

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



Esta	Stablishment: Sweet 2 9 More			Date:[0]3/23		Page 1 of _2_	No. of Risk Factor/Intervention Violations			
Add	iress: 00 pr	emilia potet Rivd.	Ti	me ir	Ge;	Time out	No. of Repeat Risk Factor/Intervention Violations			
Owi	ner/Permit Hold	enium outlet Blud.	Ri	isk Cate	egory:	F	Tot	al Violations	\$ 10	
Em		STEVNER 1. JULIANI	PI	hone:			Inspection Status Green Yellow	v Red		
_	pection Type:	Routine Re-inspection Pre-opera	ationa	al	Illnes	s Investigation	Complaint Other			
inot	7,70	FOODBORNE ILLNESS RISK I							000	
		Circle designated compliance status (IN, OUT, N/A,	, NO) f	for each	item	Mark "X	" in appropriate box for COS and/or R			
		IN = in compliance OUT= not in compliance NO = no	ot obse	erved N/A	A = not	applicable COS	= corrected on-site R = repeat violation			
Com	pliance Status		cos	R	Com	pliance Status		co	SR	
COIII	phance otatus	Supervision		Q d			Protection from Contamination			
1	TUDOUT	Person in charge present, demonstrates knowledge and performs duties			15	ON AN TUO	Food separated and protected			
2	IN OUT WA	Certified Food Protection Manager			16	IN DUT N/A	Food-contact surfaces cleaned and sanitized			
250		Employee Health	A .	121	17	IN OUT NO NO	Proper disposition or returned, previously served reconditioned & unsafe food	,		
3 (Тироит	Management/food employees & conditional employee;					Time / Temperature Control for Safety		E DIV	
	TUOUT	knowledge, responsibilities and reporting Proper use of restriction and exclusion			18	IN OU (N/ANO	Proper cooking time and temperature		-	
5	7N DUT	Procedures for responding to vomiting and diarrheal events			19	IN OUT N/A NO	Proper reheating procedures for hot holding			
	2	The second secon	25		20	IN OU NA NO	Proper cooling time and temperatures			
6	тио и	Proper eating, tasting, drinking, or tobacco use			21	IN OUT N/A NO	Proper hot holding temperatures			
7	IN OUT	No discharge from eyes, nose, mouth			22	OUT N/A NO	Proper cold holding temperatures			
		Preventing Contamination by Hands			23	ON AN TUOM	Proper date marking and disposition			
8	CINOUT NO	Hands dean & properly washed			24	IN OUT NAMO	Time as a Public Health Control: procedures and	records		
9	NOUT N/A NO	No bare hand contact with RTE food					Consumer Advisory			
10	™ DUT	Adequate handwashing sinks properly supplied & accessible			25	IN OUT	Consumer advisory provided for raw/undercooke	d foods		
		Approved Source			-00	I IN OUT W	Highly Susceptible Populations Pasteurized foods used; prohibited foods not offer	arod .		
11/		Food obtained from an approved source			26	IN OUT 65	ood / Color Additives and Toxic Substances		-	
12	IN OUT N/ NO	Food received at proper temperature Food in good condition, safe & unadulterated			27	IN OUT (N/A)	Food additives: approved and properly used			
13	IN OUT N/ANO	Reg. records available: shell stock tags, parasite destruction			28	NOUT N/A	Toxic substances properly identified, stored and	used		
14			et .				Conformance with Approved Procedures			
	Prevalent con Interventions	are improper practices or procedures identified as the mos tributing factors of foodborne illness or injury. Public Heal are control measures to prevent foodborne illness or injur	ith ry.		19	IN OUT	Compliance with variance/specialized process/HA	ACCP		
				ETAIL I	PRACT	TICES		Marketon.	1000	
A.		Good retail practices are preventative measures to					s, and physical objects into foods.			
Mar	k "X" in box if nun	nbered item is not in compliance Mark "X" on appr	ropriate	e box for	COS	and/or COS	B =corrected on-site during inspection R=	repeat violat	ion	
Comi	pliance Status	lc	cos	R	Comp	oliance Status		cos	S R	
	in the state of	Safe Food and Water	J. W.	122			Proper Use of Utensils	W-1977		
30	Pasteurized	d eggs used where required			43	In-use uter	nsils properly stored			
31	Water & Ice	e from approved source			44		quipment & linens: properly stored, dried, & handled			
32	Variance of	otained for specialized processing methods			45		/single-service articles; properly stored & used			
1.6		Food Temperature Control			46	Gloves use	ed properly		- 47	
33		ling methods used: adequate equipment for temp. control			47	I Food and	Utensils, Equipment and Vending		\exists	
34		properly cooked for hot holding			48		esigned, constructed, & used		-	
35 36		hawing methods used ters provided and accurate			49		ing: installed, maintained, & used: test strips		+	
30	THEIRIOITE	Food Identification	i en		Tian I		Physical Facilities	G. S. Prince		
37	Food prope	rly labeled; original container			50	Hot & cold	water available adequate pressure			
	xunda di Uva	Prevention of Food Contamination	38		51	Plumbing i	nstalled, proper backflow devices			
38	Insects, rod	lents, & animals not present			52	Sewage &	waste water properly disposed			
39	Contaminat	tion prevented during food preparation, storage & display			53	Toilet facili	ties properly constructed, supplied, & cleaned			
40	Personal de	eanliness			54	Garbage &	refuse properly disposed, facilities maintained		\perp	
41	Wiping clott	ns: properly used & stored			55	-	cílities installed, maintained, & clean		\dashv	
42	Washing fru	uits & vegetables	.,:		56	Adequate	ventilation & lighting, designated areas used	, r- , m	Anti-	
Tur	e of Operation:		240		•		License Posted:	(Y)	N	
							Follow-Up:		N	
Dis	scussion with Person-in-Charge:							ī	14	
							Follow-Up Date:			
Sigi	nature of Person	n in Charge:	2				Date:			
Sia	nature of Inspec	etor: Sie 5//					Date: LO - XL	1027	3	



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



Establishment: Sweetz & Bo	re		Date: 10-	31-2023	Page 7	
Address: 80 premium out	riet Blud	•	Complianc	e Achieved: Lo.	31-2027	
55 (15740712 60		TEMPERATURE OBSERVATIONS				
Item / Location	Temp.	Item / Location	Техпр.	Item / Loca	tion	Temp.
	OBSI	ERVATIONS AND/OR CORRECTIVE A	CTIONS			
V Item Section of Code		Description of Violation				Сопестед
Number Section of Section		Decirpuoti of Viciality			or	cos
				Y		
N	o yillatio	ons observed durin	inspec	tron		
			J			
Signature of Person in Charge:	11000 111			Date:		
				Date.		



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



Esta	ablishment: He	rrimack HOP	1	Data Page 1 of 2			No. of Risk Factor/Intervention Violations			
	ress: 563 p	w Highway	-	Time in	2 60	Time out: 60	No. of Repeat Risk Factor/Intervention Violation	ons Ø		
	ner/Permit Hold			Risk Ca	tegory	-	Total Violation	ons Ø		
Ema		podde see (1	Phone:			Inspection Status: Yellow Rec	d		
<u> </u>	ection Type:	Routine Re-inspection Pre-ope			llnes	s Investigation	Complaint Other			
11121	ection Type.	FOODBORNE ILLNESS RISK						lime y =		
1,00		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								
	K TALEE	in a macompliance de l'incent dempliance it de		2 (0)				COS R		
Com	pliance Status	Supervision	cos	R	Comp	pliance Status	Protection from Contamination	203 K		
-1	\cap	Supervision Person in charge present, demonstrates knowledge and	T	T	157	OUT N/A NO	Food separated and protected			
1	I) OUT	performs duties	_	-		1				
2	IN OUT N/A	Certified Food Protection Manager	<u></u>	_	16	(IN)OUT N/A	Proper disposition or returned, previously served,			
		Employee Health			17	IN OUT (VA) 10	reconditioned & unsafe food			
37	IN OUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting			11111		Time / Temperature Control for Safety			
4	TNOUT	Proper use of restriction and exclusion			18	IN OUT NAME	Proper cooking time and temperature			
5	THOUT	Procedures for responding to vomiting and diarrheal events			19	IN OUT N/A	Proper reheating procedures for hot holding			
115	\cup	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		- 11	23	ON A/N TU	Proper date marking and disposition			
8	IN OUT	Hands clean & properly washed			24	IN OUT NO	Time as a Public Health Control: procedures and records			
9	IN OUT NAME	No bare hand contact with RTE food					Consumer Advisory			
10	TUOUT	Adequate handwashing sinks properly supplied & accessible			25	OUT N/A	Consumer advisory provided for raw/undercooked foods			
	0	Approved Source			(H 1		Highly Susceptible Populations			
11	THOUT	Food obtained from an approved source	_	\perp	26	IN OUT	Pasteurized foods used; prohibited foods not offered			
12	TN OUT N/A(NO)	Food received at proper temperature	_	+			ood / Color Additives and Toxic Substances			
13	TUQUT	Food in good condition, safe & unadulterated		+	27	IN OUT (IA)	Food additives: approved and properly used			
14	IN OUT N/ANO	Req. records available: shell stock tags, parasite destruction	_	1	28	INOUT N/A	Toxic substances properly identified, stored and used	122 123		
	Risk factors a	ire improper practices or procedures identified as the mo tributing factors of foodbome illness or injury. Public He are control measures to prevent foodborne illness or inju	ost alth	- 1			Conformance with Approved Procedures			
	Interventions	are control measures to prevent foodborne illness or inju	ury.		19	IN OUT (I/A)	Compliance with variance/specialized process/HACCP			
					L PRACE					
		Good retail practices are preventative measures						. F. di .		
Mar	k "X" in box if num	nbered item is not in compliance Mark "X" on app	propri	ate box f	or COS a	and/or CO	S =corrected on-site during inspection R=repeat vic	Jiation		
om	pliance Status		cos	R	Comp	liance Status		COS R		
(ID)	HANGER OF THE	Safe Food and Water					Proper Use of Utensils	-		
30	Pasteurized	d eggs used where required		\perp	43		nsils properly stored			
31	Water & Ice	from approved source		44	44		quipment & linens: properly stored, dried, & handled			
32		plained for specialized processing methods	L.,		45		/single-service articles: properly stored & used			
1		Food Temperature Control		-	46	1	ed properly			
33		ing methods used: adequate equipment for temp. control	_	+	100	1	Utensils, Equipment and Vending			
34	-	properly cooked for hot holding	-	+-	47		non-food contact surfaces cleanable, esigned, constructed, & used			
35		nawing methods used	-	+-	48		ing: installed, maintained, & used: test strips			
36		ers provided and accurate	-	100	43		Physical Facilities	to a think att.		
27	Ford more	Food Identification rly labeled: original container			50		water available adequate pressure			
37	Food prope	Prevention of Food Contamination	III S	183	51		installed, proper backflow devices			
20	I Inserts rad	lents, & animals not present	Г		52		waste water properly disposed			
38		ion prevented during food preparation, storage & display		+1	53		ties properly constructed, supplied, & cleaned			
40	Personal cle				54		refuse properly disposed, facilities maintained			
41		hs; properly used & stored			55		cilities installed, maintained, & clean			
42		uits & vegetables			56	Adequate	ventilation & lighting, designated areas used			
			347		e we had		Lie-sea Destado	YN		
Тур	e of Operation:							-		
Dis	cussion with Pe	rson-in-Charge:					Follow-Up:	Y (N)		
							Follow-Up Date:			
_							Date:			
Sig	nature of Persor	n in Charge: Sec								
Sig	nature of Inspec						Date: 16-30-60	25		



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



Establishment: Herrimack HOP							30.202	2	Page Z	_of <u>z</u>	
Ad	dress: 5	3 Dw 41	ام ارس سا			Compliance Achieved: [0-80-207					
1100					RE OBSERVATIONS			/ Location			
-		Item / Location	Temp.	Item / L	ocation	Temp.	Item .	Location		Temp.	
										-	
						1				7	
				 						1	
11 22 3	esquist.			OBSERVATIONS AND/	OR CORRECTIVE AC	TIONS					
	Item	STALL HERO TO THE							Date	d Corrected	
V	Number	Section of Code			Description of Violation					or COS	
	-										
			No vie	dations ob	served do	ring tin	ne of i	nepe	chan		
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		1									
Sigr	nature of P	erson in Charge:	Silve Co	uc-			Dat	te:			
	nature of Ir		6/				Dat	te:(D •	30-20	7.3	
5			111								



