ORM 734A

DOD ESTABLISHMENT INSPECTION REPORT

Town of Scituate / Board of Health 600 Chief Justice Cushing Highway Scituate, Massachusetts 02066

Vame Cushinci Elementary	Date / D	Type of Operation(s) Food Service	Type of Inspection Routine
Address I Aberdean DR	Risk	Retail	Re-inspection
Felephone SS 9170	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner TOWN	HACCP Y/N	☐ Pre-operation ☐ Suspect Illness	
Person in Charge (PIC) John & O Connor	Time	Caterer Bed & Breakfast	General Complaint HACCP
nspector J W world	In: Out:	Permit No.	Other
ach violation checked requires an explanation on the narr		and a citation of specific	provision(s) violated.
Jiolations Related to Foodborne Illness Interventions and Jiolations marked may pose an imminent health hazard and reaction as determined by the Board of Health.		Anti-Choke corrective Tobacco	n-compliance with: sing 590.009 (E)  590.009 (F)  Awareness 590.009 (G)
OOD PROTECTION MANAGEMENT  1. PIC Assigned / Knowledgeable / Duties	1000000	ntion of Contamination from	Hands
MPLOYEE HEALTH		wash Facilities	-
☐ 2. Reporting of Diseases by Food Employee and PIC	(2011年) [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	FROM CHEMICALS	
☐ 3. Personnel with Infections Restricted/Excluded	☐ 14. Appro ☐ 15. Toxic	ved Food or Color Additives	
FOOD FROM APPROVED SOURCE	and Markey or a management	Chemicals RATURE CONTROLS (Potentia	Ily Hazardous Foods)
4. Food and Water from Approved Source	等等的 Manager (1995)	ng Temperatures	
5. Receiving/Condition HOIV	☐ 17. Rehea		Tomosil
<ul><li>☐ 6. Tags/Records/Accuracy of Ingredient Statements</li><li>☐ 7. Conformance with Approved Procedures/HACCP Plans</li></ul>	☐ 18. Coolin	ig Water	is Tampse
PROTECTION FROM CONTAMINATION	19. Hot ar	nd Cold Holding	
☐ 8. Separation/ Segregation/ Protection		As a Public Health Control	
☐ 9. Food Contact Surfaces Cleaning and Sanitizing	REQUIREMEN	ITS FOR HIGHLY SUSCEPTIBE and Food Preparation for HS	LE POPULATIONS (HSP)
10. Proper Adequate Handwashing			/
☐ 11. Good Hygienic Practices	22. Postir	ADVISORY  ng of Consumer Advisories	
iolations Related to Good Retail Practices (Blue Items)		ig of consumer nations	
ritical (C) violations marked must be corrected nmediately or within 10 days as determined by the Board Health. Non-critical (N) violations must be corrected nmediately or within 90 days as determined by the Board Health.  23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other	To Foodboand Risk F Official Or today, the i 590.000/fec by a Board order of the cited in this the food es establishme have a righ and submit within 10 da	F Violated Provisions Reference Illnesses Intervention Factors (Red Items 1-22) der for Correction: Based tems checked indicate violated Food Code. This report fealth member or its at a Board of Health. Failured report may result in suspitablishment permit and celent operations. If aggrieved to a hearing. Your requested to the Board of Health ays of receipt of this order E-INSPECTION:	d on an inspection olations of 105 CMR oort, when signed below agent constitutes an to correct violations pension or revocation of essation of food ed by this order, you get must be in writing at the above address
Inspector's Signature: Print:	1/	Auxono	' . 1
PIC's Signature: Print:	5/1	ET Changok	Page t of Pages

### **Massachusetts Department of Public Health**

**Division of Food and Drugs** 

FOOD ESTABLISHMENT INSPECTION REPORT

		26		
Name  Cushine Elementary  Address  Telephone  Owner  Person in Charge (PIC)  Inspector  Each violation checked requires an explanation on the company  Violations Related to Foodborne Illness Intervention  Violations marked may pose an imminent health hazarra action as determined by the Board of Health.	the narra	Risk Factors	No. Anti-Chok e corrective Tobacco Allergen	n-compliance with: sing 590.009 (E) 590.009 (F) 590.009 (F) Awareness 590.009 (G)
FOOD PROTECTION MANAGEMENT  1. PIC Assigned / Knowledgeable / Duties  EMPLOYEE HEALTH		13. Handv	ntion of Contamination from vash Facilities	DG LOG- Hands
☐ 2. Reporting of Diseases by Food Employee and PIC☐ 3. Personnel with Infections Restricted/Excluded			FROM CHEMICALS  ved Food or Color Additives  Chemicals	L
4. Food and Water from Approved Source   5. Receiving/Condition     6. Tags/Records/Accuracy of Ingredient Statements   7. Conformance with Approved Presedues (ILACOR Florence)		TIME/TEMPER	TATURE CONTROLS (Potential ing Temperatures of the control of the	lly Hazardous Foods)
7. Conformance with Approved Procedures/HACCP Plan PROTECTION FROM CONTAMINATION  8. Separation/ Segregation/ Protection	is L	☐ 19. Hot an	d Cold Holding  As a Public Health Control  TS FOR HIGHLY SUSCEPTIBL	E POPIJI ATIONS (HSD)
<ul> <li>9. Food Contact Surfaces Cleaning and Sanitizing</li> <li>10. Proper Adequate Handwashing</li> <li>11. Good Hygienic Practices</li> </ul>		21. Food	and Food Preparation for HS  DVISORY  g of Consumer Advisories	
Violations Related to Good Retail Practices (Blue Iter Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Boar of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Boar of Health.  23. Management and Personnel (FC-2)(590.003 24. Food and Food Protection (FC-3)(590.004 25. Equipment and Utensils (FC-4)(590.005 26. Water, Plumbing and Waste (FC-5)(590.006 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008 29. Special Requirements (590.009 30. Other	rd 8) ) ) ) ) )	Number of To Foodbo and Risk F	Violated Provisions Reference Illnesses Interventionactors (Red Items 1-22): Iter for Correction: Base ems checked indicate violeral Food Code. This report Health member or its a Board of Health. Failure report may result in suspentional subjections. If aggrieve to a hearing. Your request to the Board of Health bys of receipt of this order: INSPECTION:	d on an inspection lations of 105 CMR ort, when signed below gent constitutes an to correct violations ension or revocation of essation of food d by this order, you st must be in writing at the above address
Inspector's Signature:  PIC's Signature:	Print: Print:	JMa	phy	Page Pages
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FOOD ESTABLISHMENT INSPECTION REPORT

