
					<u> </u>							
					<u> </u>							
		-					··					
	-											$\neg \neg$
	1						· · · ·			_		
			()									
e:	anoture of	Person in Charge:	10						Date: 2	[ai	22	
		Person in Charge:	10	73					Date: 2/6	1.120	72	-
Si	gnature of	INSIDECTOR:		7					271	- 1		



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



Est	ablishment: ا	arimack valley Baptat caus	S	Date:	B/22	Page	101_2	No. of Risk Factor/Intervention Violations	
Ado		Boston Past Raad		Time in:	1:00	Time	out: = 50	No. of Repeat Risk Factor/Intervention Violations	グ
		er: Merrimack valley Baptist Co	and the	Risk Cat	legory:	G		Total Violations	7)
Em		HEIT MEET CULTY BEPTSI CH	Ujej	Phone:	0 7 -			Inspection Status: Green Yellow Red	
Insp	pection Type:	Routine Re-inspection Pre-ope					estigation	Complaint Other	
		FOODBORNE ILLNESS RISE				BLIC	HEALTH II	NTERVENTIONS	
		Circle designated compliance status (IN, OUT, N/	A, NO	) for each	n item		Mark "X"	in appropriate box for COS and/or R	
		IN = in compliance OUT= not in compliance NO =	not of	oserved N	/A = not	applic	cable COS =	corrected on-site R = repeat violation	
Com	pliance Status		CO	SR	Comi	oliano	e Status	COS	R
		Supervision	1					Protection from Contamination	-
1 (	ОООТ	Person in charge present, demonstrates knowledge and performs duties			15	ING	UT N/A NO	Food separated and protected	
2	IN OUT (I/A)	Certified Food Protection Manager		+	16	inc	DUT N/A	Food-contact surfaces cleaned and sanitized	$\vdash$
		Employee Health			17		DUT/N/A NO	Proper disposition or returned, previously served,	
	0	Management/food employees & conditional employee;			''	1111		reconditioned & unsafe food	
3	IN OUT	knowledge, responsibilities and reporting	_					Time / Temperature Control for Safety	
4	(IN)OUT	Proper use of restriction and exclusion			18	-	DUT N/A NO	Proper cooking time and temperature	Ш
5	INDUT	Procedures for responding to vomiting and diarrheal events			19	+	DUT N/A (10)	Proper reheating procedures for hot holding	Ш
	7	Good Hygiene Practices			20	-	DUT N/A NO	Proper cooling time and temperatures	
6	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use			21	-	DUT N/A(NO)	Proper hot holding temperatures	
7	IN OUT NO	No discharge from eyes, nose, mouth			22	<b>~~</b> √	UT N/A NO	Proper cold holding temperatures	
		Preventing Contamination by Hands	,		23	(N)	UT N/A NO	Proper date marking and disposition	Ш
8	IN OUT (NO	Hands clean & properly washed			24	IN C	OUT N/A 100	Time as a Public Health Control: procedures and records	Щ
9	IN OUT N/ANO	No bare hand contact with RTE food						Consumer Advisory	
10	TROUT	Adequate handwashing sinks properly supplied & accessible			25	IN O	UT (V/A	Consumer advisory provided for raw/undercooked foods	
		Approved Source						Highly Susceptible Populations	
11	INDUT	Food obtained from an approved source		$\perp$	26	IN C	DUT(N/A)	Pasteurized foods used; prohibited foods not offered	
12	IN OUT N/A NO	Food received at proper temperature	<u> </u>					d / Color Additives and Toxic Substances	
13	INDUT	Food in good condition, safe & unadulterated			27	2000	DUT(N/A)	Food additives: approved and properly used	
14	IN OUT(N/A NO	Req. records available: shell stock tags, parasite destruction			28	IN)O	UT N/A	Toxic substances properly identified, stored and used	
	Risk factors a	are improper practices or procedures identified as the m tributing factors of foodbome illness or injury. Public He are control measures to prevent foodborne illness or inj	ost				C	onformance with Approved Procedures	
	Interventions	are control measures to prevent foodborne illness or inju	aruт лгу,		19	INO	UT N/A	Compliance with variance/specialized process/HACCP	
_		C	מחר	RETAIL	PRACT	ICES			
		Good retail practices are preventative measures				-	is, chemicals,	and physical objects into foods.	
Mar	k "X" in box if nun	nbered item is not in compliance Mark "X" on app						=corrected on-site during inspection R=repeat violation	_
	oliance Status		cos	R	Cama	llana	e Status	cos	R
,0111	Dilatice Status	Safe Food and Water	000	·   K	Comp	HallCt	e Status	Proper Use of Utensils	
30	Pasteurized	eggs used where required			43		In-use utens	ils properly stored	
31	Water & Ice	from approved source			44		Utensits, equ	ipment & linens: properly stored, dried, & handled	$\neg$
32	Variance of	otained for specialized processing methods			45		Single-use/si	ingle-service articles; properly stored & used	$\neg$
		Food Temperature Control			46		Gloves used	properly	$\Box$
33	Proper cool	ing methods used: adequate equipment for temp, control						Utensils, Equipment and Vending	
34	Plant food p	properly cooked for hot holding			47 ·		Food and no	n-food contact surfaces cleanable,	
35		nawing methods used			48		Properly des	igned, constructed, & used	$\neg$
36		ers provided and accurate			49		Warewashing	g: installed, maintained, & used; test strips	$\neg$
		Food Identification						Physical Facilities	
37	Food prope	rly labeled: original container			50		Hot & cold w	ater available adequate pressure	
		Prevention of Food Contamination			51		Plumbing ins	talled, proper backflow devices	
38	Insects, rod	ents, & animals not present			52		Sewage & wa	aste water properly disposed	
39	Contaminat	ion prevented during food preparation, storage & display			53		Toilet facilitie	s properly constructed, supplied, & cleaned	
40	Personal cle	eanliness			54		Garbage & re	fuse properly disposed, facilities maintained	
41	Wiping cloth	ns; properly used & stored			55		Physical facil	ities installed, maintained, & clean	
42	Washing fru	its & vegetables			56		Adequate ver	ntilation & lighting, designated areas used	
								1: 511	
Тур	e of Operation:							License Posted: (Y)	
Disc	cussion with Pe	rson-in-Charge:						Follow-Up:	1)
		JA.						Follow-Up Date:	
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_	<i>/</i>				<u> </u>	$\dashv$
Sigr	nature of Persor	tor: Questie lu la la companya de la companya della companya de la companya della	267	9/				Date:	
Class		tor: ()		1				Date: - A d- dE	
Olgi	nature of Inspec	101.	8	1				Date: 2/10(202)	



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



Address: 517 BOSTON Post Doed Compliance Achieved: 21 W 12012  TEMPERATURE OBSERVATIONS	Es	tablishmer	it: Merromack	incley Boil	Hist chorch	Date:2	1012022	Page 2	of 2
Temp   Bean / Lecation   Temp   Bean / Lecation   Temp   Bean / Lecation   Temp	Ad	dress: 51	7 Boston P	ost poed		Complia	nce Achieved: 7/10	12012	
OBSERVATIONS AND/OR CORRECTIVE ACTIONS  V Number					TEMPERATURE OBSERVA	ATIONS			
V Number Section of Code Description of Violation Description of Violation of Code of			Item / Location	Temp.	Item / Location	Temp.	· Item / Locat	ion	Temp.
V Number Section of Code Description of Violation Description of Violation of Code of									
V Nember Section of Code Description of Violation District Conscient of COS									
V Nember Section of Code Description of Violation District Conscient of COS									
V Nember Section of Code Description of Violation District Conscient of COS									
V Nember Section of Code Description of Violation District Conscient of COS									
Number Section of Code  Ric Violations observed doing think of inspection.  Ric Violations observed doing think of inspection.  Ric Violations observed doing think of inspection.				0	BSERVATIONS AND/OR CORREC	TIVE ACTIONS			
Signature of Person in Change: MATH Jetawitz Dete:	V	1	Section of Code		Description of	f Violation			
Signature of Person in Change: Matter J. Manusky Date:		Number			<u> </u>				or COS
Signature of Person in Change: Matter J. Manusky Date:									
Signature of Person in Change: Matter J. Manusky Date:									
Signature of Person in Change: Matter J. Manusky Date:									
Signature of Person in Change: Matter J. Manusky Date:									
Signature of Person in Change: Matter J. Manusky Date:									
Signature of Person in Change: Matter States							· · · · · · · · · · · · · · · · · · ·		
Signature of Person in Change: Matter States				90	UDIOHOM OBSETVEN	doring time	of incodid	3.	
							, ,,,,,,		
								i	
					·		·		
	_								
		i							
	$\dashv$								
	_								
	-								
	_						· · · · ·		
				AL A					
	Sign	ature of Po	erson in Charge:	MULL JUST	witz		Date:		
	Sigr	nature of In	spector:	-6///	-0		Date: 🧖 /	10/2012	