HEALTH DIVISION

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



Establishment: Just wright by well i					Date lolla 2 age 1 of Z			No. of Risk Factor/Intervention Violations			
		The second second	11 Road	Tin	ne inlo: 5 o	Tin	ne outili.	No. of Repeat Risk Factor/Intervention Violations			
Owner/Perm			ight by kelli	Ris	k Category	Н				Total \	/iolations 💋
Email:		JUST COP	1947 07 600.	Pho	one:			Inspection Status	Green	Yellow	Red
	r	Pautino	Re-inspection Pre-oper			200	nvestigation	Complaint	Oth	er	
Inspection T	rype.	(Routine)	FOODBORNE ILLNESS RISK								Slosenia is
		Circle design	nated compliance status (IN, OUT, N/A			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		in appropriate box fo	r COS and/or	R	
			iance OUT= not in compliance NO = no			nt ani					
		IN = III COMPI	South Sile Bulgary a Bulgiter and Colored								loop I n
Compliance S	Status			cos	R Con	nplia	ince Status	Protection from	Contaminati	on	COS R
_			upervision present, demonstrates knowledge and		15	7	NOUT N/A NO	Food separated and p			
1 UN OUT	-	performs duties				1	/	Food-contact surfaces		anitime of	
2 IN OUT	NY)	Certified Food Pro	tection Manager		16	-	OUT N/A	Proper disposition or r			
5 11 11 11 11 11			ployee Health		17		ON AVO TUO N	reconditioned & unsaf	e food		
3 (II) OUT			employees & conditional employee; nsibilities and reporting			1,2		Time / Temperature	Control for	Safety	
4 N OUT			riction and exclusion		18		N OUT N/A	Proper cooking time a			
5 IN OUT		Procedures for re-	sponding to vomiting and diarrheal events		19	_	N OUT N/A (O)	Proper reheating proc			
		Good I	lygiene Practices		20	_	N OUT N/A(NO)	Proper cooling time at			
6 IN OUT	(NO		ting, drinking, or tobacco use		21	-	N OUT N/ANO	Proper hot holding ter			
7 IN OUT	(N)	* * * * * * * * * * * * * * * * * * *	eyes, nose, mouth		22	-	OUT N/A NO	Proper cold holding te Proper date marking a			
6			ontamination by Hands		23	-60	N OUT NAMO	Time as a Public Heal		edures and rec	ords
8 DOUT		Hands clean & pro				180	N CO (NEM)NO	La	Advisory		EZEZ DE UDIGE
9 OUT	N/A NO	No bare hand com	shing sinks properly supplied & accessible	-	25	Ti	N OUT NA	Consumer advisory pr			ods
10 OYOUT			roved Source	849.10			\sim	Highly Susceptil			
11 (OUT			n an approved source		26	Ti	N OUT (A)	Pasteurized foods use	ed; prohibited fo	ads not offered	
12 IN OUT	N/A(NO)	Food received at p	roper temperature				Foo	od / Color Additives	and Toxic Su	dstances	
13 (IN)OUT	_	Food in good cond	lition, safe & unadulterated		27	1	N OU NIA	Food additives: approv	ved and properl	y used	
14 IN OUT	N/A)NO	Req. records avail	able: shell stock tags, parasite destruction		28	0	NOUT N/A	Toxic substances prop	erly identified, s	stored and use	d
Risk	factors ar	e improper prac	ices or procedures identified as the mo foodborne illness or injury, Public Hea rres to prevent foodborne illness or inju	ost		i.	C	onformance with A	pproved Proc	edures	
Interv	ventions a	re control measi	res to prevent foodborne illness or inju	iry.	19	i	N OUT NA	Compliance with varia	nce/specialized	process/HACC	Р
TO DESIRE		R YS THE			TAIL PRAC				14 X 3 1 1 1 1		
		Goo	d retail practices are preventative measures t								
Mark "X" in b	ox if num	bered item is not	in compliance Mark "X" on app	ropriate	box for COS	3 and	l/or COS	=corrected on-site d	uring inspection	on K =rep	eat violation
ompliance S	tatus	•		cos	R Con	nplia	nce Status				COS R
John	of the second	Safe I	Food and Water		Value Value	-	Will be the control	Proper Use	of Utensils	***	SEND OF THE REAL PROPERTY.
30 P	asteurized	eggs used where re	equired		43	+		sils properly stored	المحتودة المحتودة	2 handlad	
		from approved sou			44	+		uipment & linens; proper single-service articles; pr			
32 V	ariance obl		d processing methods	etil bré	45	+	Gloves used		openy storea a	2000	
no			mperature Control dequate equipment for temp, control		40		B	Utensils, Equipme	ent and Vend	ing	
		operly cooked for h		_	47	T		on-food contact surfaces			
		awing methods use			48	1	Properly des	signed, constructed, & u	sed		
		rs provided and ac			49		Warewashir	ng: installed, maintained.	& used: test str	rips	
	\$2.		Identification					Physical I	acilities		
37 F	ood proper	y labeled; original o	container		50		Hot & cold v	water available adequate	pressure		
		Prevention o	f Food Contamination		51			stalled, proper backflow			
38 In	nsects, rode	ents, & animals not	present		52	4		vaste water properly disp			
39 C	Contaminatio	on prevented during	food preparation, storage & display		53	_	_	es properly constructed,			
	ersonal cle				54	-		refuse properly disposed		ained	
		s: properly used & s	stored		55 56			cilities installed, maintain entilation & lighting, desi		ed.	
42 W	Vashing frui	ts & vegetables		17 10	.7	٠-	Abequate ve	entination & lighting, desi	griated areas da	,cu	
Type of Op	eration:								License F	Posted:	Y 🚯
		son-in-Charge							Follow-Up	o:	YN
DISCUSSION	with Per	son-in-charge	•						Follow-Up		
			/						1 Ollow-Ol		
Signature o	f Person	in Charge:	hen'll hat	1					Date: (U-27	7-2029
Signature o	of Inspec	tor: Su	Maria)					Date: /	0 714	2013
		//				_					



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



Es	tablishmer	# 708+ WI	ignt	by Kel	11			e: 10-Z4-Z0Z3	Page Z_	
Ad	dress: L	tost wi 49 Tonce	u Hill	12006	4		Cor	npliance Achieved: (٥- 2	3-2023	5
			/	21	1 ENII EN	ATURE OBSERVATI	IONS		, aja	
		Item / Location		Temp.	I	tem / Location	Temp.	Item / Locatio	a	Тетр.
_				-						-
_										-
_										-
						·, ··, ··				
	1			OB	SERVATIONS	AND/OR CORRECTIV	VE ACTIONS			10
٧	Item Number	Section of Code				Description of Vi	olation			d Corrected or COS
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_										
			No	01010	Tront	observed c	during to	no of inspect	ion.	
	-									
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			,		1.					
Sign	nature of P	erson in Charge:	5000	11)	u/1 +	_		Date: 17	- 20 -	2023
	nature of Ir		July	700	100			Date	29-2	رد
υĠ	nature of Ir	ispector.	~ ~		V			Date. lo	2-1 - 21	723



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



Est	ablishment: 🖊	cdonalds	Date:	10-25/2.3	Page 1 of 2 _	No. of Risk Factor/Intervention Violations			
		CHON CHONGEROUS			Time out 2:00	No. of Repeat Risk Factor/Intervention Violations			
	V V 00	er. JRK Hanagment LLC	Risk	Category	C	Total Violations	05		
Em		JEE Paregnard (CC	Phon		<u> </u>	Inspection Status: Green Yellow Red			
_		Routing Re-inspection Pre-opera			ss Investigation	Complaint Other			
ınsı	pection Type:	Rouline Re-inspection Pre-opera FOODBORNE ILLNESS RISK F							
15		Circle designated compliance status (IN, OUT, N/A,				'in appropriate box for COS and/or R			
_		IN = in compliance OUT= not in compliance NO = not							
. 100	26								
Com	pliance Status	and the state of t	OS R	Com	pliance Status	Protection from Contamination	S R		
	7	Supervision Person in charge present, demonstrates knowledge and		45	TINOUT N/A NO				
1	UNOUT	performs duties	_	15		Food separated and protected	-		
2	TARVOUT N/A	Certified Food Protection Manager		16	N OUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served.	+		
Ш	0	Employee Health		17	IN OUT NA NO	reconditioned & unsafe food			
3	(N)OUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting				Time / Temperature Control for Safety			
4	TINOUT	Proper use of restriction and exclusion		18	IN OUT NA NO	Proper cooking time and temperature			
5	MOUT	Procedures for responding to vomiting and diarrheal events		19	IN OUT NA	Proper reheating procedures for hot holding			
	U	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	OUT N/A NO	Proper hot holding temperatures			
7	IN OUT	No discharge from eyes, nose, mouth		22	ON ANA NO	Proper cold holding temperatures			
		Preventing Contamination by Hands		23	TOUT N/A NO	Proper date marking and disposition	\perp		
8	NO TUO	Hands clean & properly washed		24	NOUT N/A NO	Time as a Public Health Control: procedures and records	Щ		
9	MOUT N/A NO	No bare hand contact with RTE food		12.0		Consumer Advisory			
10	(N)OUT	Adequate handwashing sinks properly supplied & accessible		25	TRYOUT N/A	Consumer advisory provided for raw/undercooked foods	\perp		
	0	Approved Source				Highly Susceptible Populations			
11	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		-	-	ood / Color Additives and Toxic Substances			
13	OUT	Food in good condition, safe & unadulterated	-	27	ON OUT N/A	Food additives: approved and properly used	+		
14	IN 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 Prevalent con Interventions	are improper practices or procedures identified as the mos tributing factors of foodbome illness or injury. Public Heal are control measures to prevent foodborne illness or injur	st th v.	19	IN OUT	Conformance with Approved Procedures Compliance with variance/specialized process/HACCP			
17466	THOU VOIL THE			IL PRAC		LEVEL BUILDING SERVICE SERVICE SERVICE			
_	III E S E SALE	Good retail practices are preventative measures to				s, and physical objects into foods.			
Ma	rk "X" in box if nun	nbered item is not in compliance Mark "X" on appro				S =corrected on-site during inspection R=repeat violation	on		
_	ediamas Status	Ic	OS R	Com	pliance Status	cos	R		
om	pliance Status		05 1	1 0011	phanoc otatas	Proper Use of Utensils	100		
30	T T	d eggs used where required		43	In-use uter	nsils properly stored			
31	Water & Ice	e from approved source		44	Utensils, e	quipment & linens; properly stored, dried, & handled			
32	Variance of	otained for specialized processing methods		45	Single-use	/single-service articles: properly stored & used			
24		Food Temperature Control		46	Gloves use	ed properly			
·33	Proper cool	ling methods used: adequate equipment for temp. control		18.7		Utensils, Equipment and Vending			
34	Plant food p	properly cooked for hot holding		47		non-food contact surfaces cleanable,	_		
35	Approved th	hawing methods used		48		esigned, constructed, & used			
36	Thermomet	ers provided and accurate		49	Warewash	ing: installed, maintained, & used: test strips			
<u> </u>		Food Identification		-	I I I I I I I I I I I I I I I I I I I	Physical Facilities			
37	Food prope	rly labeled: original container		50		water available adequate pressure	+		
		Prevention of Food Contamination		51		nstalled, proper backflow devices waste water properly disposed	-		
38		lents, & animals not present	_	52		ties properly constructed, supplied, & cleaned	-		
39		ion prevented during food preparation, storage & display	_	53		refuse properly disposed, facilities maintained	-		
40	Personal cl		-	55		acilities installed, maintained, & clean	\top		
41		ns: property used & stored uits & vegetables		56		ventilation & lighting, designated areas used	\top		
42	I wasning m	and a regulation	Sing .	miny 12			ST'ALL		
Ту	pe of Operation:					License Posted: (Y)	N		
_	cussion with Person-in-Charge:					Follow-Up: Y	N		
ى ر	reassion with erson-in-oneigs.					Follow-Up Date:			
Sig	nature of Person	n in Charge:				Date:			
Sin	nature of Insper	ctor: S				Date: 10 - 25 - 2027			



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



Establishme	ent: Medonald	S	Date: Lo	-25-20L3	Page 🔻 C	of 2	
Address: 4	7 pobson u	200 M			e Achieved: س ـ رچ	- 2023	
44	· VOVSOR O		TEMPERATURE OBSERVATI	ONS		Filed Cal	
	Item / Location	Temp.	Item / Location	Temp.	Item / Location	1	Тетр.
		OBS	ERVATIONS AND/OR CORRECTIV	E ACTIONS			<i>(</i>
V Item Number	Section of Code		Description of Vio	olation			Corrected COS
Maribei						-	
							_
_							
		NO VIOLE	tions observed a	turing insu	2Ction		
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			La contraction of the contractio				
	1						
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2:	Daniel Gat				Date:		
	Person in Charge						2000
Signature of	Inspector:				Date: 10	- 25 - 20	LI



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



Establishment:	4. 6's PIZZO		Date //	9/12	Page 1	of 2	No. of Risk Factor/Intervention Vio	lations	Ø
Address: 388		_	Time in	70 C			No. of Repeat Risk Factor/Intervention Vio	lations	Ø
	der. Vas Garis		Risk Cat				Total Vio	lations	0
	un. Jus Barers	-	Phone:				Inspection Status: Green Yellow	Red	
Email:	Routine Re-inspection Pre-oper			Illnes	ce Inva	stigation	Complaint Other		
Inspection Type:	Routine Re-inspection Pre-oper FOODBORNE ILLNESS RISK								
	Circle designated compliance status (IN, OUT, N/A				DDIO XI		in appropriate box for COS and/or R		
	IN = in compliance OUT= not in compliance NO = no				applical				
The state of the state of							Ed - IS SHIPSBUS LIP - SANIGES	cos	R
Compliance Status	Supervision	cos	R	Com	pliance	Status	Protection from Contamination	1003	1 1
A)	Person in charge present, demonstrates knowledge and	J- 14		15	The ou	T N/A NO	Food separated and protected		
1 (I) OUT	performs duties	_		-	II) OU		Food-contact surfaces cleaned and sanitized	_	+
2 IN OUT N/A	Certified Food Protection Manager			16		_	Proper disposition or returned, previously served,	_	+
	Employee Health			17	IN OU	T(N) NO	reconditioned & unsafe food		_
3 INOUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting			10.0			Time / Temperature Control for Safety		-
4 NOUT	Proper use of restriction and exclusion			18	IN OU	IT NIA(NO)	Proper cooking time and temperature		-
5 INOUT	Procedures for responding to vomiting and diarrheal events			19	_	TNANG	Proper reheating procedures for hot holding		⊢
	Good Hygiene Practices	Ų.	-	20		T N/A NO	Proper cooling time and temperatures	+	+
6 IN OUT NO			-	21	-	T N/A NO	Proper hot holding temperatures		\vdash
7 IN OUT NO				22	-	T N/A NO	Proper cold holding temperatures Proper date marking and disposition	+	-
	Preventing Contamination by Hands		_	23	_	PN/A NO	Time as a Public Health Control: procedures and record		\vdash
8 (I) OUT NO		-		24	IN OU	NIJNO	Consumer Advisory	122	+
9 NOUT N/A NO		-	+	25	/ IN OU	Τ Ν/Δ	Consumer advisory provided for raw/undercooked foods	T	Т
10 OYOUT	Adequate handwashing sinks properly supplied & accessible Approved Source	-		2.5	U	11072	Highly Susceptible Populations	10.00	
11 (NOUT	Food obtained from an approved source		\top	26	IN OU	T N/A	Pasteurized foods used; prohibited foods not offered		Г
12 IN OUT N/A NO							od / Color Additives and Toxic Substances	THE THE	
13 IN OUT	Food in good condition, safe & unadulterated			27	IN OU	T(N/A)	Food additives: approved and properly used		
14 IN OUT WANO				28	(I) OL	IT N/A	Toxic substances properly identified, stored and used		
		ost				(Conformance with Approved Procedures	F1 571	
Prevalent co	are improper practices or procedures identified as the montributing factors of foodborne illness or injury. Public Heas are control measures to prevent foodborne illness or inju	aith ury.	- 1	19	IN OU	TNA	Compliance with variance/specialized process/HACCP		
			RETAIL	PRAC	TICES	· · ·			
	Good retail practices are preventative measures t					, chemicals,	, and physical objects into foods.		
Mark "X" in box if nu	mbered item is not in compliance Mark "X" on app					cos	=corrected on-site during inspection R=repea	t violation	1
Compliance Status		cos	R	Com	pliance	Status		cos	R
compliance status	Safe Food and Water	1000		E			Proper Use of Utensils	25	
30 Pasteuriz	ed eggs used where required			43		In-use uten	sils properly stored		L
	ce from approved source			44		Utensils, ed	quipment & linens: properly stored, dried, & handled		┺
32 Variance	obtained for specialized processing methods			45		Single-use/	/single-service articles: properly stored & used		1
	Food Temperature Control			46		Gloves use		4	1
33 Proper co	poling methods used: adequate equipment for temp, control			Torres		,	Utensils, Equipment and Vending	100	1 17
	d properly cooked for hot holding			47			non-food contact surfaces cleanable,		\vdash
	thawing methods used	_	-	48	+-+		esigned, constructed, & used ing: installed, maintained, & used: test strips	+	+
	eters provided and accurate	_	Sc II-E	49		vvarewasni	Physical Facilities	377,08	-
	Food Identification			50	TT	Hat & cold	water available adequate pressure		Т
37 Food prop	perly labeled; original container Prevention of Food Contamination			51	1		nstalled, proper backflow devices	1	\vdash
38 Insects, re	odents, & animals not present			52			waste water properly disposed		Г
	nation prevented during food preparation, storage & display			53	1		ties properly constructed, supplied, & cleaned		Γ
	cleanliness			54			refuse properly disposed, facilities maintained		
	oths: properly used & stored			55		Physical fac	cilities installed, maintained, & clean		
	fruits & vegetables			56		Adequate v	ventilation & lighting, designated areas used		
				100	11.	1186	License Posted:	7	N
Type of Operation	n:						1	1	_
Discussion with P	Person-in-Charge:						Follow-Up:	٦ (N
1	2 2						Follow-Up Date:		
0:	au in Ohaana	-					Date:		
Signature of Pers	on in Charge:								_
Signature of Inspe	ector:						Date: 6-18-1	023	_