Town of Scituate / Board of Health 600 Chief Justice Cushing Highway Scituate, Massachusetts 02066

Name Gates Middle School Address 460 First Parish Re	Date / 19 Risk Level	Food Service Retail	Type of Inspection  ☐ Routine ☐ Re-inspection Previous Inspection
Telephone 545-8760			Date:  Pre-operation
Owner Town	HACCP Y/N	Caterer Caterer	Suspect lilness
Person in Charge (PIC) Louise fixarald	Time In:	☐ Bed & Breakfast	☐ General Complaint ☐ HACCP
Inspector J M wroku	Out:	Permit No.	Other
Each violation checked requires an explanation on the	narrative page(s) a		
Violations Related to Foodborne Illness Interventions a Violations marked may pose an imminent health hazard an action as determined by the Board of Health.	ind Risk Factors d require immediate	Anti-Chokir e corrective Tobacco	compliance with: ng 590.009 (E)  590.009 (F)  wareness 590.009 (G)
FOOD PROTECTION MANAGEMENT	12. Preve	ntion of Contamination from H	ands
1. PIC Assigned / Knowledgeable / Duties	13. Handv	vash Facilities	
EMPLOYEE HEALTH.  ☐ 2. Reporting of Diseases by Food Employee and PIC	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	FROM CHEMICALS	
3. Personnel with Infections Restricted/Excluded	14. Appro	ved Food or Color Additives	
FOOD FROM APPROVED SOURCE	15. Toxic		
☐ 4. Food and Water from Approved Source	VARIATION SOLVENION	RATURE CONTROLS (Potentially	y Hazardous Foods)
5. Receiving/Condition		ng Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	17, Rehea	12121	ONOS C
☐ 7. Conformance with Approved Procedures/HACCP Plans	18. Coolin		2.7
PROTECTION FROM CONTAMINATION		nd Cold Holding	
8. Separation/ Segregation/ Protection		As a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY SUSCEPTIBLE and Food Preparation for HSF	
☐ 10. Proper Adequate Handwashing			
☐ 11. Good Hygienic Practices		DVISORY ng of Consumer Advisories	
Violations Related to Good Retail Practices (Blue Items)			
Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health.  23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other	To Foodbo and Risk F Official Ore today, the it 590.000/fed by a Board order of the cited in this the food est establishme have a right and submitt within 10 da	Violated Provisions Relatorne Illnesses Intervention actors (Red Items 1-22): der for Correction: Based Items checked indicate violateral Food Code. This report Health member or its agare Board of Health. Failure to report may result in suspentablishment permit and cestent operations. If aggrieved to a hearing. Your requested to the Board of Health and ays of receipt of this order.	on an inspection ations of 105 CMR ort, when signed belowent constitutes an correct violations insion or revocation of sation of food by this order, you the must be in writing
Inspector's Signature: Pri		unh	
PIC's Signature: Pri	<u> </u>	F. F. C. Crerdi	Page of Pages
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FOOD ESTABLISHMENT INSPECTION REPORT

### Town of Scituate / Board of Health

600 Chief Justice Cushing Highway Scituate, Massachusetts 02066 Tel. (781) 545-8725 Fax (781) 545-8866

Name Gates Middle School	•	Date / 19	Type of Operation(s) Food Service	Type of Inspection Routine		
Address 460 1ST Parish		Risk "	Retail Residential Kitchen	Re-inspection Previous Inspection		
Telephone 781 545 - 8760		Level	Mobile	Date:		
Owner Tolun		HACCP Y/N	☐ Temporary ☐ Caterer	☐ Pre-operation ☐ Suspect Illness		
Person in Charge (PIC) LOUISE FITTING	nald	Time	☐ Bed & Breakfast	General Complaint HACCP		
Inspector J Muronh	u <sub>1</sub> U	In: Out:	Permit No.	Other		
Each violation checked requires an explanation on the	ne narra	tive page(s) a		* *		
Violations Related to Foodborne Illness Intervention	s and R	isk Factors	<i>Non</i> Anti-Choki	r-compliance with: ing 590.009 (E)		
Violations marked may pose an imminent health hazard	and req	uire immediate	e corrective Tobacco	590.009 (F) wareness 590.009 (G)		
action as determined by the Board of Health,			_	- Postlog		
FOOD PROTECTION MANAGEMENT	V	12. Preve	ntion of Contamination from F			
1. PIC Assigned / Knowledgeable / Duties	/	🛾 🗌 13. Handv	vash Facilities	72		
EMPLOYEE HEALTH  2. Reporting of Diseases by Food Employee and PIC	U	PROTECTION	FROM CHEMICALS	L		
Reporting of Diseases by Food Employee and Fig.      Reporting of Diseases by Food Employee and Fig.      Reporting of Diseases by Food Employee and Fig.      Reporting of Diseases by Food Employee and Fig.		14. Appro	ved Food or Color Additives			
	R /	☐ 15. Toxic	Chemicals			
Food and Water from Approved Source	- 4	TIME/TEMPER	ATURE CONTROLS (Potential	ly Hazardous Foods)		
☐ 5. Receiving/Condition + 10+ L		☐ 16. Cookir	ng Temperatures			
6. Tags/Records/Accuracy of Ingredient Statements		17. Rehea	_			
7. Conformance with Approved Procedures/HACCP Plans	3	☐ 18. Coolin	g Refni	¿ Temps ~		
PROTECTION FROM CONTAMINATION	V	☐ 19. Hot ar	d Cold Holding	'		
8. Separation/ Segregation/ Protection			As a Public Health Control			
9. Food Contact Surfaces Cleaning and Sanitizing			TS FOR HIGHLY SUSCEPTIBL and Food Preparation for HS			
☐ 10. Proper Adequate Handwashing						
☐ 11. Good Hygienic Practices,		22. Postir	ng of Consumer Advisories	u u		
* Hair nets/ huts required.	transfer of the second					
Violations Related to Good Retail Practices (Blue Iten Critical (C) violations marked must be corrected	ns)	Manuelana	Violete d Bernielana Bal			
immediately or within 10 days as determined by the Board	d		Violated Provisions Relations Relations Illnesses Intervention			
of Health. Non-critical (N) violations must be corrected	4		actors (Red Items 1-22):			
immediately or within 90 days as determined by the Board of Health.	u		der for Correction: Based ems checked indicate viol			
C N CO M			leral Food Code. This rep			
23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004)		by a Board	of Health member or its a	gent constitutes an		
25. Equipment and Utensils (FC-4)(590.005)		order of the Board of Health. Failure to correct violations				
26. Water, Plumbing and Waste (FC-5)(590.006)		cited in this report may result in suspension or revocation of the food establishment permit and cessation of food				
27. Physical Facility (FC-6)(590.007)		establishme	ent operations. If aggrieve	d by this order, you		
28. Poisonous or Toxic Materials (FC-7)(590.008)			to a hearing. Your reques			
29. Special Requirements (590.009)			ed to the Board of Health ays of receipt of this order.			
30. Other			E-INSPECTION:			
Inspector's Signature:	Print:	1	(Arinahie			
PIC's Signature:	Print:	2./	Viamphy Sin a s	Page of Pages		
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FORM 734A

