

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



Establishment: 🐧	Illage Eatery		Da	rte S	1271		age 1 of Z			
Address: 583	Dw Highway				nt Fol			No. of Risk Factor/Intervention Viol		
Owner/Permit Hol	don -		+		-		me out(1:3)	No. of Repeat Risk Factor/Intervention Viol	ations	3 0
Email:	The billage Falery LLG		Ris	sk C	atego	ry: C		Total Viol	ations	ュ
			Ph	one	£			Inspection Status: Green Yellow F	Red	
Inspection Type:		operati					Investigation	Complaint Other_		
	FOODBORNE ILLNESS R	ISK F	ACTO	RS.	AND I	PUBL	IC HEALTH I	NTERVENTIONS		
	Circle designated compliance status (IN, OUT,						Mark "X"	in appropriate box for COS and/or R		
	IN = in compliance OUT= not in compliance NO	= not c	obser	ved l	N/A = 1	not ap	plicable COS =	corrected on-site R = repeat violation		
Compliance Status		CC	S	R	Co	omplia	ance Status		loor	
	Supervision Person in phases in the second							Protection from Contamination	cos	S F
1 UNOUT	Person in charge present, demonstrates knowledge and performs duties				1	5 (1	OUT N/A NO	Food separated and protected	T	T
2 UN OUT N/A	Certified Food Protection Manager				10	6	OUT N/A	Food-contact surfaces cleaned and sanitized	+	+
	Employee Health				11	7 1	ON AND TUO N	Proper disposition or returned, previously served,	+	+
3 OUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting	T						reconditioned & unsafe food		
4 UYOUT	Proper use of restriction and exclusion	-	-	\dashv	18	9 1	N OUT N/A(NO)	Time / Temperature Control for Safety		-
5 INOUT	Procedures for responding to vomiting and diarrheal events	s	+	\dashv	19	_	N OUT N/A(NO)	Proper cooking time and temperature	╀	\perp
	Good Hygiene Practices			\dashv	20		N OUT N/A(NO)	Proper reheating procedures for hot holding Proper cooling time and temperatures	-	+
6 IN OUT NO	Proper eating, tasting, drinking, or tobacco use	T	\top	\neg	21		N OUT N/A NO	Proper hot holding temperatures	—	-
7 IN OUT (O)	No discharge from eyes, nose, mouth		-	\dashv	22	-	DUT N/A NO	Proper cold holding temperatures	├	-
	Preventing Contamination by Hands			\exists	23	- 134	DUT N/A NO	Proper date marking and disposition	 -	+
8 INJOUT NO	Hands clean & properly washed		T	٦	24	IN	OUT NANO	Time as a Public Health Control: procedures and records	<u> </u>	+
9 IN OUT N/A NO	No bare hand contact with RTE food			\neg				Consumer Advisory		
10 INDUT	Adequate handwashing sinks properly supplied & accessible	e		\neg	25	(1)	OUT N/A	Consumer advisory provided for raw/undercooked foods		1
11 NOUT	Approved Source							Highly Susceptible Populations		
12 IN OUT N/A NO	Food obtained from an approved source			_	26	<u>a</u>		Pasteurized foods used; prohibited foods not offered		Т
13 NOUT_	Food received at proper temperature		_	_	<u> </u>		Food	/ Color Additives and Toxic Substances		
14 IN OUT WAND	Food in good condition, safe & unadulterated Req. records available: shell stock tags, parasite destruction	-	+	_	27		I OUT NA	Food additives: approved and properly used		
				4	28			Toxic substances properly identified, stored and used		
Prevalent cont	re improper practices or procedures identified as the ributing factors of foodborne illness or injury. Public I rre control measures to prevent foodborne illness or i	most lealth			-			nformance with Approved Procedures		
interventions a	ire control measures to prevent foodborne illness or i	njury.		┵	19	IN	OUT N/A	Compliance with variance/specialized process/HACCP		
		GOOD.								
Mark "X" in box if num	Good retail practices are preventative measure bered item is not in compliance Mark "X" on a	s to con	tral the	add	lition of	pathog	ens, chemicals, ar	nd physical objects into foods.		
	Mark A Oli a	phronii	ate bi	טו אנ	1 005	and/c	or COS =c	corrected on-site during inspection R≈repeat vi	olation	1
ompliance Status	Safe Food and Water	COS	R	T	Com	plian	ce Status		cos	R
0 Pasteurized	eggs used where required	<u> </u>		4		_	-	Proper Use of Utensils		
	from approved source	+	+	4	43	-		properly stored		
	ained for specialized processing methods	+	+-	-	44	+-		ment & linens: properly stored, dried, & handled		
	Food Temperature Control			-	45	+-		gle-service articles; properly stored & used		
3 Proper coolir	g methods used: adequate equipment for temp, control	Т-	T	1	70	1	Gloves used pr			
	operly cooked for hot holding	+	_	1	47	T		Utensils, Equipment and Vending food contact surfaces cleanable.		
5 Approved tha	wing methods used	 	\top	1	48			ned, constructed, & used		-
6 Thermometer	s provided and accurate			1	49	1		installed, maintained, & used: test strips	\rightarrow	-
-	Food Identification]				Physical Facilities		
Food properly	/ labeled: original container]	50		Hot & cold water	er available adequate pressure		\dashv
. T. T	Prevention of Food Contamination				51			led, proper backflow devices	_	\dashv
	its, & animals not present		_		52		Sewage & wast	e water properly disposed	\dashv	-
	n prevented during food preparation, storage & display	<u> </u>	-		53	_	Toilet facilities p	properly constructed, supplied, & cleaned	\neg	\neg
	property used & stored	├ ─	_	1	54	-		se properly disposed, facilities maintained	7	
Washing fruits			-		55	X		s installed, maintained, & clean	7	
T THE STATE OF THE		L	<u> </u>		56	L	Adequate ventila	ation & lighting, designated areas used		
ype of Operation:								License Brotest		
scussion with Pers	on-in-Charde:							License Posted: Y) N	
\								Follow-Up;	4	1
	the New							Follow-Up Date:		
gnature of Person i	n Charge:			_				Date:		\dashv
gnature of Inspecto	127-111									_
	1-1-0							Date: 3/30/2022		
	_									_



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Establishment: Ullacyc Eafer Address: 583 bw Hanway							3 130/2022	Page 2
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	Item / Location		Temp.	TEMPERATURE O				
_				TEERLY LACALIE		Temp.	Item / Loca	tion
						-		<u></u>
						+		
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, Item			OB	SERVATIONS AND/OR CA	PRECTIVE ACT	TIONS		
Number	Section of Code			Descr	iption of Violation			Dated (
		Kitchen	-					or
55 (55 6-501.12 - walk-in refrigerator floor soiled immediately.						ric. Dic. com	ried
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Establishment: Storbucks	Da	ate 3	130/21	z Pa	ige 1 of <u>2</u>	No. of Risk Factor/Intervention Violatic	one /
Address: 17 premion outlet RIVO. Owner/Permit Holder: Starbucks				_	ne out 12 C		
Owner/Permit Holder: Starbucks			ategory	_		Total Violatic	
Email:		none:				In the second se	
Inspection Type: Routine Re-inspection Pre-operation				ee li	nvestigation		
FOODBORNE ILLNESS RISK							
Circle designated compliance status (IN, OUT, N/A,	NO) fo	or ead	h item	, JOHN		" in appropriate box for COS and/or R	
IN = in compliance OUT= not in compliance NO = no				t ann	olicable COS	= corrected on site P = report violation	
Compliance Status				<u> </u>		- corrected on-site X - repeat violation	
Supervision	cos	R	Con	ıpliaı	лсе Status		os
1 Person in charge present, demonstrates knowledge and			15	1	ON AN TUD	Protection from Contamination	
performs duties 2 UNOUT N/A Certified Food Protection Manager	-					Food separated and protected	
Employee Health			16		DUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,	
3 INDUT Management/food employees & conditional employee;			17	IN	ON WATUO	reconditioned & unsafe food	
knowledge, responsibilities and reporting						Time / Temperature Control for Safety	
Troper use of restriction and exclusion			18	IN	OUT N/A(NO)	Proper cooking time and temperature	
Transaction for responding to voliming and diarmeat events			19	_	OUT N/A (10)	Proper reheating procedures for hot holding	
6 IN OUT NO Proper eating, tasting, drinking, or tobacco use			20	_	OUT N/A NO	Proper cooling time and temperatures	
7 IN OUT (NO) No discharge from eyes, nose, mouth		\dashv	21	1/ 3	OUT N/A(NO)	Proper hot holding temperatures	
Preventing Contamination by Hands			22		DUT N/A NO	Proper cold holding temperatures	
B (IN)OUT NO Hands clean & properly washed			23	+-	OUT N/A NO	Proper date marking and disposition	
INOUT N/A NO No bare hand contact with RTE food	-	\dashv	24	TIM	OUT (VA)10	Time as a Public Health Control: procedures and records	
O OUT Adequate handwashing sinks properly supplied & accessible		\dashv	25 (OUT N/A	Consumer Advisory	
Approved Source		-	25 [יעוי	OUTNA	Consumer advisory provided for raw/undercooked foods	
11 DOUT Food obtained from an approved source		\dashv	26	IN	OUT(N/A)	Highly Susceptible Populations Pasteurized foods used; prohibited foods not offered	
12 IN OUT N/ANO Food received at proper temperature	- $+$	\neg		1		od / Color Additives and Toxic Substances	
3 INDUT Food in good condition, safe & unadulterated		\neg	27	IN	OUTAVA	Food additives: approved and properly used	
4 IN OUT N/ANO Reg, records available: shell stock tags, parasite destruction							
4 IN OUT NAMO Req. records available; shell stock tags, parasite destruction			28	_	OUT N/A		_
The state of the s		7	28 (_		Toxic substances properly identified, stored and used	
The state of the s			28 (C	Toxic substances properly identified, stored and used onformance with Approved Procedures	
Risk factors are improper practices or procedures identified as the most Prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illness or injury.	-	PAIL	19	INC	OU (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. G001 G001	D RET		19 PRACT	INC	OU N/A	Toxic substances properly identified, stored and used onformance with Approved Procedures Compliance with variance/specialized process/HACCP	
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