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



Es	tablishmer	nt: Nr. 6's Pi	280		Date: 10	-18-2023	Page Z	of <u>Z</u>
Ad	dress: 34	38 Der Hig	nuay		Compliano	ce Achieved: 10 - 18		
15				TEMPERATURE OBSERVAT	Temp.	Item / Location	7	Temp.
_		Item / Location	Тетр.	Item / Location	remp.	rear / Lacation		Temp.
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	La de la			OBSERVATIONS AND/OR CORRECTI	VE ACTIONS			HAY SU
	Item					- Indian	Dated	Corrected
٧	Number	Section of Code		Description of V	lolation		or	cos
			IN 0	violations obselv	ed during -	time of ins	DOCHON	
				•			1 1	Ri .
-								
							_	
_								
Sin	nature of B	erson in Charge:				Date:		
			1-0				152	
Sig	nature of la	nspector:				Date.	18-23	125



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



FOOD ESTABLISHMENT INSPECTION REPORT Date: 0/17/27 Page 1 of 2. No.

Est	Establishment: Village Eater V					423	Page 1 of 2 _	No. of Risk Factor/Intervention Violations			
			Du Highway			-	Time out 2:00	No. of Repeat Risk Factor/Intervention Violations			
			The Village Eatery LLC		isk Cat			Total Violat	ions	0	
Em			THE VILLETE FALLEY	_	hone:			Inspection Status: Green Yellow Re	ed	-	
_			Routine) Re-inspection Pre-opera		-	Illnes	s Investigation	Complaint Other	_		
ınsı	oection 1	rype:	FOODBORNE ILLNESS RISK F							e I a	
			Circle designated compliance status (IN, OUT, N/A,					in appropriate box for COS and/or R			
-			IN = in compliance OUT= not in compliance NO = not								
	d., 01.7	SISTERIAL INC.		11			N N N N N N N N N N N N N N N N N N N		T	0.0	
Com	pliance S	Status		os	R	Com	pliance Status	Parada fam Contomination	cos	R	
	T		Supervision Person in charge present, demonstrates knowledge and		$\overline{}$		6	Protection from Contamination		$\neg \neg$	
1 (IN OUT	•	performs duties			15	IN OUT N/A NO	Food separated and protected		_	
2	MOUT	N/A	Certified Food Protection Manager			16	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	TUQUI		Management/food employees & conditional employee;			WES.	24918	Time / Temperature Control for Safety			
4	INOUT		knowledge, responsibilities and reporting Proper use of restriction and exclusion			18	IN OUT N/ANO	Proper cooking time and temperature		\top	
5	TNOUT		Procedures for responding to vomiting and diarrheal events			19	IN OUT N/ANO	Proper reheating procedures for hot holding			
J	000		Good Hygiene Practices	TE.		20	IN OUT N/ANO	Proper cooling time and temperatures			
6	IN OUT	(NO)	Proper eating, tasting, drinking, or tobacco use		\Box	21	IN OUT N/A NO	Proper hot holding temperatures			
7	IN OUT	~	No discharge from eyes, nose, mouth			22	TO OUT N/A NO	Proper cold holding temperatures			
Ė			Preventing Contamination by Hands			23	INJOUT N/A NO	Proper date marking and disposition			
8	TIN OUT	NO	Hands clean & properly washed			24	IN OUT NA NO	Time as a Public Health Control; procedures and records			
9	IN OUT		No bare hand contact with RTE food					Consumer Advisory			
10	/IN OUT		Adequate handwashing sinks properly supplied & accessible			25	(IN)OUT N/A	Consumer advisory provided for raw/undercooked foods			
	10,000	eng i	Approved Source	-			PERSONAL PROPERTY.	Highly Susceptible Populations			
11	TIN OUT		Food obtained from an approved source			26	IN OUT WA	Pasteurized foods used; prohibited foods not offered			
12	IN OUT		Food received at proper temperature				Fo	od / Color Additives and Toxic Substances			
13	(N)OUT		Food in good condition, safe & unadulterated			27	IN OUT (VA)	Food additives: approved and properly used			
14	-	N/ANO	Req. records available: shell stock tags, parasite destruction			28	NOUT N/A	Toxic substances properly identified, stored and used			
	Risk	factors a	re improper practices or procedures identified as the mos	st		- 3,		Conformance with Approved Procedures			
	Preva	alent cont	re improper practices or procedures identified as the mos tributing factors of foodbome illness or injury. Public Healt are control measures to prevent foodborne illness or injury	th v.		19	IN OUT N/A	Compliance with variance/specialized process/HACCP			
_	inter	VEHIONS		_	1290 4 IT	DD ACT			122		
			Good retail practices are preventative measures to		ETAIL			and obveical objects into foods			
Ma	rk "X" in h	oox if num	bered item is not in compliance Mark "X" on appro					=corrected on-site during inspection R=repeat v	iolatio	n	
					63 .				cos	R	
Com	pliance S	Status	Safe Food and Water	os	R	Comp	oliance Status	Proper Use of Utensils	003	110	
30		Desteurized	eggs used where required			43	In-use uter	sils property stored		\top	
31	_		from approved source			44		quipment & linens: properly stored, dried, & handled			
32	_		stained for specialized processing methods		\vdash	45		/single-service articles: properly stored & used			
32	TO BE SULE	ATIANCE OF	Food Temperature Control		E-01	46	Gloves use				
33	1 1	Proper cool	ing methods used: adequate equipment for temp. control				To Jack	Utensils, Equipment and Vending	E K	100	
34			properly cooked for hot holding			47	Food and r	ion-food contact surfaces cleanable,			
35			nawing methods used		\Box	48	Properly de	esigned, constructed, & used			
36	1		ers provided and accurate			49		ing: installed, maintained, & used: test strips			
- 1		riemonie	Food Identification			TA 1	VIII Kossii or	Physical Facilities	me	5915	
37	1		rly labeled: original container			50	Hot & cold	water available adequate pressure			
140	The last		Prevention of Food Contamination		1234	51	Plumbing is	nstalled, proper backflow devices			
38	T Ir	nsects, rod	ents, & animals not present			52	Sewage &	waste water properly disposed			
39			ion prevented during food preparation, storage & display			53	Toilet facilit	ties properly constructed, supplied, & cleaned			
40		Personal cle				54	Garbage &	refuse properly disposed, facilities maintained			
41			ns: properly used & stored			55	Physical fa	cilities installed, maintained, & dean			
42	_		its & vegetables			56	Adequate v	rentilation & lighting, designated areas used		\perp	
				šć.	25		** 5	License Posted:	VI	N.	
Ту	oe of Op	eration:								2	
Dis	cussion	with Pe	rson-in-ChargeA					Follow-Up:	Y	(M)	
			1-01					Follow-Up Date:			
_								Data		\neg	
Sig	nature o	of Persor	n in Charge: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					Date:			
Sig	nature c	of Inspec	etor:					Date: (0 - (7 - 202	13		
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Establishment	VILLAGE EX	ter 1/		Date: VO	17-7023	Page	of <u>Z</u>
Address: 58	VILLAGE EX	nway_		Compliano	e Achieved: \o-	14-7023	
With Early			TEMPERATURE OBSERVAT	IONS		h -	
	Item / Location	Temp.	Item / Location	Temp.	Item / Locati	on	Temp.
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- 45 A C A U		*-2"	The control of the co	LTD A CONTONIC			257 8
l taux		obsi obsi	ERVATIONS AND/OR CORRECTI	VE ACTIONS		Detect	Corrected
V Item Number	Section of Code		Description of Vi	olation			cos
		Ma winati	ons observed dui	ind time of	W Pertino		
		NO AIDIOL	OLD DADELAGU UDI	THE THING BY	Harran	•	
	1						
		17					
Signature of Pe	rson in Charge:	ILL LE			Date:		
Signature of Ins	spector:	SIC			Date: 10	-17-702	23



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



Est	ablishment:	se Haven	Date	No. of Risk Factor/Intervention Violation					
		nifer Drive		-	Time out	No. of Repeat Risk Factor/Intervention Violation	SØ		
		er: Rose Haway Merrimack -	-	Category:	_	Total Violation	50		
_		Rac Havey Merrimana -	Phon			Inspection Status; Green Yellow Red			
Em		Rouline Re-inspection Pre-operat			ss Investigation	Complaint Other			
Ins	pection Type:	Rouline Re-inspection Pre-operate FOODBORNE ILLNESS RISK F							
		Circle designated compliance status (IN, OUT, N/A, I				'in appropriate box for COS and/or R			
-		IN = in compliance OUT= not in compliance NO = not							
Tribis							- I		
Com	pliance Status		OS R	Com	pliance Status	Protection from Contamination	S R		
		Supervision Person in charge present, demonstrates knowledge and	Г		CO SUT NU NO				
1	IN OUT	performs duties		15	INJOUT N/A NO	Food separated and protected	-		
2	IN OUT N/A	Certified Food Protection Manager		16	II) OUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,	-		
		Employee Health		17	IN OUT WAND	reconditioned & unsafe food			
3	INOUT	Management/food employees & conditional employee;				Time / Temperature Control for Safety			
4	OUT	knowledge, responsibilities and reporting Proper use of restriction and exclusion		18	IN OUT N/ANO	Proper cooking time and temperature			
5	IN DUT	Procedures for responding to vomiting and diarrheal events		19	IN OUT N/A NO	Proper reheating procedures for hot holding			
- i	U	Good Hygiene Practices		20	IN OUT NA NO	Proper cooling time and temperatures			
6	IN OUT (No)	Proper eating, tasting, drinking, or tobacco use		21	IN OUT NAME	Proper hot holding temperatures	-		
7	IN OUT NO	No discharge from eyes, nose, mouth		22	NOUT N/A NO	Proper cold holding temperatures			
		Preventing Contamination by Hands		23	ON AN TUCK	Proper date marking and disposition			
8	ON TUO	Hands clean & properly washed		24	IN OUT N/A NO	Time as a Public Health Control: procedures and records			
9	OUT N/A NO	No bare hand contact with RTE food				Consumer Advisory			
10	(IN)OUT	Adequate handwashing sinks properly supplied & accessible		25	IN OUT WA	Consumer advisory provided for raw/undercooked foods	\perp		
3		Approved Source			100	Highly Susceptible Populations			
11				26	(N OUT N/A	Pasteurized foods used; prohibited foods not offered	_		
12						od / Color Additives and Toxic Substances			
13	NOUT	Food in good condition, safe & unadulterated	_	27	IN OUT MA	Food additives: approved and properly used Toxic substances properly identified, stored and used			
14	TN OUT N/A NO	Req. records available: shell stock tags, parasite destruction		28	IN OUT N/A				
	Risk factors a Prevalent cont Interventions	re improper practices or procedures identified as the mos tributing factors of foodbome illness or injury. Public Healt are control measures to prevent foodborne illness or injury	t h /.	19	IN OUT (A)	Compliance with Approved Procedures Compliance with variance/specialized process/HACCP			
1	TO SHAPE WITH THE			IL PRAC	TICES		1.400		
		Good retail practices are preventative measures to	control the	addition of p	athogens, chemicals	, and physical objects into foods.			
Ma	rk "X" in box if num	nbered item is not in compliance Mark "X" on appro	priate bo	x for COS	and/or COS	S =corrected on-site during inspection R=repeat viola	tion		
Com	pliance Status	ic	OS R	Com	pliance Status	co	S R		
-	Tank Carlo	Safe Food and Water	8 E			Proper Use of Utensils *			
30	Pasteurized	l eggs used where required		43		nsils properly stored	_		
31	Water & Ice	from approved source		44		quipment & linens: properly stored, dried, & handled			
32	Variance of	otained for specialized processing methods		45	-	/single-service articles: properly stored & used	-		
		Food Temperature Control	- 1892	46		ed properly	graduum		
33	Proper cool	ing methods used: adequate equipment for temp. control		SHEAT		Utensils, Equipment and Vending			
34		properly cooked for hot holding		47		non-food contact surfaces cleanable,	\dashv		
35		nawing methods used	_	48		esigned, constructed, & used ing: installed, maintained, & used: lest strips	\dashv		
36		ers provided and accurate	,	49	Warewasii	Physical Facilities	3 11		
9		Food Identification		50	Hot & cold	water available adequate pressure			
37	Food prope	rly labeled; original container Prevention of Food Contamination	100	51		nstalled, proper backflow devices	\neg		
00	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ents, & animals not present	T	52		waste water properly disposed			
38		ion prevented during food preparation, storage & display		53		ities properly constructed, supplied, & cleaned			
39 40	Personal de		_	54		refuse properly disposed, facilities maintained			
41		ns: properly used & stored		55		cilities installed, maintained, & clean			
42		its & vegetables		56	Adequate	ventilation & lighting, designated areas used			
11				likuvisi –		Control of the second s)		
Ту	pe of Operation					License Posted: Y	/ N		
Di	scussion with Pe	rson-in-Charge:				Follow-Up: Y	(N)		
"	1/1					Follow-Up Date:			
	11/12								
Sit	nature of Persor	n in Charge:				Date:			
Siz	nnature of Insper	etor:				Date: 10 - 17 - 202	23		