**HEALTH DIVISION** 

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



Esta	Establishment: Charlies Horstyle Direct  Address: Coc Due Chiquestyle Direct  Owner/Permit Holder: Charlies Horstyle Direct  Datez/q/ 7/ Page 1 of 2  No. of Risk Factor/Intervention Violations of No. of Repeat Risk Factor/Intervention Violations of No. of Risk Factor/Intervention Violations o										
				-	Time in	11/2	0	Time out	No. of Repeat Risk Factor/Intervention Violations		
Own	er/Pe	ermit Holde	E Charlie de La Santa Dinan		Risk Ca			44-,740	Total Violations		
Ema			CHRISTIS HOWESTATE DIGH	-	Phone:				Inspection Status: Green Yellow Red		
		Type:	Routine Re-inspection Pre-op			111	nes	s Investigation	Complaint Other		
insp	ection	Type.	FOODBORNE ILLNESS RIS								
_			Circle designated compliance status (IN, OUT, N						in appropriate box for COS and/or R		
-			IN = in compliance OUT= not in compliance NO =								
									COS ( F		
Comp	olianc	a Status	Supervision	cos	R		omp	liance Status	Protection from Contamination		
1	IND	IT	Person in charge present, demonstrates knowledge and	Τ.	$\top$		15	IN OUT N/A NO	Food separated and protected		
<u> </u>	ZPRING.		Performs duties	-	+	-	16	IN OUT N/A	Food-contact surfaces cleaned and sanitized		
2	ING	JT N/A	Certified Food Protection Manager				17	IN OUT ATTA NO	Proper disposition or returned, previously served,		
	6		Employee Health  Management/food employees & conditional employee;	Т	_	-  -			reconditioned & unsafe food		
3		JT	knowledge, responsibilities and reporting	4	1	$\vdash$		0.55	Time / Temperature Control for Safety		
4	(IN)		Proper use of restriction and exclusion	+	-		18	IN OUT N/A NO	Proper cooking time and temperature		
5	IN D	JT	Procedures for responding to vomiting and diarrheal events	Ш	4	$\vdash$	19 20	IN OUT N/A NO	Proper reheating procedures for hot holding  Proper cooling time and temperatures		
6	INO	TOW TO	Good Hygiene Practices  Proper eating, tasting, drinking, or tobacco use	Т	<del>,                                    </del>		21	IN OUT N/A(NO)	Proper hot holding temperatures		
7	IN O		No discharge from eyes, nose, mouth	<del> </del>		$\vdash$	22	(IN)OUT N/A NO	Proper cold holding temperatures		
			Preventing Contamination by Hands			2	23	(IN OUT N/A NO	Proper date marking and disposition		
8	INO	ON TL	Hands clean & properly washed			2	24	IN OUR N/A NO	Time as a Public Health Control: procedures and records		
9	IN O	JT N/A(NO)	No bare hand contact with RTE food				•		Consumer Advisory		
10	(IN)DI	JT	Adequate handwashing sinks properly supplied & accessible			2	25	IN OUT N/A	Consumer advisory provided for raw/undercooked foods		
<u> </u>	0		Approved Source						Highly Susceptible Populations		
11: (	1)010		Food obtained from an approved source	<del> </del>	+-	2	26	IN OUT N/A	Pasteurized foods used; prohibited foods not offered od / Color Additives and Toxic Substances		
12 13 <i>E</i>	INO	JT N/A(NO)	Food received at proper temperature  Food in good condition, safe & unadulterated	+	+	-	27	IN OUT NA	Food additives: approved and properly used		
14		J7 N/ANO	Req. records available: shell stock tags, parasite destruction	+-	+	-	28	IN OUT N/A	Toxic substances properly identified, stored and used		
				nost	-			C	onformance with Approved Procedures		
	Pre	evalent cont	re improper practices or procedures identified as the r ributing factors of foodbome illness or injury. Public H are control measures to prevent foodborne illness or in	ealth	i	1	19	IN OUT N/A	Compliance with variance/specialized process/HACCP		
	,,,,,				RETAI						
			Good retail practices are preventative measure						and physical objects into foods.		
Marl	k " <b>X</b> " iı	box if num	bered item is not in compliance Mark "X" on a						=corrected on-site during inspection R=repeat violation		
Comp	liance	Status		cos	R	Co	omp	liance Status	COS R		
			Safe Food and Water						Proper Use of Utensils		
30		Pasteurized	eggs used where required		$\perp$		43		sils properly stored		
31			from approved source	-	+		14		uipment & linens: properly stored, dried, & handled		
32		Variance ob	tained for specialized processing methods		$\perp$	-	15 16	Single-use/s Gloves used	single-service articles: properly stored & used		
22		O	Food Temperature Control	T	_	-	10	Gloves used	Utensils, Equipment and Vending		
33			roperly cooked for hot holding	+		4	17 -	Food and no	on-food contact surfaces cleanable,		
35		<u>-</u>	awing methods used		$\top$	4	8	Properly des	signed, constructed, & used		
36		Thermomet	ers provided and accurate			4	19	Warewashir	ng; installed, maintained, & used; test strips		
			Food Identification						Physical Facilities		
37		Food proper	ly labeled; original container				50		water available adequate pressure		
<u> </u>			Prevention of Food Contamination			5	$\rightarrow$		stalled, proper backflow devices		
38			ents, & animals not present	+	+-	_	52 53		waste water properly disposed es properly constructed, supplied, & cleaned		
39 40		Contaminati Personal cle	on prevented during food preparation, storage & display	+	+	-	54		refuse properly disposed, facilities maintained		
41			s: properly used & stored	+	+	$\vdash$	55		ilities installed, maintained, & clean		
42			its & vegetables	1			56		entilation & lighting, designated areas used		
									Linna Postedi (V) N		
		Operation:							License Posted: Y N		
Disc	cussio	on with Pe	rson-in-Charge:						Follow-Up: Y N		
			:00/						Follow-Up Date:		
Sior	nature	of Person	in Charge:						Date:		
_		ature of Person in Charge: Date:									
Laigi	iditure	ure of Inspector: Date: 2/9 (2022									



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



Esta	blishmer	it: Charlies	40.00519	lle b	iner			Date: 2	19/2022	Page	20	of _2_
Addı	ress:	D DO HAN	way					Complia	ance Achieved: 2/9/	2022		
			0			ATURE OBSERV						
		Item / Location		Temp.	It	tem / Location		Тепор.	· Item / Locatio	n		Temp.
									···			
					_							
					OBSERVATIONS.	AND/OR CORREC	TIVE ACTIO	VS				
V	Item Number	Section of Code				Description of	f Violation					Corrected
$\dashv$				<u>-</u> .								
+						<del></del>	<u> </u>					
$\perp$												
+		:						<del>.</del>	<u> </u>	-		
				no	eicachions	Obsertand	1200	nes to	ne of increa	fion		
												-
+												
										-		
-												
	-											
					<del></del>							
+									·			
+												
+												
_												
+						,						
							·····					$\neg$
+												
 Signat	ure of Pe	erson in Charge	V	2					Date:			-
	ture of in		( 5)	9					Date: 219	1702	2_	
			1760		The same of the sa					0 000		