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



Establishment: Homestead						SPECTION		
Address: 691 Dw Highway					-	Page 1 of _2_	No. of Risk Factor/Intervention Violation	
Owner/Permit Holder:		_		in1+3		ime out 2:30	No. of Repeat Risk Factor/Intervention Violations	\$ 0
Email:				atego			Total Violations	s –
Inspection Type:		Ph	one	:(60	314	129-2022	Inspection Status: Green Yellow Red	
Tre trispection P	r e oper a	tional		Hili	ness	Investigation	Complaint	
FOODBORNE ILLNES	S RISK F	ACTO	RS.	AND I	PUBI	IC HEALTH	INTERVENTIONS	
Circle designated compliance status (IN, O	UT, N/A,	NO) fo	or ea	ch iten	1	Mark "X"	in appropriate box for COS and/or R	
IN = in compliance OUT= not in compliance	NO = not	obser	ved	N/A = 1	not ap	oplicable COS :	corrected on-site R = repeat violation	
omphance Status			R			ance Status		
Supervision Person in charge present, demonstrates knowledge at							Protection from Contamination	8 R
performs duties	10			1:	5	IN DUT N/A NO	Food separated and protected	
2 INOUT N/A Certified Food Protection Manager				10	6	IN OUT N/A	Food-contact surfaces cleaned and sanitized	
Employee Health				17	7	IN OUT N/A NO	Proper disposition or returned, previously served	
3 INOUT Management/food employees & conditional employee; knowledge, responsibilities and reporting			\neg				reconditioned & unsafe food	
4 (IN)OUT Proper use of restriction and exclusion		+	\dashv	18			Time / Temperature Control for Safety	
5 INDUT Procedures for responding to vomiting and diarrheal ev	ents	\dashv	\dashv	19	-	IN OUT N/A(NO)	Proper cooking time and temperature	
Good Hygiene Practices			\neg	20		N OUT N/A(NO)	Proper reheating procedures for hot holding	
6 IN OUT NO Proper eating, tasting, drinking, or tobacco use		\neg		21		N OUT N/A (10	Proper cooling time and temperatures Proper hot holding temperatures	44
7 IN OUT (NO) No discharge from eyes, nose, mouth				22	-	NON A/N TUÇ	Proper cold holding temperatures	
Preventing Contamination by Hands				23		N OUT N/A NO	Proper date marking and disposition	4-4
INOUT NO Hands clean & properly washed				24	11	N OUT N/A NO	Time as a Public Health Control: procedures and records	+
No bare hand contact with RTE food							Consumer Advisory	
Adequate flatidwashing sinks properly supplied & access	sible			25	(IN	OUT N/A	Consumer advisory provided for raw/undercooked foods	
1 (IN)OUT Food obtained from an approved source	-						Highly Susceptible Populations	
1 INDUT Food obtained from an approved source 2 IN OUT N/ANO Food received at proper temperature			_	26	_ IN	OUT(N/A)	Pasteurized foods used; prohibited foods not offered	
3 INDUT Food in good condition, safe & unadulterated		_	_				l / Color Additives and Toxic Substances	
					10.1	LOURS	Energy and the control of the contro	_
4 IN OUT N/ANO Reg, records available; shell stock tage parceils destrue	-	_	[27	7		Food additives: approved and properly used	
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



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



FOOD ESTABLISHMENT INSPECTION REPORT

Date 3/17/17 Page 1 of 7 No.

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



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Signature of Person in Charge

Signature of Inspector:

MERRIMACK FIRE DEPARTMENT

HEALTH DIVISION



Date:

Date: 3/22/1027

432 Daniel Wehster Highway Merrimack NH, 03054 (603) 420-1730 FOOD ESTABLISHMENT INSPECTION REPORT Establishment: nonkin Date 3/22/22 Page 1 of 2 No. of Risk Factor/Intervention Violations Address: 308 Dw HAnway Time in[[-50 Time out2:00 No. of Repeat Risk Factor/Intervention Violations Owner/Permit Holder: Risk Category Total Violations Email: Phone: Inspection Status: Green Yellow Red Inspection Type: Routine Re-inspection Pre-operational Illness Investigation Complaint Other FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS Circle designated compliance status (IN, OUT, N/A, NO) for each item Mark "X" in appropriate box for COS and/or R IN = in compliance OUT= not in compliance NO = not observed N/A = not applicable COS = corrected on-site R = repeat violation Compliance Status COS R Compliance Status COS R Supervision Protection from Contamination Person in charge present, demonstrates knowledge and 1 IN OUT IN OUT N/A NO performs duties 15 Food separated and protected 2 IN OUT N/A Certified Food Protection Manager IN THE N/A 16 Food-contact surfaces cleaned and sanitized **Employee Health** Proper disposition or returned, previously served, 17 IN OUT NA NO reconditioned & unsafe food Management/food employees & conditional employee; тио ит 3 knowledge, responsibilities and reporting Time / Temperature Control for Safety TUOUI Proper use of restriction and exclusion IN OUT N/A NO 18 Proper cooking time and temperature 5 INDOUT Procedures for responding to vomiting and diarrheal events IN OUT N/A(NO 19 Proper reheating procedures for hot holding **Good Hygrene Practices** 20 IN OUT N/A NO Proper cooling time and temperatures IN OUT Proper eating, tasting, drinking, or tobacco use IN OUT N/A NO 21 Proper hot holding temperatures IN OUT ŃΟ 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 TUCINI 8 NO Hands clean & properly washed IN OUT NAMO Time as a Public Health Control: procedures and records 9 ON AW TUO NO No bare hand contact with RTE food Consumer Advisory IN DUT 10 Adequate handwashing sinks properly supplied & accessible 25 CHÌ OUT N/A Consumer advisory provided for raw/undercooked foods Approved Source Highly Susceptible Populations INDOUT Food obtained from an approved source IN OUT N/A Pasteurized foods used; prohibited foods not offered 12 IN OUT N/A(NO Food received at proper temperature Food / Color Additives and Toxic Substances 13 INOUT Food in good condition, safe & unadulterated 27 IN OUT WA Food additives: approved and properly used 14 IN OUT NA NO Req. records available: shell stock tags, parasite destruction 28 IN 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. Conformance with Approved Procedures IN OUT WA Compliance with variance/specialized process/HACCP GOOD RETAIL PRACTICES Good retail practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods Mark "X" in box if numbered item is not in compliance Mark "X" on appropriate box for COS and/or COS =corrected on-site during inspection R=repeat violation Compliance Status COS R Compliance Status COS R Safe Food and Water Proper Use of Utensils 30 Pasteurized eggs used where required in-use utensils properly stored 31 Water & Ice from approved source 44 Utensils, equipment & linens: properly stored, dried, & handled 32 Variance obtained for specialized processing methods 45 Single-use/single-service articles; properly stored & used Food Temperature Control 46 Gloves used properly 33 Proper cooling methods used: adequate equipment for temp, control Utensils, Equipment and Vending 34 Plant food properly cooked for hot holding 47 Food and non-food contact surfaces cleanable. 35 Approved thawing methods used 48 Properly designed, constructed, & used 36 Thermometers provided and accurate 49 Warewashing: installed, maintained, & used: test strips Food Identification Physical Facilities 37 Food properly labeled: original container 50 Hot & cold water available adequate pressure Prevention of Food Contamination 51 Plumbing installed, proper backflow devices 38 Insects, rodents, & animals not present 52 Sewage & waste water properly disposed 39 Contamination prevented during food preparation, storage & display 53 Toilet facilities properly constructed, supplied, & cleaned 40 Personal cleanliness 54 Garbage & refuse properly disposed, facilities maintained 41 Wiping cloths: properly used & stored 55 Physical facilities installed, maintained, & clean 42 Washing fruits & vegetables Adequate ventilation & lighting, designated areas used 56 Type of Operation: License Posted: Ν Discussion with Person-in-Charge: Follow-Up: Follow-Up Date:



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



Establishment: Done	KIN			Date: 31	22 [202.2	Page Z of Z
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



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Owner/Permit Holder:		1	_		<u> </u>		No. of Repeat Risk Factor/Intervention Violation	-
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Person in charge present, demonstrates knowledge and			\dashv	\vdash	12	7	Protection from Contamination	
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- Total Section Manager			\dashv	16	7	OUT N/A	Food-contact surfaces cleaned and sanitized	\Box
Employee Health Management/food employees & conditional employee;				17	- 11	O (AV) TUO M	Proper disposition or returned, previously served, reconditioned & unsafe food	
knowledge, responsibilities and reporting							Time / Temperature Control for Safety	
Proper use of restriction and exclusion Procedures for reached in a town it is			_]	18	- 1	N OUT N/A NO	Proper cooking time and temperature	T
Procedures for responding to vomiting and diarmeal ever	nts		_	19	- 11	N OUT N/A NO	Proper reheating procedures for hot holding	
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



stablishment: Oon 20				22/2022	Page <u>2</u> c
Address: 6 whitnay	STREET		Compliance	e Achieved:	
Item / Location	Temp.	TEMPERATURE OBSERV			
	10.1101	Item / Location	Temp.	· Item / Locat	ion
	0	BSERVATIONS AND/OR CORREC	TIVE ACTIONS		
Number Section of Code		Description o			Dated C
114111001	0-41		1 VIOIALIDI)		or C
	Rour:				
5 5-2051	T Hamilian	sink in distraction		- 1 -	
		sink in disrepair	- pipe cont	oction m	issing.
				_	1
			•		
	<u></u>				
					
ture of Person in Charge:	Jorge Hoerly	,			
or	CA			Date:	
ture of Inspector:					



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



<u></u>			FOOD EST.	<u>ABL</u>	ISH	ME	NT I	NS	PECTION	REPORT				
Es	tablishment: K	ing kone						1	ge 1 of 2		Risk Factor/In	tervention	Violatio	ns C
Ad	dress: 236 D	w Highway			_		-100	+		No. of Repeat				
Ow	ner/Permit Holo	derwhite Hountain	Contraction of the				egory			, ito, or riopout	1 10101711			7.4
Em	ail:	WALL PROVINCES	1 creamery	\neg	Phon			. 0					Violation	
<u> </u>	pection Type:	Routine) Re-ins		47		Ŀ.				Inspection Statu	JS Green	Yellow	Red	
1113	pection Type.		spection Pre-op			- 43			nvestigation	Complair	nt Oth	er		
		Circle designated com-	DBORNE ILLNESS RIS pliance status (IN, OUT, N	KFA	GIUKS	S A.	ND PU	BLI						
			The state of the s							in appropriate box				
_		IIV - III COMpilance OUT	= not in compliance NO =	HOT OF	served	J N//	A = no	app	licable COS =	corrected on-site F	R = repeat violat	ion		
Com	pliance Status	S		COS	R	T	Com	pllar	nce Status				CC	os
1	TUQUI	Supervision Person in charge present, dem				\dashv		~	1	Protection from		оп		
2	IN OUT N/A	performs duties		-		4	15	\vdash	OUT N/A NO	Food separated and	d protected			
	I IN BOT NIA	Certified Food Protection Mana				4	16	1-	OUT N/A	Food-contact surface			-	
		Employee Hea				4	17	IN	OUT NA 10	Proper disposition o reconditioned & uns		sry served,		
3	INOUT	knowledge, responsibilities and	s conditional employee; I reporting							Time / Temperatur	re Control for S	iafety		
4	INOUT	Proper use of restriction and ex					18	IN	OUT N/A(NO)	Proper cooking time	and temperature		T	
5	IN OUT	Procedures for responding to v				-	19	_	OUT N/A(NO	Proper reheating pro	ocedures for hot h	alding		
6	IN OUT (NO)	Good Hygiene Pra			· · · ·	4	20	-	OUT N/A(NO)	Proper cooling time	<u> </u>			\bot
7	IN OUT (NO)	No discharge from eyes, nose.		+-	+	1	21		OUT N/A(NO)	Proper hot holding to				+
		Preventing Contamination				-	23	-	OUT N/A NO	Proper cold holding Proper date marking				+
8	IN OUT (NO)	Hands clean & properly washed		T	Т	1	24	_	OUT N/A)NO	Time as a Public He		duran and rea		-
9	IN OUT N/A NO	No bare hand contact with RTE	food	 		1		1			r Advisory		Olds	
10	TUOUT	Adequate handwashing sinks pr	operly supplied & accessible			1	25	IN	OUT N/A	Consumer advisory	- 4	ndercooked for	ods	
44	500 -11-	Approved Sour			-]				Highly Suscept				
11	(IN)OUT	Food obtained from an approve		<u> </u>	-	-	26		OUT N/A	Pasteurized foods us				
13	(IN OUT	Food received at proper temperation, safe & u		-	+	-				d / Color Additives				
14	IN OUT N/A NO	Req. records available: shell sto			-	1	27	-	OUT N/A	Food additives: appro				-
				oet			20	צייי		Toxic substances pro proformance with A			1	
	Prevalent cont Interventions	re improper practices or proc ributing factors of foodborne are control measures to preve	illness or injury. Public He ent foodborne illness or inj	alth ury,			19	IN	OUF N/A	Compliance with varia			p	
					RETAI	L LP	RACT				- Proposition p			
		Good retail practic	es are preventative measures							and physical objects int	to foods.			
Mari	("X" in box if num	bered item is not in complian	ce Mark "X" on app	propria	te box	for	COS a	nd/o		corrected on-site d		R=repo	eat violati	ion
omp	liance Status			COS	R		Comp	lianc	e Status	<u></u>			cos	SR
20		Safe Food and W.	ater					-		Proper Use	of Utensils		,,,,,,	
30		eggs used where required from approved source			\vdash		43			ls properly stored				
32		lained for specialized processing r	methods			-	44			ipment & linens: prope				
		Food Temperature C			-	- -	45 46		Gloves used	ngle-service articles: pr	roperly stored & us	sed		
33	Proper coolii	ng methods used: adequate equip			\Box	-	40		Gioves used	Utensils, Equipme	ent and Vandin	a del		
34	Plant food p	roperly cooked for hot holding				-	47 -		Food and nor	r-food contact surfaces		5		
35	Approved the	awing methods used					48		Property desi	gned, constructed, & u	sed			-
6	Thermomete	rs provided and accurate					49		Warewashing	: installed, maintained,	& used: test strip:	В		\top
7	Food proper	Food Identification y labeled; original container	on			-	· T			Physical I				
	r-ood properi	Prevention of Food Cont	ontination.			-	50			ter available adequate				
88	Insects, rode	nts, & animals not present	armination.			ŀ	51 52			alled, proper backflow				+
9		on prevented during food preparati	on, storage & display			H	53	_		ste water properly disp properly constructed,		art .	_	+
0	Personal clea					r	54			use properly disposed			-	-
1	Wiping cloths	: properly used & stored				_	55			ies installed, maintaine			\neg	_
2	Washing fruit	s & vegetables					56		Adequate ven	tilation & lighting, desig	nated areas used		_	
Vine	of Operation:													
		i- Oi									License Pos	sted:	W,	<u>~</u>
иссі	ussion with Per	son-in-Charge:									Follow-Up:		Υ(N/
			1011								Follow-Up E)ate:		~
igna	ature of Person	in Charge:	+ 4/1								Date:			-
_	ature of Inspect													
		/ har /-	111								Date: 3/	18/202	. Z_	



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



Establishment: King Konc			Date: 2	/18/2022	2000 2 of 2
Address: 336 PW High	170U		Complian	/18/2027 F	Page 2 of 2
	3	TEMPERATURE OBSERVAT	Compilario	ce Achieved: 3/18/20	27_
Item / Location	Temp.	Item / Location	Temp.	Item / Location	Теп
	OBS	ERVATIONS AND/OR CORRECTI	VE ACTIONS		
V Item Section of Code					Dated Corrects
Number Section of Code		Description of V			or COS
			<u></u>		
	Do viole	otions observed du	oring time of	instruction.	
					