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



Es	tablishmen	t: 120se Hau	100	Date: VO	- UT - 202 3 Page	e _2 _of _2	
	dress: 8				Compliance	e Achieved: 0-13-	2023
	cre-colors			TEMPERATURE OBSERVATION	ONS		
		Item / Location	Temp.	Item / Location	Temp.	Item / Location	Temp.
_							
					E ACTIONS		
	.47.		UBSE	RVATIONS AND/OR CORRECTIV	2110110113		Dated Corrected
٧	Item Number	Section of Code		Description of Vio	lation		or COS
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-							
			Na 12161-+	ons observed di	stina time	of increction.	
			1,0 VOICETT	OVE OBETACE III	Jivpp)	LA TROJECTIES.	
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Sign	nature of P	erson in Charge:	116			Date:	
			1100			Date: 10 - (7-	- 1673
Sig	nature of la	ispector.	1///-			20.01	رب



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



Esta	ablishment: D	sminos	Date	Date 0/66/13 Page 1 of Z No. of Risk Factor/Intervention Violation						
	Iress: 456	DIA HIRKON				No. of Repeat Risk Factor/Intervention Violati	ons Ø			
	ner/Permit Hold	Tan atazas		Category:		Total Violati	,			
Em		TBD PIZZA PNG	Phone			Inspection Status: Green Yellow Re-	d			
_		Routine Re-inspection Pre-opera			ss Investigation					
Insp	pection Type:	Re-inspection Pre-opera FOODBORNE ILLNESS RISK								
		Circle designated compliance status (IN, OUT, N/A,				"X" in appropriate box for COS and/or R				
		IN = in compliance OUT= not in compliance NO = no								
		IN = In compliance OOT = not in compliance NO = no	(Observed		*1					
Com	pliance Status		COS R	Com	pliance Status	Protection from Contamination	COS R			
		Supervision Person in charge present, demonstrates knowledge and		J 100	0					
1 (INOUT	performs duties		15	IN/OUT N/A N					
2	TO OUT N/A	Certified Food Protection Manager		16	OUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,	-+			
	0	Employee Health		17	IN OUT (N/A)N	reconditioned & unsafe food				
3	TINOUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting		William .		Time / Temperature Control for Safety				
4	INOUT	Proper use of restriction and exclusion		18	IN OUT N/A	O Proper cooking time and temperature				
5	7N OUT	Procedures for responding to vomiting and diarrheal events		19	IN OUT N/A	Proper reheating procedures for hot holding				
		Good Hygiene Practices		20	IN OUT N/A	O Proper cooling time and temperatures				
6	IN OUT NO	Proper eating, tasting, drinking, or tobacco use		21	IN OUT NAN	Proper hot holding temperatures				
7	IN OUT	No discharge from eyes, nose, mouth		22	OUT N/A N	O Proper cold holding temperatures				
		Preventing Contamination by Hands		23	IN OUT N/A N	O Proper date marking and disposition				
8	NO TUO	Hands clean & properly washed		24	IN OUT NAM	O Time as a Public Health Control: procedures and records				
9	NOUT N/A NO	No bare hand contact with RTE food			A SINCE	Consumer Advisory				
10	(IN)OUT	Adequate handwashing sinks properly supplied & accessible		25	(I) OUT N/A	Consumer advisory provided for raw/undercooked foods				
		Approved Source		illett.		Highly Susceptible Populations				
11	TIY OUT	Food obtained from an approved source		26	OUT N/A	Pasteurized foods used; prohibited foods not offered				
12	IN OUT N/A	Food received at proper temperature				Food / Color Additives and Toxic Substances				
13	INCUT	Food in good condition, safe & unadulterated		27	OUT N/A	Food additives: approved and properly used				
14	IN OU 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 mo- tributing factors of foodborne illness or injury, Public Heal are control measures to prevent foodborne illness or injur	st Ith			Conformance with Approved Procedures				
	Interventions	are control measures to prevent foodborne illness or injur	ÿ.	19	IN OUT NI	Compliance with variance/specialized process/HACCP				
-	L ALL HAR	CO	OD RETA	IL PRAC	TICES					
		Good retail practices are preventative measures to								
Mai	k "X" in box if num	bered item is not in compliance Mark "X" on appr	opriate bo	x for COS	and/or Co	OS =corrected on-site during inspection R=repeat via	olation			
Com	pliance Status		OS R	Com	pliance Status		COS R			
100	Mary Mary Co.	Safe Food and Water				Proper Use of Utensils				
30	Pasteurized	eggs used where required		43		utensils properly stored				
31	Water & Ice	from approved source		44		s, equipment & linens: properly stored, dried, & handled				
32	Variance of	stained for specialized processing methods		45		use/single-service articles: properly stored & used				
		Food Temperature Control	250	46	Gloves	used properly	100 U.S. Sec. 17			
33	Proper cool	ing methods used: adequate equipment for temp. control		OWESE.	THE PART SAGE	Utensils, Equipment and Vending				
34		roperly cooked for hot holding		47		nd non-food contact surfaces cleanable,				
35		nawing methods used		48		v designed, constructed, & used shing: installed, maintained, & used: test strips				
36		ers provided and accurate Food Identification		49	Vvarewa	Physical Facilities				
27	T Condenses			50	Hot & co	old water available adequate pressure				
37	Faca prope	rly labeled: original container Prevention of Food Contamination		51		ng installed, proper backflow devices				
38	Inserts rod	ents, & animals not present		52		& waste water properly disposed				
39		ion prevented during food preparation, storage & display		53		cilities properly constructed, supplied, & cleaned				
40	Personal cle			54	Garbage	e & refuse properly disposed, facilities maintained				
41		ns: properly used & stored		55	Physical	I facilities installed, maintained, & clean				
42		its & vegetables		56	Adequat	te ventilation & lighting, designated areas used				
15	WEST CHER	A SERVICIONE DE LA COMPANIO DE MAIS DE LA COMPANIO DEL COMPANIO DEL COMPANIO DE LA COMPANIO DEL COMPANIO DE LA COMPANIO DEL COMPANIO DE LA COMPANIO DEL COMPANIO DEL COMPANIO DE LA COMPANIO DE LA COMPANIO DE LA COMPANIO DEL COMPANIO DEL COMPANIO DE LA COMPANIO DEL COMPANION DEL COMP		restricted in						
Тур	e of Operation:					License Posted:				
Dis	cussion with Pe	rson-in-Charge:				Follow-Up:	Y (N)			
						Follow-Up Date:	_			
_		(.1 - 1:				Deta:				
Sig	nature of Persor	n in Charge: Call Jall				Date:				
Sig	nature of Inspec	etor 1				Date: 16 / 16 / Z	3			



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



Est	ablishmen	t pominos	Pi 22C		Date:10 -	16-2023	Page _2	of_7_
Ado	dress: 🚣	80 DW H	a) was			ce Achieved: 10 - U		
		se vu u	drang.	TEMPERATURE OBSERVA		u sa Mink sa irain		
		Item / Location	Temp.	Item / Location	Тетр.	Item / Location		Temp.
-								
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				· At				4
				OBSERVATIONS AND/OR CORRECT	TIVE ACTIONS			JEA.Es
V	Item Number	Section of Code		Description of	Violation			Corrected r COS
	Number							000
_								
						199		
_								
			NO VI	dations observed	distince 7	e incortio	n l	
			tho Ar	day to d observers	Cong ma	rispecto		
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Sigr	nature of F	erson in Charge: (Call stop	r_		Date:		
	nature of I					Date: 46	-14-70	55



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



Fet	tablishment: \	ot Rize Bagel cafe		Date 8/16/23 Page 1 of _2 No. of Risk Factor/I			No, of Risk Factor/Intervention Viola	ations	K	
		Maria						No. of Repeat Risk Factor/Intervention Viola	ations	0
-		Du Highway	-			-	2.00	Total Viola		-
Ow	/ner/Permit Hold	er: Almand Enterprises U.C.			ategory					
Em	nail:			Phone					Red	
Ins	pection Type:	Routine Re-inspection Pre-op-				ess Inves			2)	
		FOODBORNE ILLNESS RIS							V. In	100
		Circle designated compliance status (IN, OUT, N						in appropriate box for COS and/or R		
		IN = in compliance OUT= not in compliance NO =	not of	bserved	N/A = no	t applicabl	le COS =	corrected on-site R = repeat violation	WHEN SAY	_
Соп	npliance Status		cos	S R	Con	npliance 5	Status		cos	R
		Supervision			11.13	0		Protection from Contamination		1
1	OUT	Person in charge present, demonstrates knowledge and performs duties			15	(IN OUT	N/A NO	Food separated and protected		
2	AN OUT N/A	Certified Food Protection Manager			16	TUO UT	N/A	Food-contact surfaces cleaned and sanitized		
		Employee Health	72 8	" "	17	IN OUT	N/A)NO	Proper disposition or returned, previously served, reconditioned & unsafe food	1	
- 9	6	Management/food employees & conditional employee;	T	T		L CONT		Time / Temperature Control for Safety		100
3	Ооит	knowledge, responsibilities and reporting	+	-	10	IN OUT	-		1	-
4	CNOUT	Proper use of restriction and exclusion	+	_	18		N/A(NO)	Proper cooking time and temperature	+	+
5	NOUT	Procedures for responding to vomiting and diarrheal events		560 500	19		N/A (O)	Proper reheating procedures for hot holding Proper cooling time and temperatures	+	+
191	Luis Co	Good Hygiene Practices	T	To the second	21		N/A NO	Proper hot holding temperatures	+	+
6	IN OUT (NO)	Proper eating, tasting, drinking, or tobacco use	+	_	22	MOUT		Proper cold holding temperatures	-	+
7	IN OUT (O)	No discharge from eyes, nose, mouth	152112		23		N/A NO	Proper date marking and disposition	+	+
_	CINOUT NO	Preventing Contamination by Hands	T	T	24		MANO.	Time as a Public Health Control: procedures and records		\top
8		Hands clean & properly washed No bare hand contact with RTE food	+	-	-	111001		Consumer Advisory		4
10	IN OUT N/A NO	Adequate handwashing sinks properly supplied & accessible	+	-	25	ON OUT	N/A	Consumer advisory provided for raw/undercooked foods	T	T
10	CIN COL	Approved Source		-	20	0		Highly Susceptible Populations		
11	NOUT	Food obtained from an approved source	T		26	OUT	N/A	Pasteurized foods used; prohibited foods not offered	T	
12	IN OUT N/A (O)	Food received at proper temperature	1		100		Fo	od / Color Additives and Toxic Substances		
13	MOUT	Food in good condition, safe & unadulterated			27	TUO NI	(N/A)	Food additives: approved and properly used		
14	IN OUT (VA) 10			28	INOUT	N/A	Toxic substances properly identified, stored and used			
		ure improper practices or procedures identified as the n	nost					Conformance with Approved Procedures	150	
	Prevalent cont Interventions	are improper practices or procedures identified as the r tributing factors of foodborne illness or injury. Public H are control measures to prevent foodborne illness or in	ealth ijury.		19	IN OUT	(VA)	Compliance with variance/specialized process/HACCP		
	HEAD HERE			RETAI	I. PRAC	TICES	1,91		PER I	1 27
_		Good retail practices are preventative measures					chemicals,	and physical objects into foods.		
Ma	rk "X" in box if num	nbered item is not in compliance Mark "X" on a						=corrected on-site during inspection R=repeat	violation	a
-	atiana Plata		cos	R	Com	pliance S	tatus		cos	R
Com	pliance Status	Safe Food and Water	1000	, ,	COM	ipilalice o	tatus	Proper Use of Utensils		
30	Pasteurized	l eggs used where required	T	\neg	43	Ir	n-use uten	sils properly stored		
31		from approved source			44	L	Itensils, eq	quipment & linens: properly stored, dried, & handled		
32	Variance ob	stained for specialized processing methods			45	S	ingle-use/	single-service articles: properly stored & used		
		Food Temperature Control	D) Sei		46	G	loves use	d properly		
33		ing methods used: adequate equipment for temp. control						Utensils, Equipment and Vending		
34	Plant food p	properly cooked for hot holding			47	F	ood and n	on-food contact surfaces cleanable,	1	
35	Approved th	nawing methods used			48	P	roperly de	signed, constructed, & used		
36	Thermomet	ers provided and accurate			49	l v		ng: installed, maintained, & used: test strips		
		Food Identification				1		Physical Facilities		- 1
37	Food proper	rly labeled: original container			50			water available adequate pressure	-	-
		Prevention of Food Contamination			51			nstalled, proper backflow devices	-	-
38		ents, & animals not present	-		52			waste water properly disposed	-	-
39		ion prevented during food preparation, storage & display	+		53			ies properly constructed, supplied, & cleaned	+	-
40	Personal cle		+-		54			refuse properly disposed, facilities maintained	+	+
41		ns: properly used & stored	+-		55	+		cilities installed, maintained, & dean entilation & lighting, designated areas used	+	
42	Washing fru	its & vegetables	dien-	4	36	A	dequate v	entifation & lighting, designated areas used		4
Tv	pe of Operation:							License Posted:	Y	N
_								Follow-Up:	V	N.
DIS	Discussion with Person-in-Charge:									$\overline{}$
	00 10/11							Follow-Up Date:		
Sin	nature of Persor	n in Charge:						Date:		
	nature of Inspec						-	Date: 8-(6-107	. 7	
SIC	mature of inspec	HOL / / /						Date: K-16-707		- 1