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



Establishment: 6100 to 5	Datez	( D	122	Page	e 1 of <u>Z</u>	No. of Risk Factor/Intervention Violation	1
Address: Pot Hilford Road	Time i	nk (	:30	Time	out://.too	No. of Repeat Risk Factor/Intervention Violation	\$ 100
Owner/Permit Holder: GTE Restaurant COSP.	Risk C	ate	gory:	C		Total Violations	3
Email:	Phone	);				Inspection Status: Green Yellow Red	
Inspection Type: (Routine) Re-inspection Pre-operation	mal		Illne	ee Inv	restigation	Complaint Other	
FOODBORNE ILLNESS RISK FA		AN					
Circle designated compliance status (IN, OUT, N/A, NC				шиц.		In appropriate box for COS and/or R	
IN = in compliance OUT= not in compliance NO = not of				annlie			
IN = In compriance ODT = Not in compliance NO = not or	serveu	NUP	4 - HOI	аррік	able CO3 -		
Compliance Status COS	S R	$\Box$	Com	plianc	e Status	[CO	S R
Supervision  Person in charge present, demonstrates knowledge and		-	-			Protection from Contamination	
1 INOUT performs duties		-	15	<b>1</b>	DUT N/A NO	Food separated and protected	
2 (IN OUT N/A Certified Food Protection Manager			, 3 16	_	OUT WA	Food-contact surfaces cleaned and sanitized	_
Employee Health			17	IN C	OV AW) TUC	Proper disposition or returned, previously served, reconditioned & unsafe food	
Management/food employees & conditional employee; knowledge, responsibilities and reporting					-	Time / Temperature Control for Safety	
4 (IN OUT Proper use of restriction and exclusion		1	18	INC	DUT N/A NO	Proper cooking time and temperature	
5 IN DUT Procedures for responding to vomiting and diarrheal events		1	19	IN C	OUT N/A NO	Proper reheating procedures for hot holding	
Good Hygiene Practices			20	IN C	OUT N/A NO	Proper cooling time and temperatures	
6 IN OUT Proper eating, tasting, drinking, or tobacco use			21	INC	OUT N/A NO	Proper hot holding temperatures	
7 IN OUT (O) No discharge from eyes, nose, mouth			22	(IN)	ON ANN TUC	Proper cold holding temperatures	
Preventing Contamination by Hands			23	_	OUT N/A NO	Proper date marking and disposition	
8 IN OUT NO Hands clean & properly washed			24	IN C	ON AIN TUC	Time as a Public Health Control: procedures and records	
9 IN OUT N/ANO, No bare hand contact with RTE food		]		-		Consumer Advisory	
10 INOUT Adequate handwashing sinks properly supplied & accessible		ļ	25	(IN)C	DUT N/A	Consumer advisory provided for raw/undercooked foods	
Approved Source			<u> </u>		·	Highly Susceptible Populations	
11 UNOUT Food obtained from an approved source		-	26	(IN)	DUT N/A	Pasteurized foods used; prohibited foods not offered	
12 IN OUT N/ANO Food received at proper temperature	+-	-			4	d / Color Additives and Toxic Substances	
13 IN OUT Food in good condition, safe & unadulterated	-	-	27	4000	DUT N/A	Food additives: approved and properly used	_
14 (TN)OUT N/A NO Req. records available; shell stock tags, parasite destruction			28	INC	DUT 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.			-			onformance with Approved Procedures	
Interventions are control measures to prevent foodborne illness or injury.			19	IN C	DUT(VA)	Compliance with variance/specialized process/HACCP	
G00D	RETA	L F	PRACI	FICES			
Good retail practices are preventative measures to cor							
Mark "X" in box if numbered item is not in compliance Mark "X" on appropr	iate box	for	COS	and/or	COS	=corrected on-site during inspection R=repeat violat	ion
Compliance Status COS	R	Г	Com	plianc	e Status	COS	S R
Safe Food and Water				12.5	100	Proper Use of Utensils	
30 Pasteurized eggs used where required			43	ļ.,_		ils properly stored	
31 Water & Ice from approved source			44			uipment & linens: properly stored, dried, & handled	_
32 Variance obtained for specialized processing methods			45	ļ	Single-use/s	ingle-service articles: properly stored & used	
Food Temperature Control			46	<u> </u>	Gloves used		
33 Proper cooling methods used: adequate equipment for temp. control	-			1		Utensils, Equipment and Vending	
34 Plant food properly cooked for hot holding	+		47	-		nn-food contact surfaces cleanable,	-
35 Approved thawing methods used			48	-		g: installed, maintained, & used:	+
36 Thermometers provided and accurate  Food Identification			-40	<u> </u>	*** ale was ill	Physical Facilities	
37 Food properly labeled: original container			50	T	Hot & cold w	rater available adequate pressure	
Prevention of Food Contamination			51	1		stalled, proper backflow devices	
38 Insects, rodents, & animals not present			52		Sewage & w	aste water properly disposed	$\neg \neg$
39 Contamination prevented during food preparation, storage & display			53		Toilet facilitie	es properly constructed, supplied, & cleaned	
40 Personal deanliness		_	54		Garbage & r	efuse properly disposed, facilities maintained	
41 Wiping cloths: properly used & stored		(z	65	X	Physical faci	lities installed, maintained, & clean	
42 Washing fruits & vegetables			56	l	Adequate ve	ntilation & lighting, designated areas used	
		_				License Posted:	N
Type of Operation:	-						
Discussion with Person-in-Charge:						Follow-Up:	N
$\Omega_{\bullet}/I$						Follow-Up Date:	
Signature of Person in Charge						Date:	$\neg \neg$
Signature of Inspector:						Date: 2 / 8 / 202 Z	



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



Esta	ablishmer	t: 619705							Date	鲁21812022	Page	<u>Z</u> 0	12
		of milford	1 2 mod						_	pliance Achieved:			
1 1010		OT MILIONE	1 1000		TEMI	PERATURE	OBSERVAT	TONS					
		Item / Location		Temp.		Item / Local	tion		Техир.	Item / Location			Temp.
						<u></u>							
			-										
									_				_
									270				
		T	Т		OBSERVATIO				NS.			Dated C	orrected
V	Item Number	Section of Code				De	scription of V	iolation				or (	cos
			Kitchen	1									
£		(0)			Desalin	2011 / 64	a sino	on-k c	ATIPE	with acc. of	:		
_	_5S_	C'-201.15					CC OTPIT	Zil E	1011-1	1 (2)			
					an.					1 2 2 2			
	_55	6-501.12	- floor	bel	on Coo	Kline	equip	ront a	soile	d with acc.			
			of fo	nd c	lepris-c	lean.							
			Baseme	ent:									
PE-	16_	11-161-11	The second secon	2 44	1240. OF	THE WY	Chine	saile	d w	itn acc. of mo	d		
H. E.	1.6.	4-60.11	41-61	mi er k n i i	s. dear	<u> </u>		<del></del>					
			GAG (	CICPIT	S. CLECA								
								<del></del>					
			<u> </u>					·					
											-		
		<u>                                     </u>											
								<u>.                                      </u>					
						<u> </u>							
										<u> </u>			
			ļ										
				-			<u> </u>				-+		
<u> </u>													
			h1/		7			Wat is a		Date:			
		Person in Charge	IVIA								Ina -	2	
Sig	nature of	Inspector:	May						-	Date: 2/8	1202		
		6	1										



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



Establishment: wactgreens		Date /	7/22	Page 1 of <b>2</b> .	No. of Risk Factor/Intervention Violations	13
Address: 615 Dw Highway	T	ime in:	11:00	Time out <b>u:5</b> 0	No. of Repeat Risk Factor/Intervention Violations	Ó
Owner/Permit Holder: watgreens Eastern Co. mc	F	Risk Ca	tegory:	tr	Total Violations	<b>B</b>
Email:		hone:		<u> </u>	Inspection Status: Green Yellow Red	
Inspection Type: Routine Re-inspection Pre-opera			Illnes	s Investigation		-
FOODBORNE ILLNESS RISK I						
Circle designated compliance status (IN, OUT, N/A,					in appropriate box for COS and/or R	
IN = in compliance QUT= not in compliance NO = not			_			$\dashv$
Compliance Status Supervision	cos	R	Com	oliance Status	Protection from Contamination	R
1 Person in charge present, demonstrates knowledge and			15	INOUT N/A NO	Food separated and protected	$\top$
performs duties  2 IN OUT N/A Certified Food Protection Manager			16	IN OUT N/A	Food-contact surfaces cleaned and sanitized	$\vdash$
Employee Health			17	IN OUT WAYO	Proper disposition or returned, previously served,	$\vdash$
			''		reconditioned & unsafe food	Щ
knowledge, responsibilities and reporting					Time / Temperature Control for Safety	
4 DOUT Proper use of restriction and exclusion		$\vdash$	18	IN OUT NA NO	Proper cooking time and temperature	Н
5 (IN) OUT Procedures for responding to vomiting and diarrheal events		4	19	IN OUT WANO	Proper reheating procedures for hot holding	Н
6 IN OUT (NO) Proper eating, tasting, drinking, or tobacco use			21	ON AND TUO NI	Proper cooling time and temperatures  Proper hot holding temperatures	H
7 IN OUT NO No discharge from eyes, nose, mouth			22	(NOUT N/A NO	Proper cold holding temperatures	Н
Preventing Contamination by Hands		-	23	IN OUT N/A NO	Proper date marking and disposition	
8 IN OUT NO Hands clean & properly washed			24	IN OUT NA NO	Time as a Public Health Control: procedures and records	
9 IN OUT N/ANO No bare hand contact with RTE food			-		Consumer Advisory	
10 OUT Adequate handwashing sinks properly supplied & accessible			25	IN OU (N/A)	Consumer advisory provided for raw/undercooked foods	
Approved Source					Highly Susceptible Populations	
11 INOUT Food obtained from an approved source			26	IN OUT (N/A)	Pasteurized foods used; prohibited foods not offered	
12 IN OUT N/N/N/Pood received at proper temperature  13 UP OUT Food in good condition, safe & unadulterated			od / Color Additives and Toxic Substances			
13 LM OUT Food in good condition, safe & unadulterated  14 IN OUT(N/A)(O) Req. records available: shell stock tags, parasite destruction		-	27	IN OUT N/A	Food additives: approved and properly used  Toxic substances properly identified, stored and used	
	4	$\vdash$	20		onformance with Approved Procedures	
Risk factors are improper practices or procedures identified as the mos Prevalent contributing factors of foodborne illness or injury. Public Healt Interventions are control measures to prevent foodborne illness or injury	h		19	IN OUT (NA		
		TOTAL XX	1		Compliance with variance/specialized process/HACCP	
Good retail practices are preventative measures to			PRACT		and physical phicate into foode	
Mark "X" in box if numbered item is not in compliance  Mark "X" on appro-					=corrected on-site during inspection R=repeat violation	$\dashv$
Compliance Status C	OS	R	Comp	liance Status	cos I	R
Safe Food and Water			Comp	nance Status	Proper Use of Utensils	
30 Pasteurized eggs used where required			43	In-use utens	sils properly stored	
31 Water & Ice from approved source			44	Utensils, eq	uipment & linens: properly stored, dried, & handled	
32 Variance obtained for specialized processing methods			45	Single-use/s	single-service articles: properly stored & used	_
Food Temperature Control			46	Gloves used		_
33 Proper cooling methods used: adequate equipment for temp. control 34 Plant food properly cooked for hot holding			47 ·	I Food and an	Utensils, Equipment and Vending	-
35 Approved thawing methods used		-	48	_	on-food contact surfaces cleanable,	$\dashv$
36 Thermometers provided and accurate	$\neg$		49		ng: installed, maintained, & used: test strips	-
Food Identification					Physical Facilities	
37 Food properly labeled: original container			50	Hot & cold w	vater available adequate pressure	
Prevention of Food Contamination			51	Plumbing ins	stalled, proper backflow devices	
38 Insects, rodents, & animals not present			52	Sewage & w	raste water properly disposed	_
39 Contamination prevented during food preparation, storage & display	_	_	53		es properly constructed, supplied, & cleaned	_
40 Personal deanliness	$\dashv$	_	54		efuse properly disposed, facilities maintained	$\dashv$
41 Wiping cloths: properly used & stored 42 Washing fruits & vegetables			55 56		ilities installed, maintained, & clean entilation & lighting, designated areas used	$\dashv$
- I was a safewaya				, woodage Ac	- 131 - 131 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 131 - 13	
Type of Operation:					License Posted:	1
Discussion with Person-in-Charge:			-		Follow-Up: Y	1)
- PR					Follow-Up Date:	
						$\dashv$
Signature of Person in Charge:				-	Date:	_
Signature of Inspector:			Date: 2/17/2022			