					-
	11				
gnature of Person in Charge:	At She			Date:	
ignature of Inspector:	1011/				
	1-11-6			Date: 3/ 18 / 2	022



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



Establishment:	Merrimack Ten Pin		Date	2/1/2/-	2-7	Page 1 of 2	No of Dials Foot at a	5 III 5 A	
Address:699	DW Highway	T			-	Time out! 1-3	No. of Risk Factor/Intervention		
Owner/Permit H	older: Merrimack Ten Pin				_				- 2
Email:	pratimoce tere pit			Catego	у (<u>C</u>		Violati	ons 🗲
Inspection Type:	Routine Re-inspection Pro		Phon				Inspection Status: Green Yellow	Re	<u>d</u>
		e-operation		III7	ies.	s Investigation	Complaint Other		
	FOODBORNE ILLNESS Circle designated compliance status (IN, OL	IT N/A NO) for a	ach item	OR				
	IN = in compliance OUT= not in compliance N					Mark X	in appropriate box for COS and/or R		
Compliance Status							= corrected on-site R = repeat violation		
Joinphance Status	Supervision	cos	R	Co	mp	liance Status			cos
1 IN OUT	Person in charge present, demonstrates knowledge and	d	\top	1 1		DOLLE MAN NO	Protection from Contamination		
2 IN OUT N/A	performs duties Certified Food Protection Manager		-	15	-	IN OUT N/A NO	Food separated and protected		_
	Employee Health			16	-	IN OUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,	\rightarrow	
3 IN OUT	Management/food employees & conditional employee;			17		IN OUT NA NO	reconditioned & unsafe food		
	knowledge, responsibilities and reporting						Time / Temperature Control for Safety		
4 IN OUT 5 IN OUT	Proper use of restriction and exclusion			18		IN OUT N/A NO	Proper cooking time and temperature		T
0 114 0 0 1	Procedures for responding to vomiting and diarrheal everaged Good Hygiene Practices	ents		19	-	IN OUT N/A (NO	Proper reheating procedures for hot holding		
6 IN OUT NO				20	\rightarrow	IN OUT N/A NO	Proper cooling time and temperatures		
7 IN OUT NO	, and a second s	-	+	21	- 10	IN OUT N/A NO	Proper hot holding temperatures		
	Preventing Contamination by Hands	-		23		IN OUT N/A NO	Proper date median and discussion		-+
8 IN OUT NO			T	24	\uparrow	IN OUT N/A NO	Proper date marking and disposition Time as a Public Health Control: procedures and rec		-
9 IN OUT N/A NO	No bare hand contact with RTE food		+-		_		Consumer Advisory	pros	
10 IN OUT	Adequate handwashing sinks properly supplied & access	ible		25	Ť	IN OUT N/A	Consumer advisory provided for raw/undercooked fo	nds	
44 10100	Approved Source						Highly Susceptible Populations	540	
11 IN OUT 12 IN OUT N/A NO	Food obtained from an approved source		<u> </u>	26		IN OUT N/A	Pasteurized foods used; prohibited foods not offered		
13 IN OUT	Food received at proper temperature Food in good condition, safe & unadulterated		-				od / Color Additives and Toxic Substances		
14 IN OUT N/A NO		ion	\vdash	27	- 1-	IN OUT N/A	Food additives: approved and properly used		
	The state of the s			28	-	IN OUT N/A	Toxic substances properly identified, stored and used		
Prevalent co	are improper practices or procedures identified as the intributing factors of foodborne illness or injury. Public s are control measures to prevent foodborne illness of	e most c Health		-	7		onformance with Approved Procedures		
	and defined including to prevent loodbuffle liness C			19		IN OUT (N)	Compliance with variance/specialized process/HACC	>	
	Good retail practices are preventative meas	GOOD R							
dark "X" in box if nu	mbered item is not in compliance Mark "X" or	appropriat	e box	for COS	and	d/or COS		eat viola	ation
empliance Status		cos				<u> </u>	R-lep	SAL VIOLE	1UOI1
	Safe Food and Water	1003	R	Com	рна	ence Status	Proper Use of Utensils	co	DS R
0 Pasteurize	ed eggs used where required			43	T	In-use utens	ils properly stored		
	e from approved source			44			ipment & linens; properly stored, dried, & handled	+	+
2 Variance	obtained for specialized processing methods			45	I	Single-use/si	ingle-service articles: properly stored & used	+	\rightarrow
3 Proper con	Food Temperature Control			46	<u>Ц</u>	Gloves used	properly	\top	
	oling methods used: adequate equipment for temp. control properly cooked for hot holding		_		_		Utensils, Equipment and Vending		
	thawing methods used		_	47 ·	╀		n-food contact surfaces cleanable,		
	ters provided and accurate	-		48	╀		gned, constructed, & used		
	Food Identification			43	Щ.	vvalewasning	: installed, maintained, & used: test strips Physical Facilities		
7 Food prope	erty labeled; original container			50	Г	Hot & cold wa	It ayaicat 1 actities		
	Prevention of Food Contamination			51			alled, proper backflow devices	-	
	dents, & animals not present			52		Sewage & wa	ste water properly disposed		
	tion prevented during food preparation, storage & display		_	53	L	Toilet facilities	properly constructed, supplied, & cleaned		
Personal cl				54	L		fuse properly disposed, facilities maintained		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	hs: properly used & stored uits & vegetables	-	_	55	L		ties installed, maintained, & clean		
				56	_	Adequate ven	tilation & lighting, designated areas used		
pe of Operation:							License Posted:	A	N
scussion with Pe	rson-in-Charge:							â	-
	_	人					Follow-Up:	Y	
					_		Follow-Up Date:		
gnature of Persor						- Marian Sanaga	Date:		
gnature of Inspec	ctor: 7 h) 1/1-						Date: 1 / Ltd Land a		
	1/ /				_		Date: 3 / 17/1017		



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



2_ of _2	+12012 Page_	Date: 21		1 Din	LUC TE	t: Merrima	ablishmen	Est
	Achieved: 3/17-12022	Complian			nusey	18 DW High	lress: 69	Add
	10 11 14 120 2 Z	VS	RATURE OBSERVATION		- 4			
Ter	Item / Location	Temp.	Item / Location	Temp.		Item / Location		
		ACTIONS	AND/OR CORRECTIVE	OBSER				
Dated Correct		ion	Description of Violati			Section of Code	Item Number	v
or COS							TTGTTIDGT	\exists
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	ction.	time of ins	served during +	क गुर्भाव्याव	1			+
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



1 _										
Est	tablishment: 1	ortilla flats		Date:	7 141 1	2 Pa	age 1 of 2	No. of Risk Factor/Intervention V	/iolatic	ons 🗷
Ade	dress: 595 b	w Highway		Time i	TEL:R	Tir	ne outil 3c	No. of Repeat Risk Factor/Intervention V		
		der: Tortida Flat inc.			Catego			Total V		
	ail:		$\overline{}$	Phone	-	73)				
Insi	pection Type:	Routine Re-inspection Pre-or	l peratio						Red	
	7,000	FOODBORNE ILLNESS RE					nvestigation	Complaint Other		
		Circle designated compliance status (IN, OUT, I	N/A NC)) for es	ch item	UDLI				
		IN = in compliance OUT= not in compliance NO =						in appropriate box for COS and/or R		
C		The state of the s			TUPA - 1	iot app	olicable CO3 =	corrected on-site K = repeat violation		
Com	pliance Status	Supervision	COS	R	Co	mplia	nce Status		C	OS F
1	IN OUT	Person in charge present, demonstrates knowledge and			┧├─	F		Protection from Contamination		
		performs duties			15	_ 🗘	OUT N/A NO	Food separated and protected		
	(IN)OUT N/A	Certified Food Protection Manager			16	<u> (u</u>	A/N TUOLY	Food-contact surfaces cleaned and sanitized		
		Employee Health			17	7 IN	ON AND TUO I	Proper disposition or returned, previously served, reconditioned & unsafe food		
3	(I) OUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting						Time / Temperature Control for Safety		
4	CINOUT	Proper use of restriction and exclusion	+-		18	1 1	OUT N/A (10)	Proper cooking time and temperature		
5	(IN)OUT	Procedures for responding to vomiting and diarrheal events	1		19	-	OUT N/A NO	Proper reheating procedures for hot holding	+	
		Good Hygiene Practices			20		OUT N/A NO	Proper cooling time and temperatures	-	-+
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use	T		21		OUT N/A	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		DUT N/A NO	Proper date marking and disposition	\vdash	+
8	ON TUO	Hands clean & properly washed			24	IN	OUTNANO	Time as a Public Health Control: procedures and recor	ds	\top
9	UN OUT N/A NO	No bare hand contact with RTE food						Consumer Advisory		
10	(IN OUT	Adequate handwashing sinks properly supplied & accessible			25	ÜN	DUT N/A	Consumer advisory provided for raw/undercooked food	ls	
		Approved Source						Highly Susceptible Populations		
11 (IN OUT	Food obtained from an approved source			26		OUT N/A	Pasteurized foods used; prohibited foods not offered		
12	IN OUT N/A NO	Food received at proper temperature	 	4	_			d / Color Additives and Toxic Substances		
13	IN OUT N/A NO	Food in good condition, safe & unadulterated	—	\perp	27	-	OUT (VA)	Food additives: approved and properly used		
14		Req. records available: shell stock tags, parasite destruction		44	28	(V)	OUT N/A	Toxic substances properly identified, stored and used		
	Prevalent cont	are improper practices or procedures identified as the n tributing factors of foodborne illness or injury, Public Ha are control measures to prevent foodborne illness or in	nost		-		Co	nformance with Approved Procedures		
	Interventions a	are control measures to prevent foodborne illness or in	jury.	- 1	19	IN	OUT WA	Compliance with variance/specialized process/HACCP		
			OOD R							
B.1 1	W2.52 1 15	Good retail practices are preventative measures	to contr	ol the ad	dition of	pathogo	ens, chemicals, a	nd physical objects into foods.		
IVIATR	X In box it num	bered item is not in compliance Mark "X" on ap	propria	te box f	or COS	and/o	or COS =	corrected on-site during inspection R=repea	it violat	tion
omp	liance Status		cos	R	Com	pliane	ce Status		CO	SR
		Safe Food and Water				100		Proper Use of Utensils	- 00.	3 1
30		eggs used where required			43		In-use utensils	s properly stored		
31		from approved source	<u> </u>		44		Litensils, equip	oment & linens: properly stored, dried, & handled		
32	Variance ob	tained for specialized processing methods			45	_	Single-use/sin	gle-service articles: properly stored & used		
22 T	P	Food Temperature Control			46	Щ.	Gloves used p	properly		
33		ng methods used: adequate equipment for temp. control						Utensils, Equipment and Vending		
35		roperly cooked for hot holding			47	+	Food and non-	food contact surfaces cleanable,		
36		awing methods used ers provided and accurate			48	-	Property desig	ned, constructed, & used		
00	Themonete	Food Identification			49	<u></u>	Warewashing:	installed, maintained, & used: test strips		
37	Food properl	y labeled: original container		_	50	<u>. </u>	Lilet P. molel most	Physical Facilities		
		Prevention of Food Contamination			51	+-	1	er available adequate pressure	+	\dashv
38	Insects, rode	nts, & animals not present			52			illed, proper backflow devices		+
39	Contaminatio	и prevented during food preparation, storage & display			53	+		te water properly disposed properly constructed, supplied, & cleaned		
10	Personal clea				54			use properly disposed, facilities maintained	+	
11	Wiping cloths	s: properly used & stored			55	-		es installed, maintained, & clean	+	+
2	Washing fruit	s & vegetables			56			lation & lighting, designated areas used	+-	+
								- 13.41.31 444.311464 11.545 4864		
Гуре	of Operation:							License Posted:	(3)	N
Discu	ussion with Pers	son-in-Charge:						Follow-Up:	Y	
		Vantoz-	*	7	Af	+		, ,	•	3
		National COK	<u> </u>	V	7 4	7		Follow-Up Date:		
	ature of Person							Date:		
igna	ature of Inspect	or: /6/						Date: 9/15/16A9	7	$\overline{}$
		(_					Date: 3/17/202		