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



Es	tablishmer	nt: Hot Rize	_	Date: 😪	16-2023	Page	2.of <u>Z</u>				
Ad	dress: ر	Hot Rize	anway	Complianc	e Achieved:8 -(6	-zoz3					
۵,	- / B (L)			TEMPERATURE OBSERVAT	TONS						
		Item / Location	Тетр.	Item / Location	Temp.	Item / Location	on	Temp.			
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-								-			
				CERTIFICATION CONTRACTOR	ETT A OTRI ONO		V 1866 V				
		428/40	OB	SERVATIONS AND/OR CORRECTI	VE ACTIONS		. Detect	Corrected			
٧	Item Number	Section of Code		Description of V	iolation		1	r COS			
			N	land of control divi	100 A 100 A	- cook	_				
_			No Violost	ions absenced dur	ing time of	- inspection	16.				
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				10							
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+											
-				110							
			200	HX							
Sign	ature of Pe	erson in Charge:	0-1	1 10 X		Date:					
Sigr	ature of In	spector:	45/	en O		Date: 8.	16-2023	5			
			/ //								



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



Est	ablishment: < †	arbucks #18194	Date 10	11/23	Page 1 of _Z_	No. of Ris	k Factor/In	itervention \	/iolations	Ø
		emium atlet Blud.	Time in	60:11	Time out 2:00	No. of Repeat Ris	k Factor/In	tervention \	/iolations	Ø
_		er starbucks (orporation	Risk Ca	ategory;	C			Total \	/iolations	ර
_		A TOTAL BOCKS TO TANTON	Phone:			Inspection Status:	Green	Yellow	Red	
Em		De inspection - Des approfi			as Investigation	Complaint	Oth			
Insp	pection Type:	Routine Re-inspection Pre-operation FOODBORNE ILLNESS RISK FA			ss Investigation		Oti	(CI		
_						in appropriate box for	COS and/or	r R		
_		Circle designated compliance status (IN, OUT, N/A, N IN = in compliance OUT= not in compliance NO = not of								
	S 1185	IN = in compliance OUT = not in compliance NO = not to	observed r	MA - NOL	applicable COS =	Corrected on-site K -	repeat viola	.011		va v
Com	pliance Status	co	S R	Com	pliance Status				cos	S R
		Supervision			A	Protection from (ontaminat	ion		_
1	(I) OUT	Person in charge present, demonstrates knowledge and performs duties		15	OUT N/A NO	Food separated and pro	otected			
2	TH OUT N/A	Certified Food Protection Manager		16	OUT N/A	Food-contact surfaces				\perp
		Employee Health		17	ON AND TUO NI	Proper disposition or re reconditioned & unsafe		usly served,		
3	FINOUT	Management/food employees & conditional employee;		l Gar	HESIVIC A	Time / Temperature	1000	Safety		
4	(I) OUT	knowledge, responsibilities and reporting Proper use of restriction and exclusion	+	18	IN OUT NA	Proper cooking time an				$\neg \neg$
5	CINCUT	Procedures for responding to vomiting and diarrheal events	-	19	IN OUT N/A NO	Proper reheating proces				\neg
5	(B)CO1	Good Hygiene Practices		20	IN OUT N/A NO	Proper cooling time and				
6	IN OUT (NG	Proper eating, tasting, drinking, or tobacco use		21	IN OUT N/A	Proper hot holding temp				
7	IN OUT NO	No discharge from eyes, nose, mouth		22	OUT N/A NO	Proper cold holding tem				
NIES	111001	Preventing Contamination by Hands		23	MOUT N/A NO	Proper date marking an				
8	DOUT NO	Hands clean & properly washed		24	IN OUT (/A)O	Time as a Public Health	Control: prod	cedures and rec	ords	
9	(IN OUT N/A NO	No bare hand contact with RTE food		Desired.		Consumer A	dvisory	ALX TO BE		
10	Nout	Adequate handwashing sinks properly supplied & accessible		25	OUT N/A	Consumer advisory pro			ods	
		Approved Source		1.,		Highly Susceptibl	e Populatio	ns		
11	N OUT	Food obtained from an approved source		26	OUT N/A	Pasteurized foods used	l; prohibited fo	ods not offered		
12	IN OUT N/A(NO)	Food received at proper temperature			Foo	od / Color Additives a	nd Toxic Sı	ıbstances		
13	(IN)OUT	Food in good condition, safe & unadulterated		27	OUT N/A	Food additives: approve	ed and proper	ly used		
14	IN OUT NANO	Req. records available: shell stock tags, parasite destruction		28	INJOUT N/A	Toxic substances prope	rly identified, :	stored and used	d	
	Risk factors a	are improper practices or procedures identified as the most		1017	C	onformance with Ap	proved Pro	cedures		
	Prevalent cont	are improper practices or procedures identified as the most tributing factors of foodborne illness or injury, Public Health are control measures to prevent foodborne illness or injury.	- 1	19	IN OUT (NA)	Compliance with variance	ce/specialized	process/HACC	P	
-	Interventions e						III NAME	A. 1007 \$1.50	_	
		Good retail practices are preventative measures to co	RETAIL			and physical phiects into	foods.			
Mai	rk "X" in hox if num	bered item is not in compliance Mark "X" on approp				=corrected on-site dur		on R=rep	eat violation	on
14164	Les Mess al		77.50	nd==					laga	
om	pliance Status	C C S . L . L W	SR	Com	pliance Status	Proper Use of	f I Itaneile	A PER WILL	cos	R
20		Safe Food and Water		43	In-use uten	sils properly stored	Ctclibils			\top
30		l eggs used where required		44		uipment & linens: properly	stored dried	& handled		
31		t from approved source otatined for specialized processing methods	-	45		single-service articles: pro				
32	Vanance of	Food Temperature Control	n-lenier	46	Gloves used		polity violetic			\top
33	Proper cool	ing methods used: adequate equipment for temp. control				Utensils, Equipmer	nt and Vend	ling	FOR SER	75
34		properly cooked for hot holding	-	47	1	on-food contact surfaces of				\top
35		nawing methods used	\rightarrow	48	 	signed, constructed, & use				1
36		ers provided and accurate		49		ng: installed, maintained, 8		rips		\top
30	Themsomed	Food Identification		- Carrie		Physical Fa			*	70
37	Food proper	rly labeled: priginal container		50	Hot & cold v	water available adequate p				\Box
	1 oda proper	Prevention of Food Contamination		51	Plumbing in	stalled, proper backflow d	evices			\Box
38	Insects rod	ents, & animals not present		52		waste water properly dispo				
39		ion prevented during food preparation, storage & display		53		ies properly constructed, s		aned		
40	Personal cle			54		refuse properly disposed,				
41		ns: properly used & stored	\dashv	55		cilities installed, maintained				\top
42		its & vegetables	$\neg \neg$	56		entilation & lighting, design		sed		
1000		reserved the second of the second	1 N	Simple	A STATE OF				A	EXU.
Тур	e of Operation:						License F	osted:	Ø	N.
Dis	cussion with Per	rson-in-Charge:					Follow-Up	ρ:	Υ	0
							Follow-U	p Date:		
		The state of the s								
Sigi	nature of Persor	n in Charge					Date:			
Sia	nature of Inches	stor. S. C.					Date:	0-11-7	A73	



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



Establishme	ent: Starbuck	s th	: 18197		_	-11-2023		of
Address: 1	of premion	1 01	HIET B	ivd.	Complian	ce Achieved: 10 - L1	-2023	
£ 4,				TEMPERATURE OBSERVATIONS Item / Location	Temp.	Item / Location	No. of the last	Temp.
	Item / Location		Temp.	Hem / Location	remp.	Hem) Location		Temp.
			OB	SERVATIONS AND/OR CORRECTIVE ACT	IONS			17.30
V Item Number	Section of Code			Description of Violation			100	Corrected COS
	-							
		N	o Viol	ations observed duri	ng time	of inspection	on.	
-1								
-							_	
_								
			1	A				
Signature of	Person in Charge:	()	7/0			Date:		
Signature of		52	1			Date: 10	11-202	3



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



Est	ablish	ment: be	sserts by sarah	D	Datel0/6/23 Page 1 of 2. No. of Risk Factor/Intervention View				
Add	iress:	LTVD	sbridge Duill	T	ime in lo	:30	Time out:\\:D	lo. of Repeat Risk Factor/Intervention Violations	
Ow	ner/Pe	ermit Holde	estrage Drive	R	isk Cate	egory:	H	Total Violations	
Em			sweet p. williams	-	hone:			Inspection Status: Green Yellow Red	
-		Type: /	Routine Re-inspection Pre-opera	_		Illnes	ss Investigation	Complaint Other	
11101	COLIO	11урс.	FOODBORNE ILLNESS RISK I						
			Circle designated compliance status (IN, OUT, N/A,	_				in appropriate box for COS and/or R	
			IN = in compliance OUT= not in compliance NO = not	obse	erved N/	\ = not	applicable COS =	corrected on-site R = repeat violation	
Com	aliane	e Status	ic	os	R	Com	pliance Status	COS R	
Com	phane	e Status	Supervision	,03		Com	phance Status	Protection from Contamination	
17	No	UT	Person in charge present, demonstrates knowledge and			15	TINDUT N/A NO	Food separated and protected	
2	do	UT N/A	performs duties Certified Food Protection Manager		\vdash	16	IN OUT N/A	Food-contact surfaces cleaned and sanitized	
<u> </u>	U		Employee Health			17	IN OUT N/A NO	Proper disposition or returned, previously served,	
_	6		Management/food employees & conditional employee;		$\overline{}$			reconditioned & unsafe food	
3	1	UT	knowledge, responsibilities and reporting				-	Time / Temperature Control for Safety	
4		UT	Proper use of restriction and exclusion		\vdash	18	IN OUT N/A	Proper cooking time and temperature	
5	0	01	Procedures for responding to vomiting and diarrheal events	-		19	IN OUT N/A	Proper reheating procedures for hot holding Proper cooling time and temperatures	
6	INO	ON TU	Good Hygiene Practices Proper eating, tasting, drinking, or tobacco use	_		21	IN OUT N/A NO	Proper hot holding temperatures	
7	INO	10	No discharge from eyes, nose, mouth		-	22	IN OUT N/A NO	Proper cold holding temperatures	
	1140		Preventing Contamination by Hands	-	-	23	IN DUT N/A NO	Proper date marking and disposition	
8	INO	JT (O)	Hands clean & properly washed			24	IN OUT MANO	Time as a Public Health Control: procedures and records	
9	_	JT N/A/NO	No bare hand contact with RTE food					Consumer Advisory	
10	INO		Adequate handwashing sinks properly supplied & accessible			25	IN OUT N/A	Consumer advisory provided for raw/undercooked foods	
	$\overline{}$		Approved Source					Highly Susceptible Populations	
11 (I) OI	JT	Food obtained from an approved source			26	IN OUT (N/A)	Pasteurized foods used; prohibited foods not offered	
12							For	od / Color Additives and Toxic Substances	
13	INDI	JT _	Food in good condition, safe & unadulterated			27	IN OUT NA	Food additives: approved and properly used	
14	IN O	ON END L	Req, records available; shell stock tags, parasite destruction			28	MOUT WA	Toxic substances properly identified, stored and used	
	Ri	sk factors a	re improper practices or procedures identified as the mos	ţ			<u> </u>	onformance with Approved Procedures	
	Inte	erventions a	re improper practices or procedures identified as the mos ributing factors of foodborne illness or injury. Public Heal ire control measures to prevent foodborne illness or injury	in /-		19	IN OUT NA	Compliance with variance/specialized process/HACCP	
_			GOO	D R	ETAIL I	PRACT	TICES		
			Good retail practices are preventative measures to	_				and physical objects into foods.	
Mai	¹k " X " ir	n box if num	bered item is not in compliance Mark "X" on appro	opriat	e box for	cos	and/or COS	=corrected on-site during inspection R=repeat violation	
Com	pliance	Status	lc lc	os	R	Com	oliance Status	COS R	
-		Otatao	Safe Food and Water					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: property stored, dried, & handled	
32		Variance ob	tained for specialized processing methods			45	Single-use/s	single-service articles: properly stored & used	
			Food Temperature Control			46	Gloves used		
33			ng methods used: adequate equipment for temp, control					Utensils, Equipment and Vending	
34	\vdash		roperly cooked for hot holding			47		on-food contact surfaces cleanable,	
35	-		awing methods used	_		48		signed, constructed, & used	
36		Thermomete	ers provided and accurate	_		49	Warewashir	ng: installed, maintained, & used: test strips	
37		Enad proper	Food Identification ty labeled: original container	-		50	Hot & cold v	Physical Facilities water available adequate pressure	
37		rood proper	Prevention of Food Contamination	-		51		stalled, proper backflow devices	
38	T	Insects rode	ents, & animals not present			52		vaste water properly disposed	
39			on prevented during food preparation, storage & display			53		es properly constructed, supplied, & cleaned	
40		Personal cle				54	Garbage & I	refuse properly disposed, facilities maintained	
41		Wiping cloth	s: properly used & stored			55		cilities installed, maintained, & clean	
42		Washing fru	its & vegetables			56	Adequate ve	entilation & lighting, designated areas used	
-							311213111	Lieuwer Bentrali (V) M	
	Type of Operation:							License Posted: (Y) N	
Dis	scussion with Person-in-Charge:							Follow-Up: Y (N)	
	, , 1							Follow-Up Date:	
Sig	nature	of Person	in Charges Nauch 11 Juin	19	-			Date:	
_	Signature of Person in Charge: Nawy Wugut								
Sig	nature	of Inspec	tor:					Date: 10 - 6 - 2023	