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



Page 2 of 2

Establishment: wedgreens			Date	:2/4/2022	Page _ 2_ c	f <u>Z</u>
Address: 615 DW Highwa	.u		Con	npliance Achieved: 2/4	12022	
	1	TEMPERATURE OBSERV	ATIONS			707
Item / Location	Temp.	Item / Location	Temp.	Item / Location		Temp.
					·	
	ļ					
	OB	SERVATIONS AND/OR CORRECT	TIVE ACTIONS			
V Item Section of Code		Description o	f Violation			COS
Number Section of Sect						
						,
			. <u> </u>			
	120 Itin	lations observed au	rina time	of inspection.		
	190 010	<u> </u>				
			<u></u>			
	<u> </u>					
						]
		<u></u>				
	-A-1			P. 4		
Signature of Person in Charge:	4 /a/			Date:		
Signature of Inspector:	>//			Date: 2/ P	+12022	



Establishment: papa Ginos

#### MERRIMACK FIRE DEPARTMENT

HEALTH DIVISION

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



No. of Risk Factor/Intervention Violations

#### FOOD ESTABLISHMENT INSPECTION REPORT

Date 1 4 27 Page 1 of 2

Addr	ress: <b>5</b>	can	timental	Blud		Time	int2	1:00	Time	out2:45	No. of Repeat Ris	k Factor/Intervention \	/iolation	<b>S</b>
				grand Autren	tir eats	Risk	Cate	egory:	13			Total \	/iolation	s 1-
Ema			1000	HILL THE PARTY OF	110 CP43	Phon	e:				Inspection Status:	Green Yellow	Red	
Insp	ection Ty	pe: (	Routine	Re-inspection	Pre-operat	ionał		Ilines	ss inv	estigation	Complaint	Other		
				FOODBORNE ILI			S AN	D PU	BLIC 1	HEALTHE	NTERVENTIONS			
			Circle design	nated compliance status							in appropriate box for	COS and/or R		
				iance OUT= not in compl					applic					
			114 177 0011101											
Comp	liance Sta	atus		iupervisiou	CC	DS R	-	Com	plianc	e Status	Protection from	Contemination	co	S R
. 7	JN OUT			present, demonstrates knowle	edge and		$\dashv$	15	1	OUT N/A NO	I		T	T
1 4			performs duties				$\dashv$	<u> </u>	$\sim$		Food separated and pr		-	
2	N TUC(NI	/A	Certified Food Pro				-	16	-	OUT N/A	Froner disposition or re	cleaned and sanitized sturned, previously served,	-+	-
				ployee Health			4	17	IN C	ON AND TUC	reconditioned & unsafe			
3	<b>N</b> OUT			l employees & conditional em nsibilities and reporting	ployee;						Time / Temperature	Control for Safety		
4	TUQ NI)		Proper use of rest	riction and exclusion				18	IN C	OUT N/A (10)	Proper cooking time an	d temperature		
5	TUONI		Procedures for res	sponding to vomiting and diar	rheal events		_	19	IN C	OUT N/A(NO)	Proper reheating proce	dures for hot holding		
			Good I	lygiene Practices				20	INC	OUT N/A(NO)	Proper cooling time and	d temperatures	$-\!\!\!\!\!+$	$\bot$
6	IN OUT	(NO)	Proper eating, tas	ting, drinking, or tobacco use			_	21	INC	DUT N/A(NO)	Proper hot holding tem	peratures		
7	IN OUT	(v)	No discharge from	eyes, nose, mouth			_	22	<del>-</del>	OUT N/A NO	Proper cold holding ten			
<u> </u>			Preventing Co	ntamination by Hands			_	23	10	OUT N/A NO	Proper date marking ar	·		$\perp$
8	IN OUT	(NO)	Hands clean & pro	perly washed			_	24	(IN)	ON AN TUC	<u> </u>	n Control: procedures and rec	ords	
9	IN OUT N	A(NO)	No bare hand conf	act with RTE food			_				Consumer A			
10	IN DUT			shing sinks properly supplied	& accessible		4	25	No	UT N/A	l	vided for raw/undercooked fo	ods	
							4		( )		Highly Susceptibl			
11 (						-	$\dashv$	26		OUT N/A		t; prohibited foods not offered		
12	IN OUT N/	A(NO)	Food received at p	· · · · · · · · · · · · · · · · · · ·			$\dashv$	27	LING	DUT(N/A)	od / Color Additives a			
$\overline{}$	IN OUT N	200		lition, safe & unadulterated		+	+	27	_	OUT N/A	Food additives; approve	arty identified, stored and use	_	+
14		_		able: shell stock tags, parasite			-	20			onformance with Ap		-	
	Risk fa Prevale	<b>ictors</b> ar ent contr	e improper pract ibuting factors of	ices or procedures identi f foodborne illness or inju ires to prevent foodborne	fied as the most ry. Public Health		П	-	Ţ					
	Interver	ntions a	re control measu	ires to prevent foodborne	illness or injury.		┸	19	INC	OUT (V/A)	Compliance with varian	ce/specialized process/HACC	<u> </u>	
					G00	D RET	AIL I	PRACI	TICES					
				d retail practices are preventa									4-7-4-4	
Mark	("X" in box	c if numl	pered item is not	in compliance Ma	ark "X" on appror	oriate bo	X foi	COS	and/or	COS	=corrected on-site du	ring inspection R=rep	eat violat	ion
Comp	liance Sta	itus			cc	S R	T	Comp	oliance	e Status			CO	S R
	<u> </u>		Safe F	ood and Water			4				Proper Use o	f Utensils		
30	Pas	teurized	eggs used where re	equired		<u> </u>	-	43	-		sils properly stored		$-\!\!\!+\!\!\!\!-$	+
31			from approved sour				-	44	+		uipment & linens: properly			$\dashv$
32	Vari	iance obt		d processing methods		<u> </u>	-	45	-		single-service articles: pro	perly stored & used	-	+
1				nperature Control			-	46		Gloves used		and Vanding		
33				dequate equipment for temp.	control	-	-	) 47 ·	L	Food and no	Utensils, Equipmen		1	
34			operly cooked for h			+	10	48	X	-	signed, constructed, & use	<del></del>	+	$\dashv$
35			awing methods use rs provided and acc			-	-	49	+		g: installed, maintained, &		-	+
	THE	imomete		Identification			1				Physical Fa			
37	Foo	d properl	y labeled: original o				1	50	T	Hot & cold w	vater available adequate p	pressure		
				f Food Contamination	- 12			51		Plumbing ins	stalled, proper backflow d	evices		
38	Inse	ects, rode	nts, & animals not p				1	52		Sewage & w	aste water properly dispo	sed		$\sqcap$
39	Con	ntaminatio	on prevented during	food preparation, storage &	display			53		Toilet facilitie	es properly constructed, s	upplied, & cleaned		
40	Pen	sonal de	anliness				7	54		Garbage & r	efuse properly disposed,	facilities maintained		
41	Wip	ing cloths	s: properly used & s	tored				55		Physical faci	ilities installed, maintained	d, & clean		
42	Was	shing frui	ts & vegetables					56		Adequate ve	entîlation & lighting, desigr	nated areas used		$\perp$
												License Posted:	<b>(</b>	N
	e of Oper				<u> </u>								8	
Disc	cussion w	ith Per	son-in-Charge	;								Follow-Up:	(T)	N
												Follow-Up Date:		
Sign	ature of F	Person	in Charge:	Koizy C								Date: 2/7/	27	
												7	7	
Sign	nature of l	inspect	ior:	-/-//								Date: 2.1 17 1 20 2		