FORM 734A

OOD ESTABLISHMENT INSPECTION REPORT

Town of Scituate / Board of Health 600 Chief Justice Cushing Highway Scituate, Massachusetts 02066

Jame Hethorly Elementary	Date /10	Type of Operation(s) Food Service	Type of Inspection Routine
Address 77 Ann Vinal Rd	Risk	Retail	Re-inspection
Telephone 545-8780	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner Town	HACCP Y/N	Temporary Caterer	☐ Pre-operation ☐ Suspect Illness
Person in Charge (PIC) Dunna Demello	Time	Bed & Breakfast	General Complaint HACCP
nspector J Murphy	In: Out:	Permit No.	Other
ach violation checked requires an explanation on the narr		and a citation of specific	provision(s) violated.
/iolations Related to Foodborne Illness Interventions and /iolations marked may pose an imminent health hazard and reaction as determined by the Board of Health.		Anti-Chole corrective Tobacco	n-compilance with: king 590.009 (E) 590.009 (F) Awareness 590.009 (G)
OOD PROTECTION MANAGEMENT	🗌 12. Preve	ntion of Contamination from	Hands
1. PIC Assigned / Knowledgeable / Duties	🔲 13. Handy	wash Facilities	
EMPLOYEE HEALTH  ☐ 2. Reporting of Diseases by Food Employee and PIC	PROTECTION	FROM CHEMICALS	
Reporting of Diseases by Food Employee and Fic      Resonnel with Infections Restricted/Excluded	14. Appro	ved Food or Color Additives	
OOD FROM APPROVED SOURCE	15. Toxic		
☐ 4. Food and Water from Approved Source		RATURE CONTROLS (Potentia	Illy Hazardous Foods)
☐ 5. Receiving/Condition HO4		ng Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	☐ 17. Rehea	1/.	Cris tempse
7. Conformance with Approved Procedures/HACCP Plans		d Cold Holding	U U
PROTECTION FROM CONTAMINATION  3. Separation/ Segregation/ Protection		As a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY SUSCEPTIB and Food Preparation for HS	
10. Proper Adequate Handwashing			
11. Good Hygienic Practices		DVISORY ng of Consumer Advisories	
iolations Related to Good Retail Practices (Blue Items) ritical (C) violations marked must be corrected nmediately or within 10 days as determined by the Board f Health. Non-critical (N) violations must be corrected nmediately or within 90 days as determined by the Board f Health.  23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other	Number of To Foodbo and Risk F Official Ord today, the it 590.000/fed by a Board order of the cited in this the food establishme have a right and submitt within 10 da	Violated Provisions Reprine Illnesses Interventionate (Red Items 1-22) Violated For Correction: Base Items checked indicate violateral Food Code. This reprint and for the Board of Health. Failure report may result in suspitablishment permit and count operations. If aggrieves to a hearing. Your requested to the Board of Health ays of receipt of this order E-INSPECTION:	ed on an inspection plations of 105 CMR port, when signed below agent constitutes an ento correct violations ension or revocation of essation of food ad by this order, you est must be in writing at the above address
Inspector's Signature: Alamolo Print:	ノレ	turphy	11
PIC's Signature: Print:	DOWN	M DEMALD	Page of Pages

### FOOD ESTABLISHMENT INSPECTION REPORT

The state of the s			
Name Hatherly Elementary Sheet Address 72 Ann Vival Rd. Telephone 781585 78780  Owner	Date/ 3/L6//9 Risk Level	Type of Operation(s)  Food Service Retail Residential Kitchen Mobile Temporary	Type of Inspection Routine Re-inspection Previous Inspection Date: Pre-operation
Person in Charge (PIC) Donna Demello	Time	Caterer Bed & Breakfast	Suspect Illness General Complaint
Inspector Jo Manny	In: Out:	Permit No.	HACCP Other
Each violation checked requires an explanation on the narr		and a citation of specific	provision(s) violated.
Violations Related to Foodborne Illness Interventions and Violations marked may pose an imminent health hazard and reaction as determined by the Board of Health.  FOOD PROTECTION MANAGEMENT	quire immediate	Anti-Chole corrective Tobacco	590.009 (F) ☐ Awareness 590.009 (G) ☐
1. PIC Assigned / Knowledgeable / Duties		vash Facilities	
■ 2. Reporting of Diseases by Food Employee and PIC	PROTECTION	FROM CHEMICALS ved Food or Color Additives	V
3. Personnel with Infections Restricted/Excluded	15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE  4. Food and Water from Approved Source	TIME/TEMPER	RATURE CONTROLS (Potentia	ılly Hazardous Foods)
5. Receiving/Condition	☐ 16. Cookir	ng Temperatures	
6. Tags/Records/Accuracy of Ingredient Statements	🔲 17. Rehea	ating	
7. Conformance with Approved Procedures/HACCP Plans	🗌 18. Coolin	g	
PROTECTION FROM CONTAMINATION	☐ 19. Hot ar	nd Cold Holding	
8. Separation/ Segregation/ Protection	☐ 20. Time A	As a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY SUSCEPTIB	
☐ 10. Proper Adequate Handwashing	21. Food	and Food Preparation for HS	SP
☐ 11. Good Hygienic Practices	CONSUMER A  ☐ 22. Postir	DVISORY ng of Consumer Advisories	Ų
Violations Related to Good Retail Practices (Blue Items)			
Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health.  23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009) 30. Other	To Foodbo and Risk F Official Ord today, the it 590.000/fed by a Board order of the cited in this the food est establishme have a right and submitt within 10 da	Violated Provisions Reprine Illnesses Interventionactors (Red Items 1-22) der for Correction: Based tems checked indicate violateral Food Code. This report Health member or its at Board of Health. Failure report may result in suspitablishment permit and cent operations. If aggrieved to a hearing. Your requested to the Board of Health asys of receipt of this order E-INSPECTION:	d on an inspection plations of 105 CMR port, when signed below agent constitutes an to correct violations ension or revocation of essation of food by this order, you at must be in writing at the above address
Inspector's Signature: Print:	JA	Suphy	Roge A X Page
PIC's Signature: JAM N / GAT () Print:	MARIERA W	DENGLA	Page_/ of Pages