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



Address: 6	Thow bride	je prive		Compliano	e Achieved: 🔊 - 💪 -	2023	7		
		1			mpliance Achieved: 0 - 6 -7.02.3				
	Trem / Docation	Temp.	TEMPERATURE OBSERVATIONS Item / Location	Temp.	Item / Location		Temp		
		Temp.	nem / Location	Temp.	Item/ Location		Tong		
					1119		-		
							1		
, Item		OBS	SERVATIONS AND/OR CORRECTIVE A			Dated	Corrected		
Number	Section of Code		Description of Violatio	n 			cos		
		No vio	lations obselved a	ITING THE	pection				
				7 3	<i>p</i>				
			11 - 2 - 4 12						
						_			
)	1 0	12:11:0-		Date:				
ignature of Fignature of I	Person in Charge:	& aug	Wight		Date:		-		



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



Est	ablishment: 📭	28100	Date	0/3/23	No. of Risk Factor/Intervention Violation			
		atinental Blud.	Time i	12.00	Time out(:00	No. of Repeat Risk Factor/Intervention Violation	15 CZ	
		er. Pizzico of Herrimack U.C.		Category:		Total Violation	ns Ø	
Em		A 15810 OF WAITMONE OCC	Phone			Inspection Status: Green Yellow Red	7	
_	pection Type:	Routine Re-inspection Pre-opera	itional	lline	ss Investigation			
11101	300001117po.	FOODBORNE ILLNESS RISK I						
		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						
Com	pliance Status	Supervision	OS R	Com	pliance Status	Protection from Contamination	OS R	
	Pilout	Person in charge present, demonstrates knowledge and		15	OUT N/A NO			
1 (0)	HOUT	performs duties		15	~	Food separated and protected		
2	OUT N/A	Certified Food Protection Manager	_	16	(N)OUT N/A	Food-contact surfaces cleaned and sanitized Proper disposition or returned, previously served,		
		Employee Health	-	17	IN OUT N/A NO	reconditioned & unsafe food		
3	OUT	Management/food employees & conditional employee; knowledge, responsibilities and reporting				Time / Temperature Control for Safety		
4	ОООТ	Proper use of restriction and exclusion		18	IN OUT N/A(N)	Proper cooking time and temperature		
5	TUCKI	Procedures for responding to vomiting and diarrheal events		19	IN OUT N/A	Proper reheating procedures for hot holding		
	- A	Good Hygiene Practices		20	IN OUT N/A	Proper cooling time and temperatures	\perp	
6	IN OUT (O)	Proper eating, tasting, drinking, or tobacco use		21	IN OUT N/A NO	Proper hot holding temperatures	\rightarrow	
7	IN OUT (NO)	No discharge from eyes, nose, mouth		22	OUT N/A NO	Proper cold holding temperatures	-	
	6	Preventing Contamination by Hands		23	NOUT N/A NO	Proper date marking and disposition	_	
8	IN OUT NO	Hands clean & properly washed		24	IN OUT WAND	Time as a Public Health Control: procedures and records	\perp	
9	(N)OUT N/A NO	No bare hand contact with RTE food				Consumer Advisory		
10	NOUT	Adequate handwashing sinks properly supplied & accessible		25	INOUT N/A	Consumer advisory provided for raw/undercooked foods		
44	Ооит	Approved Source		26	IN OUT (A)	Highly Susceptible Populations		
11	IN OUT N/A (O)	Food obtained from an approved source Food received at proper temperature	_	26		Pasteurized foods used; prohibited foods not offered od / Color Additives and Toxic Substances		
13	TUOUT	Food in good condition, safe & unadulterated	-	27	IN OUT A	Food additives: approved and properly used		
14	IN OUT NANO	Req. records available: shell stock tags, parasite destruction		28	IN OUT N/A	Toxic substances properly identified, stored and used	-	
				1 20		Conformance with Approved Procedures	1952	
	Prevalent con	re improper practices or procedures identified as the mos ributing factors of foodborne illness or injury. Public Heal are control measures to prevent foodborne illness or injury	ih					
	interventions			19	IN OUT	Compliance with variance/specialized process/HACCP		
			DD RETA				C. Treat	
Ma	rk "X" in box if num	Good retail practices are preventative measures to abered item is not in compliance Mark "X" on appro				s and physical objects into toods. B =corrected on-site during inspection R=repeat violation	ition	
	- E-12							
om	pliance Status	Safe Food and Water	OS R	Com	pliance Status	Proper Use of Utensils	S R	
30	Pasteurized	eggs used where required		43	In-use uten	asits properly stored		
31		from approved source		44		quipment & linens: properly stored, dried, & handled	$\dashv \dashv$	
32		tained for specialized processing methods		45	+	/single-service articles: properly stored & used	$\dashv \dashv$	
	13/15/15/15	Food Temperature Control		46	Gloves use			
33	Proper cool	ing methods used: adequate equipment for temp. control				Utensils, Equipment and Vending	200	
34	Plant food p	roperly cooked for hot holding		47 ·	Food and n	non-food contact surfaces cleanable,		
35	Approved th	awing methods used		48	Properly de	esigned, constructed, & used		
36	Thermomet	ers provided and accurate		49	Warewashi	ng: installed, maintained, & used: test strips		
	1711-1123	Food Identification				Physical Facilities	THE S	
37	Food prope	dy labeled: original container		50	Hot & cold	water available adequate pressure		
		Prevention of Food Contamination		51		nstalled, proper backflow devices	\perp	
38		ents, & animals not present		52		waste water properly disposed	\rightarrow	
39		on prevented during food preparation, storage & display		53	1 - 1	ies properly constructed, supplied, & cleaned	\perp	
40	Personal cle			54	 	refuse properly disposed, facilities maintained	+	
41		is: properly used & stored		55 56		cilities installed, maintained, & clean rentilation & lighting, designated areas used	+	
42	vvasning fru	its & vegetables		1 1 20	Adequate V	ermanon o ngriting, designateu afeas useu		
Tyr	e of Operation:					License Posted:	N	
	cussion with Pe	reon-in-Charge				Follow-Up; Y	(N)	
015	GGGGIGH WILLIFE	oon in onaigo.				Follow-Up Date:	_	
Sig	nature of Persor	n in Charge: Eure Richmond				Date: 10-3- Zoza	5	
Sig	nature of Inspec	etor: Eu S//				Date: 10 - 3 - 20 23		



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



Est	tablishmer	t Pizzico &			3-2023	Page _2_	of <u>Z</u>	
Ad	dress: 🔫	continenta	1 Blud		Compliance	e Achieved: 10 -	3-2023	
Œ,				TEMPERATURE OBSERVAT	IONS			
		Item / Location	Temp.	Item / Location	Temp.	· Item / Locatio	п	Temp.
_								
_								
_								
								-
	1.70		OE	SERVATIONS AND/OR CORRECTIV	VE ACTIONS			
٧	Item Number	Section of Code		Description of Vi	olation			Corrected COS
_								
			No viole	ations observed d	wring time c	* inspectu	on.	
			VC		1.86			
_								
_								
_								
_								
		CE .						
-					<u></u>			
Signature of Person in Charge: Eur Rullmand Date: Signature of Inspector: Date:								
_		erson in Charge:	run The	lmond		Date: 10	-3-2	223
Sig	nature of li	nspector:				Date: Lo	-3-2023	



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



Est	ablishment:	HUES OPPER	Date 0/2	122	Page 1 of _2	No. of Risk Factor/Intervention Violations	00
Add	dress: 76 R	aboosic Lake 12 cad	Time in	00	Time out:	No. of Repeat Risk Factor/Intervention Violations	0
Ow	ner/Permit Holo	der SAO 74	Risk Cate	egory:	O	Total Violations	00
Em		JAC 12	Phone:			Inspection Status: Green Yellow Red	
_	pection Type:	Routine Re-inspection Pre-operat	ional	lilne	ss Investigation	Complaint Other	
IIIS	pection Type.	FOODBORNE ILLNESS RISK F					
		Circle designated compliance status (IN, OUT, N/A,				" in appropriate box for COS and/or R	
		IN = in compliance OUT= not in compliance NO = not					
		IN = In compliance OO I = not in compliance NO - not	observed 14/7	, - 1101	аррисаые 000		
Com	pliance Status	and the second s	OS R	Com	pliance Status	COS	S R
	2	Supervision			1	Protection from Contamination	- 121
1	UN OUT	Person in charge present, demonstrates knowledge and performs duties		15	IN OUT N/A NO	Food separated and protected	
2	TIN OUT N/A	Certified Food Protection Manager		16	IN OUT N/A	Food-contact surfaces cleaned and sanitized	
	0	Employee Health	111	17	TN OUT N/A NO	Proper disposition or returned, previously served, reconditioned & unsafe food	
3	TNOUT	Management/food employees & conditional employee;	A fine beauty	Time / Temperature Control for Safety			
4	TNOUT	knowledge, responsibilities and reporting Proper use of restriction and exclusion	Proper cooking time and temperature	T			
5	TOUT	Procedures for responding to vomiting and diarrheat events		18	IN OUT N/A NO	Proper reheating procedures for hot holding	$\neg \neg$
3	0001	Good Hygiene Practices		20	IN OUT N/A NO		\top
6	IN OUT (N)	Proper eating, tasting, drinking, or tobacco use		21	IN OUT N/A		
7	IN OUT (NO)	No discharge from eyes, nose, mouth		22	IN OUT N/A NO	Proper cold holding temperatures	
	111 001 (10)	Preventing Contamination by Hands		23	TINOUT N/A NO	Proper date marking and disposition	
0	VINOUT NO			24	IN OUT N/A NO	Time as a Public Health Control: procedures and records	\top
8	\sim	Hands clean & properly washed			1 66. (65)	Consumer Advisory	
9	INOUT N/A NO	No bare hand contact with RTE food		25	/ N OUT N/A	Consumer advisory provided for raw/undercooked foods	
10	ТРОИТ	Adequate handwashing sinks properly supplied & accessible Approved Source		25	UN GET TWA	Highly Susceptible Populations	
11	INOUT	Food obtained from an approved source		26	MOUT N/A	Pasteurized foods used; prohibited foods not offered	
11	IN OUT N/A	Food eceived at proper temperature		-		ood / Color Additives and Toxic Substances	
_	TUQUIT	Food in good condition, safe & unadulterated	-	27	IN OUT WA	Food additives: approved and properly used	
13	IN OUT N/ANO	Req. records available: shell stock tags, parasite destruction		28	D OUT N/A	Toxic substances properly identified, stored and used	
14					4	Conformance with Approved Procedures	
	Risk factors : Prevalent cor	are improper practices or procedures identified as the mos tributing factors of foodbome illness or injury. Public Healtl are control measures to prevent foodborne illness or injury	h		0.0000.000		
	Interventions	are control measures to prevent foodborne illness or injury		19	IN OUT TOTAL	Compliance with variance/specialized process/HACCP	Щ
17.65			D RETAIL				11,000
		Good retail practices are preventative measures to					
Ma	rk "X" in box if nur	mbered item is not in compliance Mark "X" on appro	priate box for	COS	and/or COS	S =corrected on-site during inspection R=repeat violati	on
Com	pliance Status	C	OS R	Com	pliance Status	cos	R
		Safe Food and Water				Proper Use of Utensils	No.
30	Pasteurize	d eggs used where required		43	In-use uter	nsils properly stored	\perp
31	Water & Ic	e from approved source		44	Utensils, e	quipment & linens: properly stored, dried, & handled	\perp
32	Variance o	btained for specialized processing methods		45	Single-use	e/single-service articles: properly stored & used	\perp
		Food Temperature Control		46	Gloves use	ed property	
33	Proper coo	oling methods used: adequate equipment for temp, control		die.		Utensils, Equipment and Vending	
34	Plant food	properly cooked for hot holding		47		non-food contact surfaces cleanable,	+
35	Approved t	thawing methods used		48		esigned, constructed, & used	+
36	Thermome	eters provided and accurate		49	Warewash	ing: installed, maintained, & used: test strips	\perp
CII		Food Identification	- Y-VU)=		unei,	Physical Facilities	
37	Food prope	erly labeled: original container		50		water available adequate pressure	+
		Prevention of Food Contamination	11,535	51		nstalled, proper backflow devices	+
38		dents, & animals not present		52		waste water properly disposed	+
39		tion prevented during food preparation, storage & display	\perp	53		ities properly constructed, supplied, & cleaned	+
40	Personal c			54		a refuse properly disposed, facilities maintained	+
41	Wiping dot	ths: properly used & stored		55		cilities installed, maintained, & clean	+
42	Washing fr	uits & vegetables		56	Adequate	ventilation & lighting, designated areas used	Territoria.
Tv	pe of Operation:			supplied?		License Posted:	N
				-		Follow-Up: Y	N
Dis	scussion with Pe	erson-in-Charge:					
		, , , , , , , , , , , , , , , , , , , ,				Follow-Up Date:	
Sic	nature of Perso	on in Charge: Gard Go				Date: 10.7=102-3	
_						Date: 10 2-1023 Date: 10-2-2023	
Sig	nature of Inspe	ctor:				Date: 10-2-1023	



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



Es	tablishmer	I JHUES	OPPE	R		Date: 10	7-2-2025	Page _ 2 (of <u>Z</u>
Ad	dress: 7 🚣	Babbosi	cla	100 100	20	Complian	ce Achieved: 10-2-	2023	•
111			F	13	TEMPERATURE OBSERVATIONS			- LI W. L.	
		Item / Location		Temp.	Item / Location	Temp.	Item / Location		Temp.
	- New York	ELECTRIC CONTRACTOR	The said	OB	SERVATIONS AND/OR CORRECTIVE A	CTIONS			SZD By
	Itom			. 00			- Cue	Dated	Corrected
٧	Item Number	Section of Code			Description of Violation	on			cos
								_	
_								-	
			A.L.		10001	,			
			DT.	X 10VC	ntions observed				
_									
						.4			
							140		
<u>.</u>			1-	01	<u> </u>	- ii	Data: 10	.7.200	2
_		erson in Charge:	Qa	ug 9	¥ -		Date: 10	2 000	-
Sig	nature of h	nspector:	n	//	J		Date: 10 -	L-702	5