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



Establishment: Papa 62005							Date: 🗷	1412022	Page	<u> 2,</u> o	1 2			
Ad	dress: 2	continent	al Blud.					Compliance Achieved:						
					ТЕМРЕ	RATURE OBSERVA								
		Item / Location		Temp.		Item / Location	Ter	np.	· Item / Locat	iou		Temp.		
				OF	BSERVATION	S AND/OR CORREC	TIVE ACTIONS							
V	Number	Section of Code				Description of	f Violation					COS		
	IVAIIIDEI	1	1.00.00.00.1								O( 1	303		
			KHONAN!	_	<u>.</u>									
<u>C.</u>	44	4-602-15	- exterior	of w	MITCH !	nid en wor	COTAMECL!	SOLICE	with acodepti	s.clain				
						•				ĺ				
	<u> </u>													
									M.A.					
_														
			-				· · · · · · · · · · · · · · · · · · ·							
										-				
			-											
 :i~-	ature of F	erson in Charge:	01	>/	~				Date: 2	12%	2-2			
_			" lece							1				
šigi	nature of li	nspector:	ハーノ		2				Date: 2	17/20	<b>LZ</b>			



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



Establishment: 4- Eleven 1# 33243	Date 1/2/22 Page 1 of _Z			No. of Ris	of Risk Factor/Intervention Violations				
Address: 728 Dw Hignway	Time int: 50 Time outs: 30			out1:30	No. of Repeat Risk Factor/Intervention Violations				ns 🕉
Owner/Permit Holder: St. Kryolos . Inc.	Risk Cat	egory:	D	-			Total	Violation	ns Ø
Email:	Phone:				Inspection Status:	Green	Yellow	Red	
Inspection Type: Routine Re-inspection Pre-operation		Illnor	an Inv	estigation	l . '			1100	
FOODBORNE ILLNESS RISK FA					Complaint	Othe	الــــــــــــــــــــــــــــــــــــ		
Circle designated compliance status (IN, OUT, N/A, N			DLIL I		in appropriate box for	COS andlor	D		
IN = in compliance OUT= not in compliance NO = not o	·		analia						
		W = 110f	applic	able COS =	corrected on-site K =	repeat violati	ION		
Compliance Status CO	S R	Com	plianc	e Status				C	OS R
Supervision Person in charge present, demonstrates knowledge and			6		Protection from (		9.0		
performs duties		15	$\sim$	OUT N/A NO	Food separated and pro	otected			
2 NOUT N/A Certified Food Protection Manager		16		DUT N/A	Food-contact surfaces				
Employee Health		17	INC	ON AND TUE	Proper disposition or re reconditioned & unsafe		siy served,		
Management/food employees & conditional employee; knowledge, responsibilities and reporting				-	Time / Temperature	Control for S	afety		
4 INOUT Proper use of restriction and exclusion		18	IN C	OUT N/A NO	Proper cooking time an	d temperature			
5 INDUT Procedures for responding to vomiting and diarrheal events		19	IN C	OUT N/A (10	Proper reheating proce	dures for hot ho	olding		
Good Hygiene Practices		20	IN C	OUT N/A NO	Proper cooling time and	l temperatures			
6 IN OUT (NO) Proper eating, tasting, drinking, or tobacco use		21	1/2	OUT N/A (10)	Proper hot holding temp				
7 IN OUT NO No discharge from eyes, nose, mouth		22	-	PUT N/A NO	Proper cold holding tem				
Preventing Contamination by Hands	-	23		OUT N/A NO	Proper date marking an				-
8 IN OUT NO Hands clean & properly washed 9 IN OUT N/ANO No bare hand contact with RTE food		24	INC	OUT N/A NO	Time as a Public Health		dures and re	cords	
9 IN OUT N/ANO No bare hand contact with RTE food  10 IN OUT Adequate handwashing sinks properly supplied & accessible	-	25	TINO	LITAVA)	Consumer A	-	ndarnaakad fe	odo I	
Approved Source		23	25 IN OUTNA Consumer advisory provided for raw/undercooked f						
11 Frood obtained from an approved source	$\neg \neg$	26	INO	UT N/A	Pasteurized foods used			ī	
12 HOUT N/ANO Food received at proper temperature				Foo	d / Color Additives a	nd Toxic Sul	stances		
13 Food in good condition, safe & unadulterated		27	INO	OUT N/A	Food additives: approve	d and properly	used		
14 IN OUT V/A NO Req. records available: shell stock tags, parasite destruction		28	INO	UT N/A	Toxic substances proper	ly identified, st	ored and use	ed	
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.				C	onformance with App	roved Proce	dures		
Interventions are control measures to prevent foodborne illness or injury.		19	INO	UT N/A	Compliance with variance	e/specialized p	rocess/HACC	P	
GOOD	RETAIL	PRACI	ICES						
Good retail practices are preventative measures to con									
Mark "X" in box if numbered item is not in compliance Mark "X" on appropri	iate box for	r COS a	nd/or	COS	=corrected on-site dur	ing inspection	n R=rel	peat viola	ition
Compliance Status COS	R	Comp	liance	e Status				co	S R
Safe Food and Water	-				Proper Use of	Utensils			
30 Pasteurized eggs used where required		43			ils properly stored				
31 Water & Ice from approved source 32 Variance obtained for specialized processing methods	+	44			ipment & linens: properly ingle-service articles: prop				-
Food Temperature Control		46		Gloves used		perty stored at the	Seu		+
33 Proper cooling methods used: adequate equipment for temp. control		1		Cioves doca	Utensils, Equipmen	t and Vendi	ner		
34 Plant food property cooked for hot holding		47 ·		Food and no	n-food contact surfaces cl		9		
35 Approved thawing methods used		48		Properly des	igned, constructed, & use	d			
36 Thermometers provided and accurate		49		Warewashin	g: installed, maintained, &	used: test strip	06		
Food Identification					Physical Fa				
37 Food properly labeled: original container		50	$\square$		ater available adequate pr				
Prevention of Food Contamination		51			stalled, proper backflow de				
38 Insects, rodents, & animals not present 39 Contemporation provided divine food proportion, storage & display.		52			aste water properly disposes properly constructed, su		ad	-	
39 Contamination prevented during food preparation, storage & display 40 Personal cleanliness		54	-		efuse properly disposed, fa				
41 Wiping cloths; properly used & stored		55	$\vdash$		lities installed, maintained,		1105		
42 Washing fruits & vegetables	+	56			ntilation & lighting, design:		d		
					1			10	
Type of Operation:						License Po	sted:		N
Discussion with Person-in-Charge:						Follow-Up:		Υ	(N)
						Follow-Up	Date:		
Cianatura of Daman in Character (1)						Date			
Signature of Person in Charge: Signature of Inspector:						Date:			



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



Establishment: q. cleven # 332 # 3							Date	: Z[2] 2022	Page 2	of_2			
		28 DW High					Compliance Achieved: 2/2/2022						
					TEMPERATURE OBSERVA								
		Item / Location		Temp.	Item / Location		Гетр.	· Item / Location		Temp.			
						-							
										-			
	-												
					OBSERVATIONS AND/OR CORREC	TIVE ACTION	VS						
V	Item	Section of Code			Description of	f Violation			1	d Corrected			
	Number				<u> </u>			<u> </u>		or COS			
_													
						<u> </u>							
		!											
								<del></del>					
				to 15 to	intelians means	A	p 15	AR Decoration					
				Do A	iolations observe	Grind	-111	W. OF MISTERPO	1	<del></del>			
										<del>.</del>			
									1				
			<del></del>										
			· <u>-</u>										
							_						
			0 1	281	1								
Sigr	nature of P	erson in Charge:	( Section		2ng/69			Date:					
Sign	nature of Ir	nspector:	- کر -					Date: 2/2	12022	.			
			- 7	- 1									