PIC's Signature: Inspector's Signature: Discussion With Person in Charge: **Establishment Name:** Code Reference MOHON 10ton C - Critical Item R - Red Item 1tem Mar TOWN OF Wood Brean V Print: 10 clays. to complete. 61/ 92/12/1/ WWW Demello CAN Scituate MUST boards. Also Discussed Elemontary Date: **DESCRIPTION OF VIOLATION / PLAN OF CORRECTION** spenor. 126 Be 011 PLEASE PRINT CLEARLY Laplace Sold Re-inspection Scheduled Oluntary Compliance **Corrective Action Required:** ☐ Embargo Voluntary Disposal w. Th SURTALL 126/19 Page: mean 4 me austrollian Love. 1200 ☐ Emergency Closure ☐ Emergency Suspension ☐ Employee Restriction / Exclusion Other: No . 야 Yes Date Verified



ORM 734A

DOD ESTABLISHMENT INSPECTION REPORT

Jenkins Elementary	Date 9/12/19	Type of Operation(s)  X Food Service	Type of Inspection Routine			
Address 54 Vinal Ave	Risk Level	Retail Residential Kitchen	Re-inspection Previous Inspection			
Telephone 781 XVX 49.10	ravei	Mobile	Date:			
Owner Town	HACCP Y/N	☐ Temporary ☐ Caterer	☐ Pre-operation ☐ Suspect Illness			
11 12	Time	Bed & Breakfast	General Complaint			
- CANICE WEVSOIT	In:	Dame it No	HACCP			
nspector July 1949	Out:	Permit No.	Other			
ach violation checked requires an explanation on the narr	ative page(s) a		: provision(s) violated. n-compliance with:			
Violations Related to Foodborne Illness Interventions and Violations marked may pose an imminent health hazard and reaction as determined by the Board of Health.	Risk Factors quire immediate	Anti-Choke Corrective Tobacco	·			
OOD PROTECTION MANAGEMENT	🗌 12. Preve	ntion of Contamination from	Hands			
1. PIC Assigned / Knowledgeable / Duties	13. Handv	vash Facilities				
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS				
☐ 2. Reporting of Diseases by Food Employee and PIC	☐ 14. Appro	ved Food or Color Additives				
☐ 3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic	Chemicals				
OOD FROM APPROVED SOURCE	TIME/TEMPER	ATURE CONTROLS (Potentia	lly Hazardous Foods)			
4. Food and Water from Approved Source	16. Cookii	ng Temperatures	Marie 12 (Caramana) (Caramana)			
5. Receiving/Condition	☐ 17. Rehea					
Tags/Records/Accuracy of Ingredient Statements	☐ 18. Coolin	LX ( 2)	empsi			
7. Conformance with Approved Procedures/HACCP Plans	24-241	nd Cold Holding	•			
PROTECTION FROM CONTAMINATION		As a Public Health Control				
3. Separation/ Segregation/ Protection	_	TS FOR HIGHLY SUSCEPTIBLE	E PODIII ATIONS (HSP)			
9. Food Contact Surfaces Cleaning and Sanitizing	21. Food	and Food Preparation for HS	SP			
☐ 10. Proper Adequate Handwashing	Castation	DVISORY				
☐ 11. Good Hygienic Practices	22. Postir	ng of Consumer Advisories	Same transfer and the second property of the second pro-			
iolations Related to Good Retail Practices (Blue Items)	LIZZ. FOSIII	ig of Consumer Advisories	W			
ritical (C) violations marked must be corrected nmediately or within 10 days as determined by the Board		Violated Provisions Re				
f Health. Non-critical (N) violations must be corrected		orne lilnesses intervention factors (Red Items 1-22):				
nmediately or within 90 days as determined by the Board		der for Correction: Base				
f Health.	today, the i	tems checked indicate vic	lations of 105 CMR			
23. Management and Personnel (FC-2)(590.003)		deral Food Code. This rep				
24. Food and Food Protection (FC-3)(590.004)		of Health member or its a Board of Health. Failure				
25. Equipment and Utensils (FC-4)(590.005)	cited in this report may result in suspension or revocation of					
26. Water, Plumbing and Waste (FC-5)(590.006)	the food es	tablishment permit and ce	essation of food			
27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008)	establishme	ent operations. If aggrieve t to a hearing. Your reque	st must be in writing			
29. Special Requirements (590.009)	and submit	ted to the Board of Health	at the above address			
30. Other		ays of receipt of this order	•			
	DATE OF R	E-INSPECTION:				
Inspector's Signature: Print:	11	Lurchy	9			
PIC's Signature VI A 11 (A)			Page 1 of 1 Pages			
Anny we						