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



Establishment: Tertilla Flat	3		Date: 31	17-12022	Page <u>2</u> of <u>2</u>
Address: 595 Dw Highwa	7-	TEMPERATURE ATTENDED	Compliano	ce Achieved: 3/ LL	7/2022
Item / Location	Temp.	TEMPERATURE OBSERVAT	Temp.		
			1 emp.	Item / Locati	on Te
	OBS	SERVATIONS AND/OR CORRECTIV	VE ACTIONS		
Number Section of Code		Description of Vi			Dated Correct
					or COS
	אם ואופוני	1thus observed don	ing time of f	os centros	
			THE COT !	N Lettion 1.	
		<u>. </u>			
				<u> </u>	
				· ·	
- AN					
nature of Person in Charge:	etwas	N TO A TO		Date:	
nature of Inspector:	7:10	1			/ ? -
				Date. 3/	17-12022



HEALTH DIVISION 432 Daniel Webster Highway



Date: 3/16/2022

्राइडोबो <u>र</u>				(603	ack NI 3) 420-	1730)		1	THE CHILD	1	
Establishment	FOOD ES'	TABL						REPORT				
Establishment: ponkin s	onuts		Date	5/L	6/22	Pa	ge 1 of <u>Z</u>	No. of I	Risk Factor/Int	ervention Vid	olation	is Č
Address: Z Bowers La	nding		Time	e inți	0:30	Tin	ne out 1 100	No. of Repeat I	Risk Factor/Int	ervention Vid	lation	s c
Owner/Permit Holder: Michael	le peleon		Risk	Cat	legory	Ð				Total Vid	olation	s
Email:			Phor	ne:				Inspection Statu	s: Green	Yellow	Red	-
Inspection Type: Routine	Re-inspection Pre-o	peratio	onal		Illne	ess l	nvestigation	Complain	t Othe			_
	FOODBORNE ILLNESS RI	ISK FA	CTOR	SAI	ND PU				. 0110	'I		
	gnated compliance status (IN, OUT,	N/A, NO	D) for e	each	item		Mark "X"	in appropriate box	or COS and/or F	₹		
IN = in com	pliance OUT= not in compliance NO	= not of	oserve	d N/	A = no	t app	olicable COS =	corrected on-site R	= repeat violation	on .		
Compliance Status		COS					nce Status				CO	e I
Berron is share	Supervision							Protection from	Contaminatio	D .		9 [
performs duties	e present, demonstrates knowledge and				15	TR	ON A'N TUO	Food separated and	protected			\exists
2 IN OUT N/A Certified Food F	rotection Manager				16		OUT N/A	Food-contact surface	s cleaned and sar	itized	+	+
	nployee Health				17	IN	OUT (A)10	Proper disposition or reconditioned & unsa	returned, previous	ly served,	+	\dashv
3 Management/for knowledge, resp	od employees & conditional employee; consibilities and reporting			7				Time / Temperatur		fut		
. 196 1	striction and exclusion			7	18	IN	OUT N/A(NO)	Proper cooking time		acty		\neg
5 (IN)OUT Procedures for r	esponding to vorniting and diarrheal events	;			19	_	OUT N/A NO	Proper reheating pro		dina	+	\dashv
	Hygiene Practices				20	IN	OUT N/A NO	Proper cooling time a			+-	+
- 5	sting, drinking, or tobacco use			_	21	IN	OUT N/A NO	Proper hot holding te	mperatures			\top
	m eyes, nose, mouth	Щ.	_	4	22	-	OUT N/A NO	Proper cold holding to	emperatures			\top
8 NOUT NO Hands clean & pr	Contamination by Hands			-	23	-	OUT N/A NO	Proper date marking				
	openy washed		-	-	24	IN	OUT N/A NO	Time as a Public Hea		ures and records	,	
THE PER PROPERTY CONTRACTOR CONTR	ashing sinks properly supplied & accessible		-	-	25	Liki	OUT WAT	Consumer				
	proved Source	-		+	25	IN	OUT WA	Consumer advisory p				
11 NOUT Food obtained fro	m an approved source	<u> </u>	T	1	26	IN	OUT N/A	Highly Suscepti Pasteurized foods use				
	proper temperature			1				/ Color Additives				
	dition, safe & unadulterated				27	IN		Food additives: appro-				T
	lable: shell stock tags, parasite destruction				28			Toxic substances prop			_	+
Risk factors are improper pract Prevalent contributing factors of	tices or procedures identified as the i f foodborne illness or injury. Public H ures to prevent foodborne illness or in	most				_	Co	nformance with A	proved Proced	nres		
Interventions are control measi	res to prevent foodborne illness or in	njury.		Н	19	IN	OUT WA	Compliance with varia	nce/specialized pro	cess/HACCP		T
		GOOD F	RETAI	LP.	RACT	ICES	5				-	-
Goo Mark "X" in box if numbered item is no	d retail practices are preventative measure	s to contr	rol the a	dditio	on of pa	thoge						
	in compliance Mark "X" on a	ppropria	ite box	for	COS a	nd/o	r COS =	corrected on-site du	ring inspection	R=repeat	violatio	n
ompliance Status	31 1 No.	cos	R		Comp	llanc	e Status				cos	F
30 Pasteurized eggs used where re	ood and Water				40 7		1	Proper Use of	f Utensils			
31 Water & Ice from approved sour		+	\vdash		43			properly stored				\perp
32 Variance obtained for specialize		+		· -	45	_		oment & linens; propert gle-service articles; pro			 	+
Food Ter	uperature Control		-	ŀ	46		Gloves used p		perry stored & use			+
	dequate equipment for temp, control							Utensils, Equipme	nt and Vending			-
Plant food properly cooked for h					47 ·		Food and non-	food contact surfaces	deanable,			T
35 Approved thawing methods used 36 Thermometers provided and accompany		 	\square		48		Property design	ned, constructed, & us	ed			\vdash
	Identification		Щ	-	49		Warewashing:	installed, maintained,				
Food properly labeled: original o				- 1	50 T		11-40 11 4	Physical F				
	Food Contamination		-	\vdash	50	_		er available adequate p				L
Insects, rodents, & animals not p		T	\vdash	- 1-	52			lled, proper backflow d				-
Contamination prevented during	food preparation, storage & display		\square	-	53			properly constructed, s				-
O Personal cleanliness				r	54			se properly disposed,				_
1 Wiping doths; properly used & st	ored				55			s installed, maintained				
2 Washing fruits & vegetables					56			ation & lighting, design			-	
ype of Operation:						-			I dans -			
Discussion with Person-in-Charge:									License Poste	ed: (<u> </u>	N
									Follow-Up:	,	Y (1	Ñ)
									Follow-Up Da	te:		
ignature of Person in Charge: oignature of Inspector:	enthor lenen						•	-	Date:			\dashv
ignature of Inspector:	7/1/7											_
	76							<u>.</u> .	Date: 3/1	72055		



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



Addroom: -	nt: Dunkin Don			- 31	16/2022	1 -3	or <u></u>
Address. Z	Bowers Landi	2	Printed and Parks & Printed by the Control of the C	Compliand	e Achieved: 3/L	612022	
	Item / Location	Temp.	TEMPERATURE OBSERVAT	LONS			
		a conte	Item / Location	Temp.	· Item / Locut	ion	Ten
							-
		OBSI	ERVATIONS AND/OR CORRECTIV	Æ ACTIONS			
V Item Number	Section of Code		Description of Vid	olation			Correct
						or	rCOS
						j	
+					<u> </u>		
-							
		(७० ७१० व	etions observed durin	na time of in	spection.		
 							