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



Establishment: BODDLE BEZ MILK & TEA						Date 2/1/2 Page 1 of No. of Risk Factor/Intervention Vio					
Add	dress:	80 p	remion outlet 1812d.		Time in	1:00	Time	outr 37	No. of Repeat Risk Factor/Intervention	า Violation:	1S 23
1		ermit Hold		$\neg$	Risk Ca	teaory:			Tota	l Violations	-
Em	ail:	**		$\rightarrow$	Phone:						1,300
										Red	
ins	pectio	n Type:	Routine Re-inspection Pre-ope					vestigation	Complaint Other		
<u> </u>			FOODBORNE ILLNESS RISK				BLIC		· · · · · · · · · · · · · · · · · · ·		
			Circle designated compliance status (IN, OUT, N/	·					in appropriate box for COS and/or R		
<u></u>			IN = in compliance OUT= not in compliance NO = n	ot ob	served N	/A = not	appli	cable COS =	corrected on-site R = repeat violation		
Com	plianc	e Status		COS	R	Com	olian	ce Status		lco:	S R
			Supervision						Protection from Contamination		
1	INO	UT	Person in charge present, demonstrates knowledge and performs duties			15	IN	DUT N/A NO	Food separated and protected		T
2	IMC	UT N/A	Certified Food Protection Manager	-		16		UT N/A	Food-contact surfaces cleaned and sanitized		+
-	U								Proper disposition or returned, previously served,	_	+
			Employee Health  Management/food employees & conditional employee;			17	I IM 4	DUTATANO	reconditioned & unsafe food		
3	IND	UT	knowledge, responsibilities and reporting						Time / Temperature Control for Safety		
4	INO	UT	Proper use of restriction and exclusion			18	IN	OUT N/A NO	Proper cooking time and temperature		
5	INO	UT	Procedures for responding to vomiting and diarrheal events			19	IN	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	INO		Proper eating, tasting, drinking, or tobacco use			21	-	ON AN TUC	Proper hot holding temperatures		
7	INO	UT 10	No discharge from eyes, nose, mouth			22	N	DUT N/A NO	Proper cold holding temperatures		
	1		Preventing Contamination by Hands			23	(IN)	UT N/A NO	Proper date marking and disposition	$\longrightarrow$	
8	IN O		Hands clean & properly washed			24	IN	OUT NAMO	Time as a Public Health Control: procedures and r	acords	
9		JT N/A NO	No bare hand contact with RTE food		$\perp$				Consumer Advisory		
10	(N)	JT	Adequate handwashing sinks properly supplied & accessible			25	IN C	OUT N/A	Consumer advisory provided for raw/undercooked	foods	
			Approved Source						Highly Susceptible Populations		
11			Food obtained from an approved source		1	26		DUT N/A	Pasteurized foods used; prohibited foods not offer	id	
12		JT N/A NO	Food received at proper temperature						d / Color Additives and Toxic Substances		
13	IN)OI	-	Food in good condition, safe & unadulterated		-	27	40700	DUT N/A	Food additives: approved and properly used		
14		JT N/A 10	Req. records available: shell stock tags, parasite destruction			28		DUT N/A	Toxic substances properly identified, stored and us	ed	
	RI Pre	<b>sk factors</b> a evalent cont	re improper practices or procedures identified as the mo tributing factors of foodbome illness or injury. Public Hea are control measures to prevent foodborne illness or inju	st Ith				C	onformance with Approved Procedures		
	Int	erventions a	are control measures to prevent foodborne illness or inju	ry.		19	IN C	DUT N/A	Compliance with variance/specialized process/HAC	CP	
			GO	OD 1	RETAIL	PRACT	ICES				
			Good retail practices are preventative measures to	o cont	rol the add	ition of pa	thoge	ns, chemicals, a	and physical objects into foods.		
Mar	k " <b>X</b> " ir	box if num	bered item is not in compliance Mark "X" on app	ropria	ate box fo	r COS a	nd/or	COS	=corrected on-site during inspection R=re	epeat violation	on
Comi	oliance	Status		cos	R	Comp	lianc	e Status		cos	R
			Safe Food and Water		1	0.000			Proper Use of Utensils	- 000	
30		Pasteurized	eggs used where required		T	43		In-use utensi	ils properly stored		$\neg$
31		Water & Ice	from approved source			44		Utensils, equ	ipment & linens: properly stored, dried, & handled		
32		Variance ob	tained for specialized processing methods			45		Single-use/si	ingle-service articles: properly stored & used		
			Food Temperature Control			46		Gloves used	properly		
33		Proper cooli	ng methods used: adequate equipment for temp. control						Utensile, Equipment and Vending		
34		Plant food p	roperly cooked for hot holding			47 -		Food and no	n-food contact surfaces cleanable,		
35		Approved th	awing methods used			48		Properly des	igned, constructed, & used		
36	Щ	Thermomete	ers provided and accurate			49		Warewashing	g: installed, maintained, & used: test strips		
	,		Food Identification			,			Physical Facilities		
37		Food proper	ly labeled; original container			50			ater available adequate pressure		$\perp$
			Prevention of Food Contamination			51			talled, proper backflow devices		$\perp$
38			ents, & animals not present			52		-	aste water properly disposed		$\perp$
39			on prevented during food preparation, storage & display			53			s properly constructed, supplied, & cleaned		+
40	$\Box$	Personal cle			+	54			afuse properly disposed, facilities maintained		+
41			s: properly used & stored		$\vdash$	55			ities installed, maintained, & clean		+
42		washing frui	ts & vegetables		<u> </u>	56		Adequate ver	ntilation & lighting, designated areas used		
Typ	e of C	peration:							License Posted:	(V)	N
			1.01								7
DIS	CUSSIO	n with Per	son-in-Charge:						Follow-Up:	Υ	
			X						Follow-Up Date:		
Sinv	ature.	of Person	in Charge:						Date:		$\neg$
										2 40 -7	
Sig	nature	of inspect	tor:/ w////						Date: 2-1-2	122	
									·		



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



Est	ablishmer	it booble	Bee Mi	ILL & Tec			1- 202Z	Page Z o	if <u>Z</u>				
		o Premium				Compliance Achieved: z -2-2022							
					TEMPERATURE OBSERVA								
		Item / Location		Temp.	Item / Location	Temp.	Item / Locati	ion	Temp.				
			-										
					<del></del>								
				ODE	DV 4 TONG AND OOD CODDEC	PISTE ATTRONG							
	Item	1	1	UBSE	ERVATIONS AND/OR CORRECT			Dated C	Corrected				
V	Number	Section of Code			Description of	Violation			COS				
				o violad	tons observed	destine time	of inspec	tion					
							<del></del>						
						•							
				<u> </u>									
_													
					YG WANG	3 O hote	nailicon	1					
					• (								
								ĺ					
							· · · · · · · · · · · · · · · · · · ·						
-					<u> </u>								
	-												
<u> </u>					V2			.					
		erson in Charge:	<del>? -</del>		100		Date:						
Sigr	nature of Ir	nspector:	<u></u>	1.6			Date: 2	7-2027					
			- (	,	-								