FORM 734A

FOOD ESTABLISHMENT INSPECTION REPORT

### Town of Scituate / Board of Health

600 Chief Justice Cushing Highway Scituate, Massachusetts 02066 Tel. (781) 545-8725 Fax (781) 545-8866

Name Jenkens Elementary	3/20/19	Type of Operation(s) Food Service	Type of Inspection  Routine
Address Sy Vinal Ave	Risk	Retail	Re-inspection
Telephone 78 1 545 - 4910	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner town	HACCP Y/N	Temporary Caterer	☐ Pre-operation ☐ Suspect Illness
Person in Charge (PIC) Janua Nelson	Time	☐ Bed & Breakfast	General Complaint HACCP
Inspector I Mumho	In: Out:	Permit No.	Other
Each violation checked requires an explanation on the narr	ative page(s) a	•	on-compliance with:
Violations Related to Foodborne Illness Interventions and Violations marked may pose an imminent health hazard and reaction as determined by the Board of Health.		e corrective Tobacco	•
FOOD PROTECTION MANAGEMENT		ntion of Contamination from	Hands
1. PIC Assigned / Knowledgeable / Duties	✓ ☐ 13. Handy	vash Facilities	8
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	
Reporting of Diseases by Food Employee and PIC	☐ 14. Appro	ved Food or Color Additives	
3. Personnel with Infections Restricted/Excluded	15. Toxic	Chemicals	
FOOD FROM APPROVED SOURCE  4. Food and Water from Approved Source	TIME/TEMPER	ATURE CONTROLS (Potentia	ally Hazardous Foods)
☐ 5. Receiving/Condition Hot)	🔲 16. Cookii	ng Temperatures	/ /
6. Tags/Records/Accuracy of Ingredient Statements	17. Rehea	iting Office	is Cenyse
7. Conformance with Approved Procedures/HACCP Plans	☐ 18. Coolin	5/1/ -	
PROTECTION FROM CONTAMINATION		d Cold Holding	
8. Separation/ Segregation/ Protection		As a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing		TS FOR HIGHLY SUSCEPTIB and Food Preparation for H	
☐ 10. Proper Adequate Handwashing		·	/
11. Good Hygienic Practices	the state of the s	ng of Consumer Advisories	
Violations Related to Good Retail Practices (Blue Items)			The state of the s
Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board		Violated Provisions Re	
of Health. Non-critical (N) violations must be corrected		rne Ilinesses Interventi actors (Red Items 1-22)	
immediately or within 90 days as determined by the Board		der for Correction: Base	
of Health.		tems checked indicate vio	
23. Management and Personnel (FC-2)(590.003)		deral Food Code. This report of Health member or its a	
24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)	order of the	Board of Health. Failure	e to correct violations
26. Water, Plumbing and Waste (FC-5)(590.006)		report may result in susp tablishment permit and co	
27. Physical Facility (FC-6)(590.007)		ent operations. If aggrieve	
28. Poisonous or Toxic Materials (FC-7)(590.008)		t to a hearing. Your reque ted to the Board of Health	
29. Special Requirements (590.009)		ays of receipt of this orde	
30. 0		E-INSPECTION:	
Inspector's Signature: Print:	J Ma	phy	1/
PIC's Signature Print:			

Inspector's Signature Discussion With Person in Charge: Establishment Name: Code Reference C - Critical Item R - Red Item Swall TOWN OF N Print: Print: got DESCRIPTION OF VIOLATION / PLAN OF CORRECTION amp out of dishurs hon training PLEASE PRINT CLEARLY Date: Cent-Hicktes Corrective Action Required: O Voluntary Compliance Voluntary Disposal ☐ Embargo ☐ Re-inspection Scheduled Page: Z Emergency Suspension Other: ☐ Employee Restriction / Exclusion ☐ Emergency Closure No 으 CXeX Date Verified

OOD ESTABLISHMENT INSPECTION REPORT

Vame Scituate H.S.	Date/ 19</th <th>Type of Operation(s)</th> <th>Type of Inspection Routine</th>	Type of Operation(s)	Type of Inspection Routine
Address Loca Dic Ibuu	Risk	Retail	Re-inspection
Felephone SIK 8750	Level	Residential Kitchen Mobile	Previous Inspection Date:
Owner Town	HACCP Y/N	Temporary Caterer	☐ Pre-operation ☐ Suspect Illness
Person in Charge (PIC) Cathy & person	Time	☐ Bed & Breakfast	General Complaint HACCP
nspector / // works	In: Out:	Permit No.	Other
ach violation checked requires an explanation on the narr	ative page(s) a	and a citation of specifi	c provision(s) violated.
		No Anti-Cho	on-compliance with:
/iolations Related to Foodborne Illness Interventions and /iolations marked may pose an imminent health hazard and reaction as determined by the Board of Health.	quire immediate	e corrective Tobacco	
OOD PROTECTION MANAGEMENT	☐ 12. Preve	ntion of Contamination from	Hands
1. PIC Assigned / Knowledgeable / Duties	🖊 🔲 13. Handi	wash Facilities	
EMPLOYEE HEALTH	PROTECTION	FROM CHEMICALS	C C
2. Reporting of Diseases by Food Employee and PIC	14. Appro	ved Food or Color Additives	S CONTRACTOR OF THE CONTRACTOR
☐ 3. Personnel with Infections Restricted/Excluded	☐ 15. Toxic		
4. Food and Water from Approved Source	\$1500 M. G. 1954 CT 6 SERVICE	RATURE CONTROLS (Potenti	ally Hazardous Foods)
☐ 5. Receiving/Condition HOT	0.51.50.00-0.0011	ng Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	17. Rehea	ating	rig Tempso
☐ 7. Conformance with Approved Procedures/HACCP Plans	18. Coolir	.9	0 - 1
PROTECTION FROM CONTAMINATION.		nd Cold Holding	
☐ 8. Separation/ Segregation/ Protection		As a Public Health Control NTS FOR HIGHLY SUSCEPTII	ELE BORULATIONS (HSP)
9. Food Contact Surfaces Cleaning and Sanitizing	21. Food	and Food Preparation for h	ISP
☐ 10. Proper Adequate Handwashing		ADVISORY	
11. Good Hygienic Practices	22. Posti	ng of Consumer Advisories	
iolations Related to Good Retail Practices (Blue Items) ritical (C) violations marked must be corrected nmediately or within 10 days as determined by the Board	Number o	f Violated Provisions R orne Illnesses Intervent	elated
f Health, Non-critical (N) violations must be corrected	and Risk	Factors (Red Items 1-22	2):
nmediately or within 90 days as determined by the Board	Official O	rder for Correction: Bas	sed on an inspection
f Health.	today, the	items checked indicate v	eport, when signed below
23. Management and Personnel (FC-2)(590.003)	by a Board	of Health member or its	agent constitutes an
24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005)	order of th	e Board of Health. Failur	re to correct violations spension or revocation of
26. Water, Plumbing and Waste (FC-5)(590.006)	the food es	stablishment permit and	cessation of food
27. Physical Facility (FC-6)(590.007)	establishm	ent operations. If aggrie	ved by this order, you
28. Poisonous or Toxic Materials (FC-7)(590.008)	have a rigi	nt to a hearing. Your requited to the Board of Heal	th at the above address
29. Special Requirements (590.009)	within 10 c	lays of receipt of this ord	er.
	DATE OF F	RE-INSPECTION:	
Inspector's Signaturey All Mary Prints	- 1/1/	1 11 robs A	1
PIC's Signa ure H & Collect Print:	Collier	ne Epervaly	Page of Pages
*ORM734A	CIPS		