							
 				<u> </u>			
	<u> </u>						
	mon in Charges A	The Car			Date:		
nature of Pe	ison in Charge: 1/2 /	A CONTRACTOR			Date.		



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



Est	ablishment:	rger king #2805	Date	7 1	122	Page	e 1 of _2_	No. of Risk Factor/Intervention Violations
Ado	iress: 2. Am k	rest Road	Time	int;	50	Time	ou 1 :00	No. of Repeat Risk Factor/Intervention Violations
		er Lortneast Foods U.S.	Risk	Cat	egory	C		Total Violations 3
Em		COUNTRAST TO COS U.C.	Phor		-0-7			Inspection Status: Green Yellow Red
		Revision Reinamenting Programme		10.	111	1		
inst	pection Type:	Routine Re-inspection Pre-operati		C 41			estigation	Complaint Other
		Circle designated compliance status (IN, OUT, N/A, N				DLIG		in appropriate box for COS and/or R
<u> </u>		IN = in compliance OUT= not in compliance NO = not of				Lapplie		
					- 110	appii	able CO3 -	•
Com	pliance Status	Eicina	SR		Соп	pliano	ce Status	COS R
	COUT	Supervision Person in charge present, demonstrates knowledge and		-	15	20	20172 1117 1172	Protection from Contamination
1		performs duties	-	_	15	1	OUT N/A NO	Food separated and protected
2	IN DUT N/A	Certified Food Protection Manager			16		DUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,
	160	Employee Health		4	17	INC	ON WIND	reconditioned & unsafe food
3	TUOUT	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	ON AIN TUC	Proper cooking time and temperature
5	UNDUT	Procedures for responding to vomiting and diarrheal events		_	19	IN C	DUT N/A(NO)	Proper reheating procedures for hot holding
		Good Hygiene Practices			20		DUT N/A (IO)	Proper cooling time and temperatures
6	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use	_		21	IN C	DUT N/A (O)	Proper hot holding temperatures
7	IN OUT NO	No discharge from eyes, nose, mouth			22		OUT N/A NO	Proper cold holding temperatures
		Preventing Contamination by Hands			23		OUT N/A NO	Proper date marking and disposition
8	NO TUCIN	Hands clean & properly washed			24		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		7	1 2 2			Consumer Advisory
10	IN DUT	Adequate handwashing sinks properly supplied & accessible		7	25	(IN)	OUT N/A	Consumer advisory provided for raw/undercooked foods
		Approved Source						Highly Susceptible Populations
11	(IN)OUT	Food obtained from an approved source			26	(IN)	OUT 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	INDUT	Food in good condition, safe & unadulterated			27	(IN)	DUT N/A	Food additives: approved and properly used
14	IN OUT N/A NO	Req. records available; shell stock tags, parasite destruction			28		DUT N/A	Toxic substances properly identified, stored and used
	Risk factors a	re improper practices or procedures identified as the most		7			Co	onformance with Approved Procedures
	Prevalent cont Interventions a	re improper practices or procedures identified as the most ributing factors of foodbome illness or injury. Public Health ire control measures to prevent foodborne illness or injury.		П	19	IN C	OUT (VA)	Compliance with variance/specialized process/HACCP
		· · · · · · · · · · · · · · · · · · ·	an itaria		I	4		
			RETA					
Mar	k "X" in boy if num	Good retail practices are preventative measures to co bered item is not in compliance Mark "X" on approp						and physical objects into todos. ≃corrected on-site during inspection R=repeat violation
INTEXT	K X III DOXII IIdiii	beled itell 15 not in compliance	nate be	/X 101	000	ariuroi	000	-corrected on-site during inspections - R-repeat violation
Comp	liance Status	co	S R	Ţ	Com	plianc	e Status	COS R
		Safe Food and Water		4	_			Proper Use of Utensils
30		eggs used where required	_	-	43	_	+	ils properly stored
31	-	from approved source	_	-	44	-	· · ·	uipment & linens; properly stored, dried, & handled
32	Variance ob	tained for specialized processing methods		-	45		_	ingle-service articles: properly stored & used
		Food Temperature Control		4	46	<u> </u>	Gloves used	
33		ng methods used: adequate equipment for temp, control		<u> </u>	<u> </u>	T	T	Utensils, Equipment and Vending
34		roperly cooked for hot holding	+	L	47 ·	X	-	n-food contact surfaces cleanable,
35		awing methods used	-	- -	48	1		igned, constructed, & used
36	Thermomete	rs provided and accurate		4	49		Warewashing	g: installed, maintained, & used: test strips
		Food Identification	1	-				Physical Facilities
37	Food proper	ly labeled: original container		-	50			ater available adequate pressure
		Prevention of Food Contamination		4	51			talled, proper backflow devices
38		nts, & animals not present	_	-	52			aste water properly disposed
39		on prevented during food preparation, storage & display	+	-	53			s properly constructed, supplied, & cleaned
40	Personal cle		+	-	54			fuse properly disposed, facilities maintained
41		s: properly used & stored			55			ities installed, maintained, & clean
42	Washing frui	ts & vegetables		U	56	74	Adequate ver	ntilation & lighting, designated areas used
Typ	e of Operation:					-		License Posted: (Y) N
	<u>'</u>	con in Charge:						
DISC	cussion with Per	sor-in-Charge.						
		// //						Follow-Up Date:
Sian	ature of Person	in Charge: 9 - H7						Date:
		10 6431-20						
olgr	nature of Inspect	~ / ~ / / / / / / / / / / / / / / / / /						Date: 3/ 14 (202 Z
		C						



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



	ent: Burger K		05		Date: 3/	14/2022	Page 2	of <u></u>
Address:	2 Amnerst	rood			Compliano	ce Achieved:		
	- 17			TEMPERATURE OBSERVAT	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Item / Location		Temp.	Item / Location	Temp.	Item / Locat	tion	Ten
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			On	CHEST ACTIONS AND ION CONTROL				
, Item			U	SERVATIONS AND/OR CORRECT				1.00
Number	Section of Code			Description of \	/iolation			d Correcte or COS
		kitchen:	7					
56	4 = SAL 1/A		LECULE	engined total and	135500 10 / 10 / 10 1			
30	6 3-1.1-1			empired, last sel	VICE 12/19/21	· CONTEST (ompares_	
		for serv						
411	4-601-11(6)	7 Broller	- Tay	of proiler unit an	d top vents	حوالعط سا	tn	
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42	A-602.13			- accomutation a	f grease on	exterior !	Discup.	
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nature of P	erson in Charge:	163/2 /	1/2			Date:		
nature of li	nspector:		3 (Date: 2	3/14/Z0Z	7.7
			- The same of the				11 may 1 2 7 6	