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



# FOOD ESTABLISHMENT INSPECTION REPORT Date: Page 1 of No.

Est	Establishment: Big Kanunas					Date: Page 1 of _2		e 1 of _2_	No. of Risk Factor/Intervention Violations				
Ad	dress:	380	DW HIGHWAY		Time in	12:00	Time	outt: DO	No. of Repeat Risk Factor/Intervention Violation	No. of Repeat Risk Factor/Intervention Violations			
Ow	ner/P	emit Hold	er Big Kanunas correcting L	رے	Risk Ca	tegory:	<u> </u>		Total Violatio	ons '	1		
	ail:				Phone:				Inspection Status: Green Yellow Red				
Ins	nectio	n Type:	Routine Re-inspection Pre-o	peratio		Illne	ee Inv	estigation/	Complaint Other				
1110	000010	11 1 y po.	FOODBORNE ILLNESS RI	<u> </u>						_			
			Circle designated compliance status (IN, OUT,						in appropriate box for COS and/or R				
			IN ≈ in compliance OUT= not in compliance NO		<u></u>		appli						
	-dia	o Ctatus											
CON	phane	e Status	Supervision	cos	R	Com	piian	ce Status	Protection from Contamination	cos	R		
1	IN)	บา	Person in charge present, demonstrates knowledge and			15	IN	OUT N/A NO	Food separated and protected				
2	IN	OUT N/A	performs duties  Certified Food Protection Manager			16	$\rightarrow$	UT N/A	Food-contact surfaces cleaned and sanitized		$\vdash\vdash$		
_			Employee Health			17	~	OUT WATO	Proper disposition or returned, previously served,		$\vdash$		
-	600	417	Management/food employees & conditional employee;				1		reconditioned & unsafe food		Н		
3	IN C		knowledge, responsibilities and reporting	_					Time / Temperature Control for Safety				
5	(IN)		Proper use of restriction and exclusion		+	18		OUT N/A NO	Proper cooking time and temperature		Н		
5	(IN)	101	Procedures for responding to vomiting and diarrheal events  Good Hygiene Practices	-		19	+	OUT N/A NO	Proper reheating procedures for hot holding  Proper cooling time and temperatures		$\vdash$		
6	INC	UT NO	Proper eating, tasting, drinking, or tobacco use			21	_	ON A'N TUC	Proper hot holding temperatures		$\vdash$		
7	IN C		No discharge from eyes, nose, mouth	+	+	22	145	PUT N/A NO	Proper cold holding temperatures		$\dashv$		
			Preventing Contamination by Hands			23	IN.	OUT N/A NO	Proper date marking and disposition				
8	TINO	UT NO	Hands clean & properly washed			24	INC	ON AN TUC	Time as a Public Health Control; procedures and records				
9	IND	UT N/A NO	No bare hand contact with RTE food						Consumer Advisory		Ш		
10		UT	Adequate handwashing sinks properly supplied & accessible	е		25	INC	DUT N/A	Consumer advisory provided for raw/undercooked foods				
44	( m)		Approved Source						Highly Susceptible Populations		_		
11	INC	UT N/A ND	Food obtained from an approved source	+	+	26	UN	DUT N/A	Pasteurized foods used; prohibited foods not offered				
13	CIND		Food received at proper temperature  Food in good condition, safe & unadulterated	+	+	27	LINIC	DUT N/A	d / Color Additives and Toxic Substances Food additives: approved and properly used		-		
14	4000	UT N/A NO	Req. records available: shell stock tags, parasite destruction			28	45	OUT N/A	Toxic substances properly identified, stored and used	-	$\dashv$		
	R	isk factors a							onformance with Approved Procedures	-			
	Pr	evalent cont	re improper practices or procedures identified as the ributing factors of foodborne illness or injury. Public I are control measures to prevent foodborne illness or	lealth		19	IN C	OU TWA	Compliance with variance/specialized process/HACCP				
					RETAIL				1				
-			Good retail practices are preventative measur						and physical objects into foods.				
Mai	k <b>"X</b> " i	n box if num	bered item is not in compliance Mark "X" on a	ppropri	ate box fo	or COS a	and/or	cos	=corrected on-site during inspection R=repeat viola	ation			
Com	plianc	e Status		cos	R	Comp	olianc	e Status	CC	os	R		
			Safe Food and Water						Proper Use of Utensils				
30		Pasteurized	eggs used where required			43	ļ	In-use utens	ils properly stored				
31	$\square$		from approved source			44	-		ipment & linens: properly stored, dried, & handled	_	_		
32		Variance ob	tained for specialized processing methods			45			ingle-service articles: properly stored & used	$\dashv$	_		
33		Proper cooli	Food Temperature Control  ng methods used: adequate equipment for temp. control	1		46		Gloves used	Utensils, Equipment and Vending	_			
34			roperly cooked for hot holding	-	+	47 ·	T	Food and no	n-food contact surfaces cleanable,	1	$\dashv$		
35	М		awing methods used			48			igned, constructed, & used	$\neg$	$\exists$		
36		Thermomete	rs provided and accurate			49		Warewashing	g: installed, maintained, & used: test strips	$\neg$	$\neg$		
			Food Identification						Physical Facilities				
37		Food proper	y labeled: original container			50			ater available adequate pressure				
00			Prevention of Food Contamination		+	51	_		talled, proper backflow devices	$\rightarrow$	$\dashv$		
38	1		onts, & animals not present on prevented during food preparation, storage & display	+		52			aste water properly disposed s properly constructed, supplied, & cleaned		$\dashv$		
4D	Х	Personal cle		+	+-	54			rfuse properly disposed, facilities maintained	$\dashv$	-		
41			s: properly used & stored	+	$\Box$	55			ities installed, maintained, & clean	-†	$\neg$		
42			ts & vegetables			56			ntilation & lighting, designated areas used		$\neg$		
	A												
	Type of Operation:  License Posted: N												
Dis	cussio	on with Per	son-in-Charge:						Follow-Up: Y	) N	1		
			1 11						Follow-Up Date:				
Sign	nature	of Person	in Charge:						Date:		$\neg$		
		_									$\dashv$		
ગાં	rature	of Inspect	or:/ w						Date: 2/2/2022				



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



establishment: 3.9 Kd		Date: 2/2/2022	Page Z of Z
Address: 380 pw H	tignway F+6	Compliance Achieved:	
	TEMPERATURE O		
Item / Location	Temp. Item/Location	on Temp. Item/Locatio	on Ten
I the second	OBSERVATIONS AND/OR O	CORRECTIVE ACTIONS	
Item Section of Co	de Desc	cription of Violation	Dated Correct or COS
	Kitchen:		
39 5-804.1	A.C.		
39 5-804.1	Tin-line letrigerator: obser	rved single use plastic cups	
	being used to scoop foor	a product biscontinue, food	
	grade oriensils shoul be us	ed.	
	*		
<del>                                     </del>			
nature of Person in Charg	e: ///	Date:	
gnature of Inspector:	0 ///		2/2022
Jimmara or mapopolori	10 /	Date. — [	- 1 th a m and and



#### **HEALTH DIVISION**

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



Est	ablish	rment: V	IN Post SH		Date 112 Page 1 of 2		No. of Risk Factor/Intervention Violations							
1		287. 3	OW Hightway		Time in	フロ	Tin	ne out):20	No. of Repeat Risk Factor/Intervention Violations					
			erveterans of formen was post 8	ladi. I	Risk Ca	atego	ory:	1		Total Viol	ations	B		
Em	ail:				Phone:				Inspection Status	Green Yellow	Red			
Insi	pectio	n Type:	Routine Re-inspection Pre-op	eratio	_		Iness fi	nvestigation	Complaint	Other				
11770		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	FOODBORNE ILLNESS RIS							Oli loi				
			Circle designated compliance status (IN, OUT, N						in appropriate box fo	or COS and/or R				
			IN = in compliance OUT= not in compliance NO =	not ob	served N	1/A =	not app	licable COS =	corrected on-site R	= repeat violation				
Com	nfianc	e Status			S R I			nce Status			COS	R		
0.011	produc	otutus	Supervision	1000	, , ,	ř	оприа	iice diatus	Protection from	Contamination	1000			
1	INC	DUT	Person in charge present, demonstrates knowledge and performs duties				15 ÎN	ON AND TUC	Food separated and p	protected	1			
2	INC	DUT N/A	Certified Food Protection Manager	+	+	-	16 IN	OUT N/A	Food-contact surface	s cleaned and sanitized	+			
			Employee Health					OUT VANO	Proper disposition or I	returned, previously served,	+			
3	TING	MIT	Management/food employees & conditional employee;	1		H	.		reconditioned & unsaf					
4	TING		knowledge, responsibilities and reporting	-			40 10		Time / Temperature		1			
5	TING		Proper use of restriction and exclusion  Procedures for responding to vomiting and diarrheal events	-	_	$\vdash$	-	OUT N/ANO	Proper cooking time a	edures for hot holding	+	+		
			Good Hygiene Practices			-		OUT NAMO	Proper cooling time at		+	+		
6	INC	UT (NO	Proper eating, tasting, drinking, or tobacco use	Ţ		$\vdash$		OUT N/A NO	Proper hot holding ter		+-	+		
7	INO	UT 10	No discharge from eyes, nose, mouth			1		OUT N/A NO	Proper cold holding te		+	$\vdash$		
			Preventing Contamination by Hands			12	23 IN	OUT N/A NO	Proper date marking a	and disposition				
8	INO	UT NO	Hands clean & properly washed	T		2	24 [N	ON NI TUO	Time as a Public Heal	th Control: procedures and records	T			
9	INO	UT N/A NO	No bare hand contact with RTE food				:		Consumer	Advisory				
10	(N)	UT	Adequate handwashing sinks properly supplied & accessible			2	25 IN							
44	100	1 17c	Approved Source			-	- T IV	LOLD IN	Highly Susceptil		F			
11	(N)	UT N/A NO	Food obtained from an approved source Food received at proper temperature	-	-	1	26 IN	OUTW		sed; prohibited foods not offered				
13	INO		Food in good condition, safe & unadulterated	-	-		27 IN	OUT N/A	Food additives; approv	and Toxic Substances				
14	-	UTNANO	Req. records available: shell stock tags, parasite destruction	1	+	-	-	DUT N/A		erly identified, stored and used	+	+-1		
•	R	isk factors a	re improper practices or procedures identified as the m	iost				C	onformance with A		-1			
	Pri Int	evalent cont terventions a	re improper practices or procedures identified as the m ributing factors of foodbome illness or injury. Public He re control measures to prevent foodbome illness or inj	alth ury,		. 1	I9 IN	OUT N/A		nce/specialized process/HACCP	T			
					RETAIL	PR/	ACTICE	Š			1			
			Good retail practices are preventative measures						and physical objects into	foods.				
Mar	k " <b>X</b> " i	n box if num	bered item is not in compliance Mark "X" on ap	propri	ate box f	or CC	OS and/o	or COS	corrected on-site du	uring inspection R=repeat	violatic	n		
Com	plianc	e Status		cos	R	Co	omplian	ce Status			cos	R		
			Safe Food and Water				1 1		Proper Use o	of Utensils				
30			eggs used where required		$\perp$	4	-	In-use utens	ils properly stored		igspace	$\perp$		
31			from approved source		1	4	_	_		ly stored, dried, & handled		+		
32	<u> </u>	Vanance ob	ained for specialized processing methods			4:		Single-use/si Gloves used	ingle-service articles: pro	operly stored & used	-			
33	<u> </u>	Proper cooli	Food Temperature Control  ng methods used: adequate equipment for temp, control			4	0	Gioves used	Utensils, Equipme	ent and Vanding				
34			operly cooked for hot holding		+-1	4	7 -	Food and no	n-food contact surfaces		Τ			
35			awing methods used			41	_		igned, constructed, & us		$\vdash$			
36		Thermomete	rs provided and accurate			4!	9	Warewashing	; installed, maintained,	& used: test strips				
			Food Identification						Physical F	acilities				
37		Food proper	y labeled: original container			50	_		ater available adequate		<u> </u>			
0.0			Prevention of Food Contamination			5			talled, proper backflow o		<u> </u>	$\vdash$		
38			nts, & animals not present		4	52		+	aste water properly dispo					
40		Personal cle	on prevented during food preparation, storage & display		+	53	_		s properly constructed, s fuse properly disposed,		-	+		
41	-		s: properly used & stored		+	55			ities installed, maintaine			+		
42			is & vegetables		$\top$	56	6		ntilation & lighting, desig					
							-							
Тур	e of C	Operation:								License Posted:	<u>W</u>	N		
Discussion with Person-in-Charge:										Follow-Up:	Υ (			
						,	•			Follow-Up Date:				
Siar	nature	of Person	in Charge Itellevil Ol	IM	1/27	11/	UD.			Date:		-		
				WIV	W U	-	- W					$\dashv$		
Sigi	nature	of Inspect	or:							Date: 1/1/2022				