FOOD ESTABLISHMENT INSPECTION REPORT

### Town of Scituate / Board of Health

600 Chief Justice Cushing Highway Scituate, Massachusetts 02066

Name  School  Address  606 C J C Hwy  Telephone  781 545-8750  Owner  School  Person in Charge (PIC)  Inspector  Owner  Cathy Eperwary  Inspector	Date 2 / 19 / 19 Risk Level  HACCP Y/N  Time In: Out:	Type of Operation(s)   Food Service   Retail   Residential Kitchen   Mobile   Temporary   Caterer   Bed & Breakfast   Permit No.	Type of Inspection   Re-inspection   Re-inspection   Previous Inspection   Date:   Pre-operation   Suspect Illness   General Complaint   HACCP   Other
Each violation checked requires an explanation on the narr	ative page(s) a	nd a citation of specific	provision(s) violated.
Violations Related to Foodborne Illness Interventions and Violations marked may pose an imminent health hazard and reaction as determined by the Board of Health.	Risk Factors	No Anti-Choke corrective Tobacco	n-compliance with:
FOOD PROTECTION MANAGEMENT  1. PIC Assigned / Knowledgeable / Duties	_	ntion of Contamination from vash Facilities	Hands
EMPLOYEE HEALTH			
2. Reporting of Diseases by Food Employee and PIC	COMPANIES NEWS	FROM CHEMICALS	C. C
3. Personnel with Infections Restricted/Excluded		ved Food or Color Additives	
FOOD FROM APPROVED SOURCE	15. Toxic		
4. Food and Water from Approved Source		RATURE CONTROLS (Potentia	lly Hazardous Foods)
5. Receiving/Condition		ng Temperatures	
☐ 6. Tags/Records/Accuracy of Ingredient Statements	17. Rehea	ating	
☐ 7. Conformance with Approved Procedures/HACCP Plans	18. Coolin	9 Ket	rig Temps
PROTECTION FROM CONTAMINATION	_ □ 19 Hot ar	d Cold Holding	
8. Separation/ Segregation/ Protection	☐ 20. Time A	As a Public Health Control	
9. Food Contact Surfaces Cleaning and Sanitizing	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	TS FOR HIGHLY SUSCEPTIB	
☐ 10. Proper Adequate Handwashing	∐ 21. F00d	and Food Preparation for H	<b>)</b>
11. Good Hygienic Practices	CONSUMER A		V
	☐ ZZ. POSUI	ng of Consumer Advisories	
Critical (C) violations marked must be corrected immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected immediately or within 90 days as determined by the Board of Health.  C N  23. Management and Personnel (FC-2)(590.003)  24. Food and Food Protection (FC-3)(590.004)  25. Equipment and Utensils (FC-4)(590.005)  26. Water, Plumbing and Waste (FC-5)(590.006)  27. Physical Facility (FC-6)(590.007)  28. Poisonous or Toxic Materials (FC-7)(590.008)  29. Special Requirements (590.009)  30. Other	To Foodbo and Risk F Official Or today, the i 590.000/fed by a Board order of the cited in this the food es establishme have a right and submitt within 10 da	F Violated Provisions Reprine Illnesses Interventifactors (Red Items 1-22) der for Correction: Basederal Food Code. This report Health member or its at Board of Health. Failured report may result in suspitablishment permit and control of the Board of Health aggrieved to a hearing. Your requested to the Board of Health agys of receipt of this order E-INSPECTION:	ed on an inspection plations of 105 CMR port, when signed below agent constitutes an a to correct violations pension or revocation of essation of food ed by this order, you get must be in writing a at the above address
Inspector's Signature: Print:	JM	umhy	1 /
PIC's Signature: Print: Print:	Catherin	e Epervary	Page of Pages
FORM 734A			1

Page:\_ Date: TOWN OF Establishment Name:\_

N

C-Critical tem Light bulbs  Must have  Must have  Slight  Slight  Slight  Slight  Slight  Call why  Langer  C. Epawary  Luphy  Ssight  Salight  Salight  Salight  Salight  Salight  Con 1 tem that a second of the saline of the s	DESCRIPTION OF VIOLATION / PLAN OF CORRECTION	woulk in Freezer + refrequedor hatterproof lens ulin stags	in drain prpe.	all	mploted.	Corrective Action Required: No Yes	✓ Voluntary Compliance ☐ Employee Restriction / Exclusion	☐ Re-inspection Scheduled ☐ Emergency Suspension	☐ Embargo ☐ Emergency Closure	Voluntary Disposal
		Light builbs in Must have s	en Rombination Si Slight leak	Hair nets;	hen	Discussion With Person in Charge:		- bys isc byd	Print:	PIC's Signature

# lassachusetts Department of Public Health

### OOD ESTABLISHMENT INSPECTION REPORT

Town of Scituate / Board of Health 600 Chief Justice Cushing Highway Scituate, Massachusetts 02066