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



Establishment: Marcs Pizza and subs		Date	3/14	0/22	Page 1 of Z	No. of Risk Factor/Intervention Violations	1
Address: 404 Milford Road		Time	ind l	l'oe	Time out 2.00		
Owner/Permit Holder: Marc Joseph Benedetti		Risk (Total Violations	-
Email:		Phone				Inspection Status: Green Yellow Red	2
Inspection Type: Routine Re-inspection Pre-or	peration			lilne	ss Investigation		
FOODBORNE ILLNESS RE			AN			Complaint Other	
Circle designated compliance status (IN, OUT,						in appropriate box for COS and/or R	
IN ≈ in compliance OUT= not in compliance NO							
Compliance Status		. ,	_	7-			
Supervision	cos	R	┨	Com	pliance Status	Protection from Contamination	
1 Person in charge present, demonstrates knowledge and		Ţ	1	15	N DUT N/A NO	Food separated and protected	
2 INOUT N/A Certified Food Protection Manager	+-	-	a		IN OUT N/A		+
Employee Health			14	17	IN OUT NA NO	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,	+
3 IN OUT Management/food employees & conditional employee;		1	-			reconditioned & unsafe food	_
knowledge, responsibilities and reporting		-	1	<u> </u>	1	Fime / Temperature Control for Safety	
Proper use of restriction and exclusion Procedures for responding to vomiting and diarrheal events	-	+	-	18	IN OUT N/A NO	Proper cooking time and temperature	_
Good Hygiene Practices			1	19	IN OUT N/A NO	Proper reheating procedures for hot holding	+-
6 IN OUT NO Proper eating, tasting, drinking, or tobacco use	Τ.	1	1	21	IN OUT N/A NO	Proper cooling time and temperatures Proper hot holding temperatures	-
7 IN OUT (O) No discharge from eyes, nose, mouth			1 1	22	IN DUT N/A NO	Proper cold holding temperatures	+
Preventing Contamination by Hands				23	DOUT N/A NO	Proper date marking and disposition	+
8 NoUT NO Hands dean & properly washed		T		24	IN OUT N/A NO	Time as a Public Health Control: procedures and records	+-
9 (INDUT N/A NO No bare hand contact with RTE food				1.5		Consumer Advisory	
10 NOUT Adequate handwashing sinks properly supplied & accessible				25	IN DUT N/A	Consumer advisory provided for raw/undercooked foods	
Approved Source 11 (TN OUT Food obtained from an approved source		<u> </u>				Highly Susceptible Populations	
12 IN OUT N/ANO Food received at proper temperature	-	-		26	(IN)OUT N/A	Pasteurized foods used; prohibited foods not offered	\perp
13 NOUT Food in good condition, safe & unadulterated	+	-		27	IN OUT N/A	d / Color Additives and Toxic Substances Food additives: approved and properly used	_
14 IN OUTNIA IO Req. records available; shell stock tags, parasite destruction	+	\vdash		28 4	I) OUT N/A	Toxic substances properly Identified, stored and used	+
	most					nformance with Approved Procedures	-
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	ealth niury.		j	19	IN OUT (N/A)	Compliance with variance/specialized process/HACCP	T
	GOOD R	ETAL	. <u> </u>			The state of the s	_
Good retail practices are preventative measure						nd physical objects into foods.	
Mark "X" in box if numbered item is not in compliance Mark "X" on a						corrected on-site during inspection R=repeat violation	n
ompliance Status	cos	R	I	Comp	liance Status	cos	R
Safe Food and Water						Proper Use of Utensils	- 17
30 Pasteurized eggs used where required			-	43		s properly stored	
31 Water & Ice from approved source 32 Variance obtained for specialized processing methods			-	44		pment & linens: properly stored, dried, & handled	
32 Variance obtained for specialized processing methods Food Temperature Control	<u></u>	Щ	-	45 46		ngle-service articles: properly stored & used	Ш
33 Proper cooling methods used: adequate equipment for temp, control		$\overline{}$	\perp	40	Gloves used p	Utensils, Equipment and Vending	
34 Plant food properly cooked for hot holding			h	47 -		-food contact surfaces cleanable,	
35 Approved thawing methods used				48		ned, constructed, & used	\vdash
36 Thermometers provided and accurate				49	Warewashing:	installed, maintained, & used: test strips	
Food Identification			-			Physical Facilities	
Food properly labeled: original container			- 1-	50		ter available adequate pressure	
Prevention of Food Contamination 38 Insects, rodents, & animals not present	Г		_	51		alled, proper backflow devices	Ш
39 Contamination prevented during food preparation, storage & display		-	\vdash	52		ste water properly disposed properly constructed, supplied, & cleaned	H
40 Personal cleanliness			-	54		use properly disposed, facilities maintained	
41 Wiping cloths: properly used & stored		\neg	-	55		es installed, maintained, & clean	
42 Washing fruits & vegetables			_	56		ilation & lighting, designated areas used	
Type of Operation:			-				
						License Posted: (Y)	N
Discussion with Person-in-Charge:						Follow-Up:	N
(\ Luly \ \ 200/m)						Follow-Up Date:	
Signature of Person in Charge:							
						Date:	
Signature of Inspector:						Date: 3/10/2022	\dashv



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



Address: 1404 Milford 2000 TEMPERATURE OBSERVATIONS Item/Location Temp. Rem/Location Rem/Location Rem/Location OBSERVATIONS AND/OR CORRECTIVE ACTIONS Description of Violation Whether: C 55 6-501.12 exhaust fans (colling) above cookithe soiled with green of depits. Clean depits. Clean of food debits. Clean and sanitive.	
Item/Location Temp. Item/Location Temp. Item/Location OBSERVATIONS AND/OR CORRECTIVE ACTIONS V Item Number Section of Code Description of Violation Litem Number Section of Code Colors above Cookline Soiled with areas / deprise Clean.	
OBSERVATIONS AND/OR CORRECTIVE ACTIONS V Item Number Section of Code Description of Violation C 55 L-Sal. 12 - expansit fams (colling) above cookline soiled with greex / debris clean: A toldish Theat slicer: exterion backside soiled with accomplation	
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V ltem Number Section of Code Description of Violation C 55 6-501. 12 - exhaust fans (citing) above cookline soiled with greex / deprise clean.	
V ltem Number Section of Code Description of Violation C 55 6-561. 12 - exhaust fans (coiling) above cookline soiled with greex / deprise clean.	
V ltem Number Section of Code Description of Violation C 55 6-501. 12 - exhaust fans (citing) above cookline soiled with greex / deprise clean.	
V ltem Number Section of Code Description of Violation C 55 6-501. 12 - exhaust fans (citing) above cookline soiled with greex / deprise clean. Of the Aboldish - Meet slicer: exkripin backside spiled with accompation	
V ltem Number Section of Code Description of Violation C 55 6-501. 12 - exhaust fans (citing) above cookline soiled with greex / deprise clean. Of the Aboldish - Meet slicer: exkripin backside spiled with accompation	
Number Section of Code Number Description of Violation	
c 55 6-501. 12 - exhaust fans (coiling) above cookline soiled with green / depris. clean. PF 14 4-60/11(4) - Meat slicer: exterior backside soiled with accomplation	Dated Corrected
c 55 6-501. 12 - exhaust fans (coiling) above cookline soiled with green / depris. clean. PF 14 4-60/11(4) - Meat slicer: exterior backside soiled with accomplation	or COS
PF 14 4-60/11/4) - Meat slicer: exterior backside soiled with accomplation	
PF 14 4-60/11/4) - Meat slicer: exterior backside soiled with accomplation	
PF 14 4-60/11/4) - Mest slicer: exterior backside soiled with accomplation	
of food debris. Clean and southire.	
of rood debris, clean and sanifize.	
ignature of Person in Charge: 11116	
Date.	
ignature of Inspector: Date: 3/10/202	