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



Establishment: THUES	Date	2623	Page 1 of Z	No. of Risk Factor/Inte	rvention Viola	tions	Ø
Address: 7 school street	Time in	(,œ)	Time out:	No. of Repeat Risk Factor/Inte	ervention Viola	tions	Ø
Owner/Permit Holder: 540 76	Risk Cat	legory:	0		Total Viola	tions	5
Email:	Phone:			Inspection Status: Green	Yellow R	ed	
Inspection Type: Routine Re-inspection Pre-operati	onal	Illnes	s Investigation	Complaint Other	r		
FOODBORNE ILLNESS RISK FA				NTERVENTIONS			
Circle designated compliance status (IN, OUT, N/A, N				in appropriate box for COS and/or R		400-	
IN = in compliance OUT= not in compliance NO = not of	bserved N	/A = not	applicable COS =	corrected on-site R = repeat violation	n		
Compliance Status CC	SR	Comp	liance Status	NO. T. P. SERVICE STATE OF THE SECOND		cos	R
Supervision	in the			Protection from Contamination	4		. 8
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	\neg	16	IN OUT N/A	Food-contact surfaces cleaned and san	itized		
Employee Health		17	IN OUT NAMO	Proper disposition or returned, previous reconditioned & unsafe food	ly served,		
Management food employees & conditional employee:		THE RE	17 × 12 10 10 11 11	Time / Temperature Control for Sa	ıfetv	LOWE.	
3 IN OUT knowledge, responsibilities and reporting	+	18	IN OUT N/A(NO)	Proper cooking time and temperature			
4 INOUT Proper use of restriction and exclusion 5 INOUT Procedures for responding to vomiting and diarrheal events	-	19	IN OUT N/ANO	Proper reheating procedures for hot hol	ding		Н
5 (IN)OUT Procedures for responding to vomiting and diarrheal events Good Hygiene Practices	100	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/ANO	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	1811-01	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: proceed	dures and records		
9 (I) OUT N/A NO No bare hand contact with RTE food				Consumer Advisory			` `
10 NOUT Adequate handwashing sinks properly supplied & accessible		25 (A/N TUO(NI	Consumer advisory provided for raw/un			
Approved Source			C S OUT WA	Highly Susceptible Population		_	
11 INOUT Food obtained from an approved source		26 (II) OUT N/A	Pasteurized foods used; prohibited food od / Color Additives and Toxic Sub-			
12 IN OUT N/ NO Food received at proper temperature		27	IN OUT NA	Food additives: approved and properly			
13 IN OUT Food in good condition, safe & unadulterated 14 IN OUTNANO Req. records available: shell stock tags, parasite destruction	+	28	IN OUT N/A	Toxic substances properly identified, sto			
				Conformance with Approved Proce	THE ROYAL STATE OF THE PARTY OF	12.4	
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.		19	IN OUT NA	Compliance with variance/specialized pr			
	RETAIL	PRACT	ICES			1,70	
Good retail practices are preventative measures to co	ontrol the add	lition of pa	thogens, chemicals,	and physical objects into foods.			
Mark "X" in box if numbered item is not in compliance Mark "X" on approp	riate box fo	or COS a	nd/or COS	=corrected on-site during inspection	n R=repeat	violation	
Compliance Status CO	S R	Comp	liance Status		38	cos	R
Safe Food and Water				Proper Use of Utensils		-S-20/II	
30 Pasteurized eggs used where required		43		sils properly stored	L1_1		\vdash
31 Water & Ice from approved source		44		uipment & linens: properly stored, dried, & single-service articles: properly stored & us			H
32 Variance obtained for specialized processing methods	7.00	46	Gloves use		500		Н
Food Temperature Control 33 Proper cooling methods used: adequate equipment for temp. control		40	City cards	Utensils, Equipment and Vendir	g - I	3,20	- 86
33 Proper cooling methods used: adequate equipment for temp. control 34 Plant food properly cooked for hot holding		47	Food and n	on-food contact surfaces cleanable,	9		
35 Approved thawing methods used		48	Properly de	signed, constructed, & used			
36 Thermometers provided and accurate		49	Warewashi	ng: installed, maintained, & used: test strip	s		
Food Identification				Physical Facilities			
37 Food properly labeled: original container		50		water available adequate pressure			Щ
Prevention of Food Contamination		51		stalled, proper backflow devices			\vdash
38 Insects, rodents, & animals not present		52		waste water properly disposed			
39 Contamination prevented during food preparation, storage & display		53		ies properly constructed, supplied, & clean refuse properly disposed, facilities maintai			\vdash
40 Personal cleanliness		54 55		cilities installed, maintained, & clean	rieu		
41 Wiping cloths: properly used & stored 42 Washing fruits & vegetables		56		entilation & lighting, designated areas use	d		
to the content of the executive years and a few or the last the		1111		License Po	osted:	(Y)	N
Type of Operation:				Follow-Up:		\sim	N)
Discussion with Person-in-Charge:				Follow-Up			ノ
Signature of Person in Charge:				Date:	10-2-2	023	3
Signature of Inspector:					- 2 - 20		\exists



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



Establishme	nt: JMUES			Date: VO	-2-2023	Page	of _Z
Address: 7	school stre	et	Complian	ce Achieved: (0 - 7	-1073		
ş.,g			TEMPERATURE OBSERVATION	•			
	Item / Location	Temp.	Item / Location	Темр.	Item / Location		Temp.
							+
							-
							<u> </u>
		OB	SERVATIONS AND/OR CORRECTIVE A	ACTIONS			1
V Item Number	Section of Code		Description of Violati	on			Corrected COS
Rumber							
-						_	
		100 12:01	ations observed) -			
				_=		-	
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+							
		10 10	V				
		andle			Date: 10 -	1100	13
ignature of I	nspector:				Date: 10 -	2-202	3



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



Est	ablishme	nt: Ne	rimack Hiddle school		Date[0	12/23	Page 1 of 2	No. of Risk Factor/Intervention Violations	Ø
_			deline Bennett Lane		Time in	9:00	Time out:	No. of Repeat Risk Factor/Intervention Violations	0
			FI SAO # 26		Risk Ca	tegory?		Total Violations	60
Em			3FC # C6		Phone:			Inspection Status: Green Yellow Red	
_	pection Ty	vna.	Routine Re-inspection Pre-ope	ratio	nal	Illnes	ss Investigation	Complaint Other	
11.121	bechon 1	ype.	FOODBORNE ILLNESS RISK						0.2
- 1-			Circle designated compliance status (IN, OUT, N//					" in appropriate box for COS and/or R	
			IN = in compliance OUT= not in compliance NO = n				applicable COS	= corrected on-site R = repeat violation	
		34,11,11	ELDROSINA STANDARDA AND AND AND AND AND AND AND AND AND A	COS	- 7000	3350	pliance Status	Icos	R
Com	pliance St	tatus	Supervision	00.		Oom	T Catalog	Protection from Contamination	
1	OUT		Person in charge present, demonstrates knowledge and	Γ		15	IN OUT N/A NO	Food separated and protected	
2	NOUT	N/Δ	performs duties Certified Food Protection Manager	-	+	16	N OUT N/A	Food-contact surfaces cleaned and sanitized	
_	00011		Employee Health			17	IN OUT NA NO	Proper disposition or returned, previously served,	
			Management/food employees & conditional employee;			17/11/2		reconditioned & unsafe food Time / Temperature Control for Safety	26
3	UN OUT		knowledge, responsibilities and reporting			10	IN OUT N/A NO	Proper cooking time and temperature	_
4	INOUT		Proper use of restriction and exclusion	-	+	18	IN OUT N/A NO	Proper cooking time and temperature Proper reheating procedures for hot holding	-
5	INDOUT	119-9-00-0	Procedures for responding to vomiting and diarrheal events Good Hygiene Practices	13		20	IN OUT N/A NO		
6	IN OUT	(10)	Proper eating, tasting, drinking, or tobacco use			21	IN OUT N/A NO	/	
7	IN OUT	(A)	No discharge from eyes, nose, mouth			22	ON AVA TUO	Proper cold holding temperatures	
			Preventing Contamination by Hands			23	IN OUT N/A NO	Proper date marking and disposition	
8	ОООТ	ИО	Hands clean & properly washed			24	IN OUT NO	Time as a Public Health Control: procedures and records	
9	(MOUT N	N/A NO	No bare hand contact with RTE food			HONT		Consumer Advisory	
10	(IN)OUT		Adequate handwashing sinks properly supplied & accessible			25	N/A TUO'NI	Consumer advisory provided for rawlundercooked foods	
7			Approved Source			17-18	>	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	TUO NT	(OO) AND	Food received at proper temperature	_	_	150		ood / Color Additives and Toxic Substances	
13	MOUT	~	Food in good condition, safe & unadulterated		-	27	IN OUT WA	Food additives; approved and properly used	+
14	IN OUT		Req. records available: shell stock tags, parasite destruction	_	\perp	28	OUT N/A	Toxic substances properly identified, stored and used Conformance with Approved Procedures	Fax. II
	Risk f Preval	factors and lent control	re improper practices or procedures identified as the m ributing factors of foodborne illness or injury. Public He are control measures to prevent foodborne illness or inju	ost alth	- 1			Comormance with Approved Procesures	T
	Interve	entions a	re control measures to prevent foodborne illness or inju	ury.		19	IN OUT	Compliance with variance/specialized process/HACCP	\perp
IN.		W.H.			RETAII				Section,
	1 (0.40 1 1	,	Good retail practices are preventative measures bered item is not in compliance Mark "X" on app					s, and physical objects into foods. S =corrected on-site during inspection R=repeat violation	n
Ma	rk "X" in bo	ox if num	bered item is not in compliance Mark "X" on app	propi	Iale DOX I	01 003 8	androi 00	A CONTRACTOR OF THE SECTION OF THE S	
Com	pliance St	tatus		COS	R	Comp	oliance Status	COS	R
			Safe Food and Water			43	I In use ute	Proper Use of Utensils	1
30			eggs used where required	-	-	44		equipment & linens: properly stored, dried, & handled	
31	_		from approved source tained for specialized processing methods		+	45		e/single-service articles: property stored & used	
32	l l	anarice ob	Food Temperature Control		7.61111	46		ed properly	
33	Pro	oper cooli	ng methods used: adequate equipment for temp. control			45.0	A FORES	Utensils, Equipment and Vending	
34		<u> </u>	roperly cooked for hot holding			47	Food and	non-food contact surfaces cleanable,	
35			awing methods used			48	Properly of	lesigned, constructed, & used	
36			ers provided and accurate			49	Warewas	ning: installed, maintained, & used: test strips	
Ì		N - I	Food Identification		(ALE	TE .	*pr''		
37	Fo	od proper	ly labeled: original container			50	+	s water available adequate pressure	+
. 50	100		Prevention of Food Contamination			51	-	installed, proper backflow devices	+
38			ents, & animals not present		+	52		waste water properly disposed	+
39			on prevented during food preparation, storage & display	_		53 54		lities properly constructed, supplied, & cleaned 4 refuse properly disposed, facilities maintained	+
40	_	ersonal de		_	\rightarrow	55		acilities installed, maintained, & clean	+
41			s: properly used & stored its & vegetables			56		ventilation & lighting, designated areas used	
	Superen	Ribbin		15.					3
Ту	oe of Ope	eration:						License Posted:	-
Dis	cussion v	with Per	rson-in-Charge:					Follow-Up: Y(Ŋ
								Follow-Up Date:	_
C:-	notive -f	Demail	in Charge: On - 1 (D)					Date: 10-2-2023	,
_			in Charge: Qued (1)	_				Potos to a series	
Sig	nature of	f Inspec	tor: July / MC					Date: (0 - 2 - 2023	



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



Establishm	ent: Merrimac	ic Middle	school		-2-2025 Pag	
Address: -		e Bennett	bere	Compliance	Achieved: 10 - 2 - 2	023
			TEMPERATURE OBSERVATIO			T
	Item / Location	Temp.	Item / Location	Temp.	Item / Location	Temp.
111000000				1.00000		
l line		1/1 V	SERVATIONS AND/OR CORRECTIVE			Dated Corrected
V Item Numbe	Section of Code		Description of Viola	ation		or COS
		NA WAT	BEROSTONS VIOLO	t and place	(Oct =	
		100 20	15E10- 410-451 0100	TECH COSE	1000	
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		,				
Signature of	Person in Charge:	Loud a			Date: 10-2	2013
Signature of		12	7		Date: 10-2-	1025