Section   Sect				of Impunction
Serson in Charge (PIC)   Sos & Great Tab   Time   Oit   Permit No.   Out   Permit No.   Out   Permit No.   Out   Permit No.   Other   Out   Permit No.   Out   Permit No.   Other   Out   Permit No.   Out   Permit No.   Other   Out   Permit No.   Out   Permit No.   Out   Permit No.   Other   Out   Permit No.   Out   Permit No.   Out   Permit No.   Other   Out   Permit No.   Out   Permit No.   Out   Permit No.   Other   Out   Permit No.   Out   Permit No.   Out   Permit No.   Out   Permit No.   Out   Anti-Choking   Sou.009 (c)   Other   Out   Permit No.   Out   Anti-Choking   Sou.009 (c)   Other   Out   Permit No.   Out   Anti-Choking   Sou.009 (c)   Other   Out   Out   Permit No.   Out   Anti-Choking   Sou.009 (c)   Out	Address 266 Tilden Rd Telephone 545 8790	G/12/19 Risk Level	Food Service Retail Residential Kitchen Mobile Temporary	Re-inspection Previous Inspection Date: Pre-operation
Repetitor   Wurn   Out:   Permit No.   Out:	10.0.	Market Co.		
Separation   Sep	Person in Charge (PIC)	ln:		
Tolations Related to Foodborne Illness Interventions and Risk Factors   Anti-Choking   Sep.009 (E   Children   Anti-Choking   Sep.009 (E   Children   Anti-Choking   Sep.009 (E   Children   Anti-Choking   Sep.009 (E   Children   Anti-Choking   Sep.009 (F   Children   Anti-Choking   Sep.009 (F   Children   Anti-Choking   Sep.009 (F   Children   Anti-Choking   Sep.009 (F   Children	nspector J Wuryong	Out:		CONTROL VILLA - INC.
Tiolations Related to Foodborne Illness Interventions and Risk Factors   Tiolations marked may pose an imminent health hazard and require immediate corrective   Tiolateon	ach violation checked requires an explanation on the narr	ative page(s) a	ing a citation of specific p	compliance with:
1. Pic Assigned / Knowledgeable / Duties   13. Handwash Facilities	/iolations marked may pose an imminent health hazard and re	quire immediat	e corrective Tobacco Allergen Aw	590.009 (F) areness 590.009 (G)
PROTECTION FROM CHEMICALS   14. Approved Food or Color Additives   14. Approved Food or Color Additives   15. Toxic Chemicals   14. Approved Food or Color Additives   15. Toxic Chemicals   16. Cooking Temperatures   16. Cooking Temperatures   16. Cooking Temperatures   17. Reheating   18. Separation/ Segregation/ Protection   9. Food Contact Surfaces Cleaning and Sanitizing   18. Separation/ Segregation/ Protection   9. Food Contact Surfaces Cleaning and Sanitizing   10. Proper Adequate Handwashing   11. Good Hygienic Practices   16. Cooking Temperatures   18. Cooling	OOD PROTECTION MANAGEMENT  1. PIC Assigned / Knowledgeable / Duties	<del>_</del>		ands
2. Reporting of Diseases by Food Employee and PIC     3. Personnel with Infections Restricted/Excluded     500b PROM APPBORD SOURCE     4. Food and Waterfrom Approved Source     5. Receiving/Condition	EMPLOYEE HEALTH			
3. Personnel with Infections Restricted/Excluded   15. Toxic Chemicals     3. Personnel with Infections Restricted/Excluded   15. Toxic Chemicals     4. Food and Waleyfrom Approved Source   16. Cooking Temperatures   17. Reheating   18. Cooking Temperatures   17. Reheating   18. Cooking Temperatures   18. Cooking	2. Reporting of Diseases by Food Employee and PIC	75 W 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		The production of the producti
4. Food and Wafer/from Approved Source   16. Cooking Temperatures   17. Reheating   17. Reheating   18. Cooking Temperatures	☐ 3. Personnel with Infections Restricted/Excluded			
16. Cooking Temperatures   16. Cooking Temperatures   17. Receiving/Condition   17. Repeating   18. Cooling   19. Hot and Coff Holding   19. Hot and Coff Holding   19. Hot and Coff Holding   19. The As a Public Health Control   19. Food Contact Surfaces Cleaning and Sanitizing   10. Proper Adequate Handwashing   11. Good Hyglenic Practices   12. Food and Food Preparation for HSP   12. Food and Food Preparation for HSP   12. Food by 19. The As a Public Health Control   18. Cooling   19. Hot and Coff Holding   19. Hot and Coff	OOD FROM APPROVED SOURCE	TIME/TEMPE	RATURE CONTROLS (Potentially	Hazardous Foods)
17. Reheating   17. Reheating   17. Reheating   17. Reheating   18. Cogling   19. Hot and Coff Holding   20. Time As a Public Health Control   20. Time As a Public Health Control   20. Time As a Public Health Control   21. Food and Food Preparation for HSP   21. Food and Food Preparation for HSP   22. Posting of Consumer Advisories   22. Posting of Consumer Advisories   23. Management and Personnel (FC-2)(590.003)   24. Food and Food Protection (FC-3)(590.004)   25. Equipment and Utensils (FC-4)(590.005)   26. Water, Plumbing and Waste (FC-5)(590.006)   27. Physical Facility (FC-6)(590.006)   28. Poisonous or Toxic Materials (FC-7)(590.008)   29. Special Requirements (590.009)   30. Other   29. Special Requirements (590.009)   30. Other   29. Special Requirements (590.009)		16. Cooki	ng Temperatures	~ ~/
7. Conformance with Approved Procedures/HACCP Plans   ROTECTION FROM CONTAMINATION   19. Food Contact Surfaces Cleaning and Sanitizing   20. Time As a Public Health Control     REQUIREMENTS FOR HIGHLY SUSCEPTIBLE POPULATIONS (HSP)   21. Food and Food Protection (C) violations marked must be corrected mediately or within 10 days as determined by the Board Health. Non-critical (N) violations must be corrected mediately or within 90 days as determined by the Board Health. Non-critical (N) violations must be corrected mediately or within 90 days as determined by the Board Health. Constitutes an order of Health. Sequipment and Personnel (FC-2)(590.003)   24. Food and Food Protection (FC-3)(590.004)   25. Equipment and Utensils (FC-4)(590.005)   26. Water, Plumbing and Waste (FC-5)(590.006)   27. Physical Facility (FC-6)(590.007)   28. Poisonous or Toxic Materials (FC-7)(590.008)   29. Special Requirements (S90.009)   30. Other   Print:   Print:   Page of Pages   Pages   Pages of Pages   Pages of Pages	10,	☐ 17. Rehe	ating Serry	Leup
19 HoLand Cort Holding   20. Time As a Public Health Control   20. T		🗌 18. Coali	19 W/	,
20. Time As a Public Health Control	The second secon	☐ 19 Hot a	nd Cold Holding	
□ 9. Food Contact Surfaces Cleaning and Sanitizing □ 10. Proper Adequate Handwashing □ 11. Good Hygienic Practices    Consumer Advisories		_		
□ 10. Proper Adequate Handwashing □ 11. Good Hygienic Practices    11. Good Hygienic Practices   12. Posting of Consumer Advisories		REQUIREME	NTS FOR HIGHLY SUSCEPTIBLE	POPULATIONS (HSP)
iolations Related to Good Retail Practices (Blue Items) ritical (C) violations marked must be corrected mediately or within 10 days as determined by the Board Health. Non-critical (N) violations must be corrected mediately or within 90 days as determined by the Board Health.  C N  23. Management and Personnel (FC-2)(590.003)  24. Food and Food Protection (FC-3)(590.004)  25. Equipment and Utensils (FC-4)(590.005)  26. Water, Plumbing and Waste (FC-5)(590.006)  27. Physical Facility (FC-6)(590.007)  28. Poisonous or Toxic Materials (FC-7)(590.008)  29. Special Requirements (590.009)  Inspector's Signature  CONSUMER ADVISORY  22. Posting of Consumer Advisories  Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):  Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below by a Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within 10 days of receipt of this order.  DATE OF RE-INSPECTION:  Page of Pages				
iolations Related to Good Retail Practices (Blue Items) ritical (C) violations marked must be corrected mediately or within 10 days as determined by the Board Health. Non-critical (N) violations must be corrected mediately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days as determined by the Board Health.  Consolidately or within 90 days of Health member or its agent constitutes an order of the Board of Health member or its agent constitutes an order of the Board of Health.  Consolidately or within 90 days of Health member or its agent constitutes an order of the Board of Health.  Failure to correction:  Conficial Order for Correction:  Based on an inspection  today, the items checked indicate violations of today, the items checked indicate violations of today, the items checked indicate violations or today.  Conficial Order for Correction:		CONSUMER D 22 Post	ADVISORY ing of Consumer Advisories	
ritical (C) violations marked must be corrected mediately or within 10 days as determined by the Board Health. Non-critical (N) violations must be corrected mediately or within 90 days as determined by the Board Health.    Commodition   Non-critical (N) violations must be corrected mediately or within 90 days as determined by the Board Health.    Commodition   Print   Number of Violated Provisions Related To Foodborne Illnesses Interventions and Risk Factors (Red Items 1-22):    Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment operations. If aggrieved by this order, you have a right to a hearing. Your request must be in writing and submitted to the Board of Health at the above address within 10 days of receipt of this order.    DATE OF RE-INSPECTION:   Page of Pages   Page   P			ing of consumor reviews	
Inspector's Signatures	ritical (C) violations marked must be corrected nmediately or within 10 days as determined by the Board f Health. Non-critical (N) violations must be corrected nmediately or within 90 days as determined by the Board f Health.  23. Management and Personnel (FC-2)(590.003) 24. Food and Food Protection (FC-3)(590.004) 25. Equipment and Utensils (FC-4)(590.005) 26. Water, Plumbing and Waste (FC-5)(590.006) 27. Physical Facility (FC-6)(590.007) 28. Poisonous or Toxic Materials (FC-7)(590.008) 29. Special Requirements (590.009)	To Foodb and Risk  Official O today, the 590.000/fe by a Board order of the cited in the food e establishme have a riguand subment within 10 center of the cited in the food e establishme have a riguand subment of the food e establishme have a riguand subment of the food e establishme have a riguand subment of the food e establishment of the establishment of the food e establishment of the fo	orne Illnesses Interventio Factors (Red Items 1-22): rder for Correction: Based items checked indicate viol deral Food Code. This repo d of Health member or its ag e Board of Health. Failure s report may result in suspe stablishment permit and ce- ment operations. If aggrieve that to a hearing. Your reques itted to the Board of Health days of receipt of this order. RE-INSPECTION:	I on an inspection ations of 105 CMR ort, when signed below gent constitutes an to correct violations ension or revocation of ssation of food d by this order, you at must be in writing at the above address
Page of Pages	Inspector's Signature All Prints	1	Nurphy	11/
PIC's Signature: Rece Goatte		Rose	Gratte	Page of Pages