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



Establishment: DUNKIN DONUTS	1	Date 3	7 и	1127	Page 1 of Z	No. of I	Risk Factor/Intervention Vi		20 9
Address:514 Pw Hanney					Time out		Risk Factor/Intervention Vi		
Owner/Permit Holder: Merrimack Ponuts Inc.	-	Risk C				- to: or topour	Total Vi		
Email:		Phone		, g U , y .	ب	Inconcion Cial			1s 1
Inspection Type: Routine Re-inspection Pre-op				111		Inspection Statu		Red	
FOODBORNE ILLNESS RIS	eration		A BI		ss Investigation	Complain	t Other		
Circle designated compliance status (IN, OUT, N	I/A. NO	fores	ich i	tom		in appropriate box	ins COD and/or D		
IN = in compliance OUT= not in compliance NO =									
Compliance Status			1412			corrected or site in	- repeat violation		_
Supervision	cos	R	1	Com	pliance Status	Property Co.	- C	CC	DS I
1 Person in charge present, demonstrates knowledge and		T	1	15	DOUT N/A NO	1	n Contamination		
performs duties 2 INOUT N/A Certified Food Protection Manager	+	+-		16	INOUTNIA	Food separated and	<u> </u>	+	
Employee Health			۳	17	IN OUT NAMO		es cleaned and sanitized returned, previously served,	+	+
3 INOUT Management/food employees & conditional employee;		_				reconditioned & unsa	ife food		
knowledge, responsibilities and reporting	-	-			1	Time / Temperatu	e Control for Safety		
Proper use of restriction and exclusion INOUT Procedures for responding to vomiting and diarrheal events	-	+-		18	IN OUT N/A NO	Proper cooking time		_ _	
Good Hygiene Practices				19	IN OUT N/A(NO)		cedures for hot holding	-	\perp
6 IN OUT Proper eating, tasting, drinking, or tobacco use	T			21	IN OUT NA NO	Proper cooling time : Proper hot holding te		-	-
7 IN OUT NO No discharge from eyes, nose, mouth	1			22	IN OUT N/A NO	Proper cold holding to		+	-
Preventing Contamination by Hands				23	IN OUT N/A NO	Proper date marking		-	-
8 INOUT NO Hands clean & properly washed	T			24	IN OUT NA NO		lith Control: procedures and record	3	+
9 No bare hand contact with RTE food				1.4		Consumer			_
10 IN OUT Adequate handwashing sinks properly supplied & accessible				25	IN OUT N/A	Consumer advisory p	rovided for raw/undercooked foods		
Approved Source 11 NOUT Food obtained from an approved source	1		-			Highly Suscepti	ble Populations		
11 IN OUT Food obtained from an approved source 12 IN OUT N/A NO Food received at proper temperature	-		-	26	OUT N/A		ed; prohibited foods not offered		
13 INDUT Food in good condition, safe & unadulterated		\vdash	-	27	ID OUT N/A		and Toxic Substances		
14 IN OUT N/ANO Req. records available: shell stock tags, parasite destruction	†		ŀ	28	ID OUT N/A		ved and properly used	+	+
Risk factors are improper practices or procedures identified as the m	nost		ı	-			pproved Procedures		
Risk factors are improper practices or procedures identified as the mean Prevalent contributing factors of foodborne illness or injury. Public He Interventions are control measures to prevent foodborne illness or injury.	ealth jury.	- 1	Ī	19	IN OUT (A)		nce/specialized process/HACCP	T	T
	OOD RI	ETAII	<u> </u>	RACTI			Trough State 2 process (FOO)		
Good retail practices are preventative measures						nd physical objects int	o foods.		
Mark "X" in box if numbered item is not in compliance Mark "X" on ap						corrected on-site d		violati	on
ompliance Status	cos	R	IC	ompl	lance Status			cos	R
Safe Food and Water						Proper Use	of Utensils	1000	- 10
30 Pasteurized eggs used where required 31 Water & Ice from approved source			\vdash	43		s properly stored			
31 Water & Ice from approved source 32 Variance obtained for specialized processing methods		_	-	44			ly stored, dried, & handled		\perp
Food Temperature Control		\dashv	\vdash	45 46	·	ngle-service articles; pr	operly stored & used	-	44
Proper cooling methods used: adequate equipment for temp. control	Т		-	40	Gloves used p	Utensils, Equipme	est and Vanding		
Plant food properly cooked for hot holding			 -	47 ·		-food contact surfaces		Т	77
Approved thawing methods used				48		ned, constructed, & us		 	+
Thermometers provided and accurate				49	Warewashing:	installed, maintained,	& used: test strips		
Food Identification Food properly labeled; original container			-			Physical F	acilities		
Food properly labeled: original container Prevention of Food Contamination		\dashv		50		ter available adequate			1
Insects, rodents, & animals not present	T		- I	51		alled, proper backflow		-	
Contamination prevented during food preparation, storage & display	+		- 1-	53		properly constructed,		-	+
Personal cleanliness		\neg	-	54	1	use properly disposed.		-	+
Wiping doths: property used & stored			5	55	Physical faciliti	es installed, maintaine	d, & clean	_	+-
Washing fruits & vegetables			5	56	Adequate vent	ilation & lighting, desig	nated areas used		
Type of Operation:			_	:				2	
Discussion with Person-in-Charge:							License Posted:	<u>y</u>)	N
Processor with Felson-in-Charge;							Follow-Up; (Y	N
			ı				Follow-Up Date:		
signature of Person in Charge:	~ /								
	Y 1/0	do	P				Date:		- 1
Signature of Inspector:	2Va	rol					Date: 3/14/202		\dashv



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



Establishment: punkin ponuts						Date: 3/14/22 Page 2 of Z				
						ance Achieved: 3	114/22			
	Item / Location		Temp.		DNS					
	ARTINI PROCESSION		remp.	Item / Location	Temp.	· Item / Lo	eation	Ter		
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			L	OBSERVATIONS AND/OR CORRECTIVE	E ACTIONS					
V Item	Section of Code	T					Date	ed Correct		
Number	000000000			Description of Viol	ation			or COS		
		Kitchen:		<u>.</u>			İ			
F 16	4-601.119	1 inter 10	r cr	lute and backside o	f flanos	T/0 2/0/4-50	0 (0)			
		ustin	w//D	mulation of debris.		TOC THE CONTRACTOR	2.50100			
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nature of Pe	rson in Charge;		-	R Valade		Data				
nature of In		The same	100	L VOLADE		Date:				
,	эросіої.					Date: 2	14/2027	,		



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



Address 340 OW History Commerce and Commerce	Address: Sign DW Nichtwood Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Trine fit; Sp Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. of Repeat Risk Factorinine Novice Time out; 2.50 No. o	Establishment: Thirsty Hoose Taphoose					Date:3/9(12 Page 1 of No. of Risk Factor/Intervention Violations					SCA		
Omerifemate Holder Final: Inspection Type: Routine Resimpsocion Pro-operational Illness Investigation Complaint Froodbook Nature Pro-operational Illness Investigation Complaint Colled delegishated complaines status (N. ULT, NA, NA) PUBLIC HEALTH INTERVENTIONS AND PUBLIC HEALTH INTERVENTIONS Mark 7': In apportate box for COS and/or R N = in complaince OUT+ not in complaince NO = not observed NA = not applicable COS = consisted on after R = repeat violation Supervision Supervision COS R OUT Pro-operational Complaint Complaint Nature Pro-operational Illness Investigation Nature Pro-operational Intervention Int	Comparison Control Comparison Compar	Address: 360 DW Highway								ervention Vi	olation	s 0		
Email: Phone: Inspection Type: Routine Re-inspection Pre-operational Illness investigation Complaint Other	Email: Prome: P	Common/Domesta Notation										-	1 1	
Repellion Type: Routine Re-inspection Pre-operational Illness Investigation Complaint Other	Re-pinglection Type: Rouline Re-impection Pre-operational Illness Investigation Compilated Other													
POODDERNE ILLNISS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS Circle designated compliance status (N, OUT, MN, NO) for each inem Me in compliance OUT-in circle rosportance No are not applicable COS a control on a final R in promptate bork or COS and/or R Sepervision Sepervision COS R OUT Person in sharp oscered, demonstrate knowledge and particular properties on a final properties of the property p	Citate designated conciliance status (N, OLT, NA), NO for each tiem													
Circle designated compliance status (IN, OUT, NA), NO) for each item IN = in compliance OUT* not in compliance No out to served NA = not spitisable COS = corrected on-site R = rapeat violation Supervision COS R COS R Supervision COS R Percent in charge percentage browledge and percentage browledge and percentage of the service of	Chele designated compliance Status Nel - in compliance OUT= not in compliance NO - not browned NN = not applicable COS = contected on after R = repeat violation Compliance Status Supervision Person in designation of the compliance of the comp								_	,	Othe	51		
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COS R Supervision Freedom Authority	Compliance Status Seprendicion							t appli	cable COS =	corrected on-site R	= repeat violati	on .		
Supervision Protection from Contamination Protection from Co	Supervision Protection from Contamination Protection fro	Complia	nce Status										loo	0 0
Proper use of residence in the property in t	Properties designed and protected for Protection Managers			Supervision	_[000		COM	pilani	ce Status	Protection from	Contaminatio)D		o K
In DUT NA Carried Pool Protection Manager Employee Employe	This purpose is a continued from the received in Manager	1	ОИТ				15	TINK	OUT N/A NO					T
Employee Health To NOUT No Description of the proper singuisition or returned, previously served, reconsistence for description or returned, previously served, reconsistence and feed of the proper search or returned, previously served, reconsistence for returned, previously served, reconsistence for returned, previously served, reconsistence for returned, previously served, and substitution of the proper sealing served and substitution of the proper sealing served from the seasons of the proper sealing procedures for returned, previously served, and the previously served and seasons of the proper sealing special served from the proper sealing special seasons of the proper sealing seasons of the proper sealing seasons of the proper seasons of the p	Employee (Establish of Dour Johnson personance and reporting of employee). 1	2 IN	N/A TUQ V		-	+	16		OUT N/A			nitized	+	
DUT Norgamentation employees a conditional employees Trans / Transpartative Control for Safety	Source Managementation employees conditional employees controlled and appearance of restriction and exclusion Society			Employee Health				-		Proper disposition or r	eturned, previous		+	
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Simple Proper eating, tasting, drinking, or tobacco use 20 NOUT NANDO Proper eating, tasting, drinking, or tobacco use 20 NOUT NANDO Proper locating the and temperatures 20 NOUT NANDO Proper locating the and temperatures 20 NOUT NANDO Proper locating the and temperatures 20 NOUT NANDO Proper dating the marking and disposition 20 NOUT NANDO Proper date marking and disposition 20 NOUT NANDO	Cond Hygiene Fractices 7 N OUT (c) Proper celling, lasting, arising, or tobacco use 8 (b)OUT No. declarage from year, noze, mouth Preventing Centamization by Hands 8 (b)OUT No. No. Inchess hard centact with RTE food 10 (b)OUT No. No. No. Inchess hard centact with RTE food 11 (b)OUT No.	-			-	+							\perp	
NOUT (NO) Proper asing, taising, utiling, utiling, or tobacco use	NOUT NOUT NOUT NO Proper early stating, withing, or robacco use	- 10:					_					iding	-	\dashv
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



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				TEMPERATURE OBSERVA	TIONS		
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			OBSE	RVATIONS AND/OR CORRECT	TIVE ACTIONS		
V	Item	Section of Code		Description of	Violation	····	Dated Corrected
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l Sie-r	oturo of D	oman in Charles	M			Data: 3	10/2022
		erson in Charge	0//	<u> </u>		Date:	19/2022
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