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



Establishment: V	FW POST 86	41	Da	Date: 2 1 1 2022 Page Z_ of Z_							
Address: 282	ow Highway			Co	Compliance Achieved: 2 [ 1 ] 2022						
			TEMPERATURE OBSERVAT	IONS							
Iter	m / Location	Temp.	Item / Location	Temp.	· Item / Locut	ion	Temp.				
							-				
						<u> </u>	-				
							-				
			<u>.</u>				-				
, Item		OBSI	ERVATIONS AND/OR CORRECTI								
V Number Se	ction of Code		Description of Vi	iolation			Corrected COS				
				-							
					•						
		49-1-42-		-0	- 5 2 1 2 h C						
		NO UDICTIO	ins observed during	14 THE THE	us of tospection	4 .					
<del></del>											
					<u>-</u>						
				<u> </u>							
_   _			<u> </u>								
					·						
			<u> </u>								
				<del></del>							
					•						
-											
		· · · · · · · · · · · · · · · · · · ·									
		4	400								
ignature of Person		Lepigene	Memerai	~ <u> </u>	Date:						
Signature of Inspec	tor:	16			Date: Z.	112022					



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



Establishment: Merrimack HOP		Date 2-1-22 Page 1 of 2		of <b>Z</b>	No. of Risk Factor/Intervention Violations					
Address: 563 Dw Highway		Time	in:	30	Time out	2.30	No. of Repeat Risk Factor/Intervention Violations			
Owner/Permit Holder: MHPRS LLC		Risk	Cate	gory:	C.		Total Violation	-		
Email:		Phor	ne:				Inspection Status: Green Yellow Red			
Inspection Type: Routine Re-inspection Pre-c	operatio	nal		Illne	ss Investi	gation	Complaint Other			
FOODBORNE ILLNESS R	ı.		SAN			~				
Circle designated compliance status (IN, OUT,							in appropriate box for COS and/or R			
IN = in compliance OUT= not in compliance NO	= not ob	serve	d N/A	\ = not	t applicable	COS =	corrected on-site R = repeat violation			
Compliance Status	COS	S R		Com	pliance St	latus	Co	OS R		
Supervision							Protection from Contamination			
Person in charge present, demonstrates knowledge and performs duties				15	INDUT	V/A NO	Food separated and protected			
2 (IN OUT N/A Certified Food Protection Manager				16	INOUT	N/A	Food-contact surfaces cleaned and sanitized	$\neg$		
Employee Health				17	IN OUT	OWAW	Proper disposition or returned, previously served, reconditioned & unsafe food			
Management/food employees & conditional employee;     knowledge, responsibilities and reporting						7	Time / Temperature Control for Safety			
4 INOUT Proper use of restriction and exclusion		$\top$	7	18	IN OUT I	WA NO	Proper cooking time and temperature			
5 IN OUT Procedures for responding to vomiting and diarrheal event	s			19	TUO NI	N/A/NO	Proper reheating procedures for hot holding			
Good Hygiene Practices				20	IN OUT I	WANO)	Proper cooling time and temperatures			
6 IN OUT (NO) Proper eating, tasting, drinking, or tobacco use	_	+	4	21	IN OUT I		Proper hot holding temperatures			
7 IN OUT NO No discharge from eyes, nose, mouth			-	22	INPUTI		Proper cold holding temperatures	+		
8 FROUT NO Hands clean & properly washed			$\dashv$	23	IN OUT	-	Proper date marking and disposition	-		
9 INOUT N/A NO No bare hand contact with RTE food			-	24	IN COL	WADO	Time as a Public Health Control: procedures and records  Consumer Advisory			
10 INOUT Adequate handwashing sinks properly supplied & accessible	le	+	$\dashv$	25	IN OUT N	I/A	Consumer advisory provided for raw/undercooked foods	-		
Approved Source			1				Highly Susceptible Populations			
11 Food obtained from an approved source				26	(IN)DUT N	J/A	Pasteurized foods used; prohibited foods not offered			
12 TN OUT N/NO Food received at proper temperature			_				d / Color Additives and Toxic Substances			
13 INDUT Food in good condition, safe & unadulterated	-	-	4	27	IN OUT		Food additives: approved and properly used			
14 IN OU NANO Req. records available: shell stock tags, parasite destruction			-	28	IN PUT N		Toxic substances properly identified, stored and used			
Risk factors are improper practices or procedures identified as the Prevalent contributing factors of foodborne illness or injury. Public Interventions are control measures to prevent foodborne illness or	most Health					~	outomance with Approved Procedures			
Interventions are control measures to prevent foodborne illness or			Ш	19	IN OUT	/A)	Compliance with variance/specialized process/HACCP			
Conditional and a second secon	GOOD									
Good retail practices are preventative measur  Mark "X" in box if numbered item is not in compliance  Mark "X" on a							and physical objects into roods.  -corrected on-site during inspection R=repeat violate	ion		
Compliance Status										
Safe Food and Water	cos	R	-	Comp	oliance Sta	rtus	Proper Use of Utensils	SR		
30 Pasteurized eggs used where required			]	43	In-c	use utensi	is properly stored			
31 Water & Ice from approved source				44	Ute	nsils, equ	sipment & linens: properly stored, dried, & handled			
32 Variance obtained for specialized processing methods			4 1	45	Sin	gle-use/si	ngle-service articles: properly stored & used			
Food Temperature Control		_	-	46	Glo	ves used				
Proper cooling methods used: adequate equipment for temp. control  Plant food properly cooked for hot holding		+	-	47	I I Eas	d and no	Utensile, Equipment and Vending			
35 Approved thawing methods used		<del> </del>	1	48	<b></b>		gned, constructed, & used	+		
36 Thermometers provided and accurate		1	1	49			g: installed, maintained, & used: test strips	$\dashv \dashv$		
Food Identification			] [				Physical Facilities			
37 Food properly labeled: original container				50	Hot	& cold wa	ater available adequate pressure			
Prevention of Food Contamination			4 }	51			talled, proper backflow devices	$\perp$		
38 Insects, rodents, & animals not present 39 Contamination prevented during food preparation, storage & display	+	+	┨	52 53	-		aste water properly disposed			
40 Personal cleanliness		+	┧┟	54			s properly constructed, supplied, & cleaned fuse properly disposed, facilities maintained	$\dashv$		
41 Wiping cloths: properly used & stored	+		1	55			ties installed, maintained, & clean			
42 Washing fruits & vegetables				56	- / -		ntilation & lighting, designated areas used	$\top$		
Time of Occasion							111 11			
Type of Operation:							License Posted:	N		
Discussion with Person-in-Charge:							Follow-Up:	N		
ind Son	1						Follow-Up Date:	- 1		
Signature of Person in Charge: Signature of Inspector:							Date:			
Signature of Inspector:										
Signature of inspector.						-	Date: 7-1- 2022			



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



Establishment: Herrimack HOP							Date: Z/ 1 2022 Page 2 of 2				
			tighwa				Compliar	ce Achieved:			
				-	TEMPERATURE						
		Item / Location		Temp.	Item/Loca	tion	Temp.	· Item / Location		Temp.	
					<u>.</u>						
			**					<del></del>		_	
	N			0	BSERVATIONS AND/OR	CORRECTIVE A	CTIONS		1.5.		
V	Item Number	Section of Code			De	scription of Violatio	n		Da	eted Corrected or COS	
			Kitchen	a i							
C	07 E								. 1		
	22	6-501-12	T-Floor	belou	3-BOY SI	ny and	by acent	prep onit so	red		
PF	16	4-601.11	with	decon	3-Boy si	aebris de	an ·				
			car	open s	soiled with	accombia	Hon of F	aco debrica	The second		
								_			
$\dashv$											
$\dashv$											
$\dashv$					<u>.</u>						
		-	1								
$\dashv$											
			<u></u>								
								,			
$\dashv$								<del></del>			
			A .								
			Min	$\Delta \leq$	7.50						
Sign	ature of F	erson in Charge:	( -//	("				Date:			
	ature of h		, -(		7			Date: Z-	- 202 2		
3'			Alle J. E.	-							