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



Esta	ablishment:	errimack Highschool	Date:10	12/23	Page 1 of _2_	No. of Risk Factor/Intervention Viola	tions ¿	×
		CELWain street	Time in	4	Time out:	No. of Repeat Risk Factor/Intervention Viola	tions	0
		er sau zu	Risk Ca	tegory?	<u> </u>	Total Viola	tions	Ø
Ema		SAG CG	Phone:			Inspection Status: Green Yellow Re	ed	
	ection Type:	Routine Re-inspection Pre-operation	onal	Illnes	s Investigation	Complaint Other		
пар	ection Type.	FOODBORNE ILLNESS RISK FA				NTERVENTIONS		0.0
Centre		Circle designated compliance status (IN, OUT, N/A, N	O) for eac	h item	Mark "X"	in appropriate box for COS and/or R		
		IN = in compliance OUT= not in compliance NO = not of	bserved N	I/A = not	applicable COS =	corrected on-site R = repeat violation		
Comi	oliance Status	lcc	SR	Comp	liance Status		cos	R
COILL		Supervision	A DEC			Protection from Contamination		
1 (IN OUT	Person in charge present, demonstrates knowledge and performs duties		15/	ON AVA TUO	Food separated and protected		
2	IN OUT N/A	Certified Food Protection Manager		16	OUT N/A	Food-contact surfaces cleaned and sanitized		
		Employee Health		17	TN OUT NIA NO	Proper disposition or returned, previously served, reconditioned & unsafe food		
3	PINOUT	Management/food employees & conditional employee;				Time / Temperature Control for Safety	3	
4	TROUT	knowledge, responsibilities and reporting Proper use of restriction and exclusion	-	18	IN OUT N/A NO	Proper cooking time and temperature		
5	INDUT	Procedures for responding to vomiting and diarrheal events		19	IN OUT N/A NO	Proper reheating procedures for hot holding		
F1(3)		Good Hygiene Practices	Tall of	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/ANO	Proper hot holding temperatures		
7 IN OUT (D) No discharge from eyes, nose, mouth				22	NOUT N/A NO	Proper cold holding temperatures		
	9	Preventing Contamination by Hands		23	NOUT N/A NO	Proper date marking and disposition	-	Н
8 NOUT NO Hands clean & properly washed				24	IN OUT N/A NO	Time as a Public Health Control: procedures and records		Ц
9	OUT N/A NO	No bare hand contact with RTE food	\perp		<u> </u>	Consumer Advisory	_	
10	MOUT	Adequate handwashing sinks properly supplied & accessible		25	ON OUT N/A	Consumer advisory provided for raw/undercooked foods Highly Susceptible Populations	-	H
	200	Approved Source	-	26	INOUT N/A	Pasteurized foods used; prohibited foods not offered		
11	IN OUT N/ANO	Food obtained from an approved source Food received at proper temperature		20		od / Color Additives and Toxic Substances		
12	IN OUT MAINU	Food in good condition, safe & unadulterated		27	IN OUT NA	Food additives: approved and properly used		
14	ON AND THE MI	Reg. records available: shell stock tags, parasite destruction	\neg	28	NOUT N/A	Toxic substances properly identified, stored and used		
						Conformance with Approved Procedures		
	Prevalent confinterventions	are improper practices or procedures identified as the most tributing factors of foodborne illness or injury. Public Health are control measures to prevent foodborne illness or injury.		19	IN OUT NA	Compliance with variance/specialized process/HACCP		
1	S. All Children		RETAIL	PRACT	TCES			
		Good retail practices are preventative measures to co						
Маг	k "X" in box if num	nbered item is not in compliance Mark "X" on approp	oriate box f	or COS a	and/or COS	s =corrected on-site during inspection R=repeat	lolation	
Comp	oliance Status	co	S R	Comp	liance Status		cos	R
	92-89-5-39	Safe Food and Water	1			Proper Use of Utensils		BD
30		d eggs used where required		43		sils properly stored		Н
31		from approved source		44		quipment & linens; properly stored, dried, & handled /single-service articles; properly stored & used	_	
32	THE RESERVE OF THE PARTY OF THE	otained for specialized processing methods Food Temperature Control	15 - 10 - 10 - 10	46	Gloves use			
33		ing methods used: adequate equipment for temp. control	T			Utensils, Equipment and Vending		*6.
34		properly cooked for hot holding		47		ion-food contact surfaces cleanable,		
35		nawing methods used		48	Properly de	signed, constructed, & used		
36	Thermomet	ers provided and accurate		49	Warewashi	ng: installed, maintained, & used: test strips		
577		Food Identification				Physical Facilities		
37	Food prope	rly labeled; original container		50		water available adequate pressure		Н
		Prevention of Food Contamination	9	51		estalled, proper backflow devices		\vdash
38		ents, & animals not present		52		waste water properly disposed ies properly constructed, supplied, & cleaned		
39		ion prevented during food preparation, storage & display		54		refuse properly disposed, facilities maintained		
40	Personal de	eanliness ns: properly used & stored	-	55		cilities installed, maintained, & clean		
41		uits & vegetables		56		rentilation & lighting, designated areas used		
			The section of the se	nd se	4.	License Posted:	37	N
_	e of Operation:						J	-
Disc	cussion with Pe	rson-in-Charge:				Follow-Up: Follow-Up Date:		7
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Sign	nature of Persor	n in Charge: Oacl				Date: 10-2-202	2	_
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



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_		erson in Charge:	Caral			Date: /C	1-2-1023	2
Sigr	nature of In	spector:	, (-			Date: 16	2-202	3



Signature of Person in Charge:

Signature of Inspector:

MERRIMACK FIRE DEPARTMENT

HEALTH DIVISION 432 Daniel Webster Highway

Merrimack NH, 03054 (603) 470-1730



Date:

Date: LD

FOOD ESTABLISHMENT INSPECTION REPORT Dat 7 (2/12 Page 1 of 2 No. of Risk Factor/Intervention Violations Establishment: Reeds Ferry School No. of Repeat Risk Factor/Intervention Violations Address: 15 Lyons pool Owner/Permit Holder: SAD 24 Risk Category: Total Violations Green Yellow Red Phone: Inspection Status; Email: Other Pre-operational Illness Investigation Complaint Routine Re-inspection Inspection Type: FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS Mark "X" in appropriate box for COS and/or R Circle designated compliance status (IN, OUT, N/A, NO) for each item IN = in compliance OUT= not in compliance NO = not observed N/A = not applicable COS = corrected on-site R = repeat violation COS R Compliance Status COS R Compliance Status Protection from Contamination Supervision Person in charge present, demonstrates knowledge and N OUT N/A NO NOUT Food separated and protected performs duties N OUT NA 16 Food-contact surfaces cleaned and sanitized IN DUT N/A Certified Food Protection Manager Proper disposition or returned, previously served, IN OUT NA NO 17 **Employee Health** reconditioned & unsafe food Management/food employees & conditional employee; Time / Temperature Control for Safety IN PUT 3 knowledge, responsibilities and reporting IN OUT NIA NO Proper cooking time and temperature TUO NI Proper use of restriction and exclusion 18 IN OUT N/A NO Proper reheating procedures for hot holding 19 (M)OUT Procedures for responding to vomiting and diarrheal events IN OUT NA NO 20 Proper cooling time and temperatures **Good Hygiene Practices** IN OUT NA NO 21 Proper hot holding temperatures Proper eating, tasting, drinking, or tobacco use IN OUT 6 22 ON AN TUO Proper cold holding temperatures 7 IN OUT No discharge from eyes, nose, mouth IN OUT N/A NO Preventing Contamination by Hands 23 Proper date marking and disposition IN OUT NA NO Time as a Public Health Control: procedures and records 24 INOUT 8 NO Hands clean & properly washed Consumer Advisory IN OUT N/A NO No bare hand contact with RTE food IN OUT N/A Consumer advisory provided for raw/undercooked foods 25 MOUT Adequate handwashing sinks property supplied & accessible 10 Highly Susceptible Populations Approved Source OUT N/A 26 Pasteurized foods used; prohibited foods not offered MOUT Food obtained from an approved source 11 Food / Color Additives and Toxic Substances IN OUT N/A NO Food received at proper temperature 12 27 IN OUT WA Food additives: approved and properly used (IN)OUT Food in good condition, safe & unadulterated 13 IN DUT N/A Toxic substances properly identified, stored and used Req. records available: shell stock tags, parasite destruction 28 14 IN OUT N/A NO 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 Compliance with variance/specialized process/HACCP IN OUT N/A 19 **GOOD RETAIL PRACTICES** Good retail practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods. COS =corrected on-site during inspection R=repeat violation Mark "X" on appropriate box for COS and/or Mark "X" in box if numbered item is not in compliance COS R Compliance Status COS R Compliance Status Proper Use of Utensils Safe Food and Water 43 In-use utensils properly stored 30 Pasteurized eggs used where required Utensils, equipment & linens: properly stored, dried, & handled 44 31 Water & Ice from approved source 45 Single-use/single-service articles: properly stored & used 32 Variance obtained for specialized processing methods 46 Gloves used properly Food Temperature Control Utensils, Equipment and Vending 33 Proper cooling methods used: adequate equipment for temp. control 47 Food and non-food contact surfaces cleanable 34 Plant food properly cooked for hot holding 48 Properly designed, constructed, & used 35 Approved thawing methods used Warewashing: installed, maintained, & used: test strips 49 36 Thermometers provided and accurate Physical Facilities Food Identification 50 Hot & cold water available adequate pressure 37 Food properly labeled: original container 51 Plumbing installed, proper backflow devices Prevention of Food Contamination 52 Sewage & waste water properly disposed 38 Insects, rodents, & animals not present Contamination prevented during food preparation, storage & display 53 Toilet facilities properly constructed, supplied, & cleaned 39 Garbage & refuse properly disposed, facilities maintained 54 40 55 Physical facilities installed, maintained, & clean 41 Wiping cloths: properly used & stored Adequate ventilation & lighting, designated areas used 56 42 Washing fruits & vegetables License Posted: Type of Operation: Follow-Up: Discussion with Person-in-Charge: Follow-Up Date:



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



Es	tablishmen	t: Reed s	Ferry				Date:	0-2-2023	Page Z	of
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HEALTH DIVISION 432 Daniel Webster Highway Merrimack NH, 03054 (603) 420-1730



Estal	blishment: TV	printops Ferry scho	00(Date O(U2	31	age 1 of	NO. OT RISK	Factor/intervention v	ioladons	V
Addr	ess:(34	printops Ferry SCNC Camp sougent Roa	d	Time in:00	T	ime out:	No. of Repeat Risk	Factor/Intervention V	'iolations	Ø
Owne	er/Permit Hold	ERSAU ZO		Risk Category	/: ()		Total V	iolations /	Ø
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					JDI		in appropriate box for C	2. 4.		
		Circle designated compliance statu								_
		IN = in compliance OUT= not in com	ipliance NO = not of	oserved N/A = no	ога	pplicable COS =	corrected orr-site K = 1	speat violation		
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		Supervision			1		Protection from Co			_
1	TUQUT	Person in charge present, demonstrates kno performs duties	wiedge and	15		ON AN TUO	Food separated and prot	ected		
2	OUT N/A	Certified Food Protection Manager		16	Y	TN OUT N/A	Food-contact surfaces cl			-
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3	MOUT	Management/food employees & conditional	employee;			0	Time / Temperature C	ontrol for Safety	*	
	IN DUT	knowledge, responsibilities and reporting Proper use of restriction and exclusion		18	Т	IN OUT N/A NO	Proper cooking time and	temperature		\top
5	(IN) DUT	Procedures for responding to vomiting and d	liarrheal events	19		IN OUT N/A(NO)	Proper reheating proced	ures for hot holding		
		Good Hygiene Practices		20		IN OUT N/A NO	Proper cooling time and	temperatures		
6	IN OUT TO	Proper eating, tasting, drinking, or tobacco u	se	21		IN OUT N/A(NO)	Proper hot holding temper	eratures		
7	IN OUT	No discharge from eyes, nose, mouth		22		IN OUT N/A NO	Proper cold holding temp	peratures		
		Preventing Contamination by Hand	ds	23	-	IN OUT N/A NO	Proper date marking and	disposition		
8	ON TUO	Hands clean & properly washed		24		IN OUT NAMO	Time as a Public Health	Control: procedures and reco	ords	
9	IN OUT N/A NO	No bare hand contact with RTE food					Consumer A	dvisory.		
10	TOUT	Adequate handwashing sinks property suppli	ed & accessible	25	(IN OUT N/A	Consumer advisory prov	ided for raw/undercooked for	ods	
	9	Approved Source			15	-	Highly Susceptible		1150.5	3.7
11	W UT	Food obtained from an approved source		26	_	IN DUT N/A		prohibited foods not offered		
12	IN OUT N/ANO	Food received at proper temperature			-	-	d / Color Additives an			
13	TUC(N	Food in good condition, safe & unadulterated		27	1	IN OUT N/A	Food additives: approved			-
14	IN OUT NO NO	Req. records available: shelf stock tags, para		28	_(IN OUT N/A	The second secon	ly identified, stored and used	25/20/016	- 1
	Risk factors	re improper practices or procedures ide tributing factors of foodborne illness or in are control measures to prevent foodbor	ntified as the most	E In	-		onformance with App			1 .5
	Interventions	are control measures to prevent foodbor	ne illness or injury.	19		IN OUT NA	Compliance with variance	e/specialized process/HACCI	Р	
			COOD	RETAIL PRAC	CTI	CES		MASTER STORY		#200
		Good retail practices are preve								
Mark	"X" in box if nun	bered item is not in compliance	Mark "X" on appropr	iate box for COS	3 ar	nd/or COS	=corrected on-site duri	ng inspection R=rep	eat violatio	חג
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	1230	Safe Food and Water		E 188			Proper Use of	Utensils		
30	Pasteurized	eggs used where required		43	4		sils properly stored		_	+
31	Water & Ice	from approved source		44			uipment & linens: properly		_	+
32		tained for specialized processing methods		45	4		single-service articles: prop	erly stored & used		+
90.00		Food Temperature Control		46		Gloves used		7.5 pv. 136.03 %	CHE COL	1
33		ing methods used: adequate equipment for ten	np. control		7			t and Vending		1,3,1
34		properly cooked for hot holding		47	+		on-food contact surfaces of signed, constructed, & used			+
35		nawing methods used		48	+		ng: installed, maintained, &			1
36		ers provided and accurate Food Identification		13	-	Walewasili			revitin	SEE SE
37		rood identification		50	Т	Hot & cold w	vater available adequate pr			
31	Food prope	Prevention of Food Contamination		51	+		stalled, proper backflow de			
38	Insects roo	ents, & animals not present		52	7	Sewage & w	vaste water properly dispos	ed		
39		ion prevented during food preparation, storage	& display	53	7	Toilet facilitie	es properly constructed, su	pplied, & cleaned		
40	Personal ci			54	1	Garbage & r	refuse properly disposed, fa	acilities maintained		
41		ns: properly used & stored		55		Physical fac	ilities installed, maintained,	& clean		
42		its & vegetables		56		Adequate ve	entilation & lighting, designa	ated areas used		
	Carried Street		. Res.		01		" \ . ' . ' . ' \ ' . ' . ' . ' . ' . ' .	Linguago Dastado	(Y)	N
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								Follow-Up Date:		$\overline{}$
		ha 6 1/1						Date: 10-2-26	972	\neg
Sign	ature of Perso	n in Charge: Ward (<u></u>					1.56		
Sian	ature of Insper	ctor: San S	X					Date: 10 -2 - 2	223	



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



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