FOOD ESTABLISHMENT INSPECTION REPORT

Town of Scituate / Board of Health 600 Chief Justice Cushing Highway Scituate, Massachusetts 02066

	mportucik Elementary	3 26 19	Food Service	Routine	
Address Zlob Tilden Ra		Risk Level	Retail Residential Kitchen	Re-inspection Previous Inspection	
Telephone 264 545 5780		20701	☐ Mobile ☐ Temporary	Date:	
Owner	Town	HACCP Y/N	☐ Caterer	Suspect Illness	
Person in Charge (PIC)	Rose Gretta	Time	☐ Bed & Breakfast	General Complaint HACCP	
Inspector	J. Marphy	In: Out:	Permit No.	Other	
Each violation checked requires an explanation on the narrative page(s) and a citation of specific provision(s) violated.  Non-compliance with:					
Violations Related to Foodborne Illness Interventions and Risk Factors  Anti-Choking 590.009 (E)					
Violations marked may pose an imminent health hazard and require immediate corrective  Tobacco 590.009 (F)  Allergen Awareness 590.009 (G)					
action as determined by the Board of Health.  Cortificate expiral — Conew					
FOOD PROTECTION MANAGEME	- Miles and the control of the contr	12. Preve	ntion of Contamination from	Hands	
☐ 1. PIC Assigned / Knowledg		13. Hand	vash Facilities		
EMPLOYEE HEALTH PROTECTION FROM CHEMICALS				+ + + + + + + + + + + + + + + + + + +	
Reporting of Diseases by Food Employee and PIC		☐ 14. Appro	☐ 14. Approved Food or Color Additives		
☐ 3. Personnel with Infections Restricted/Excluded ☐ 15. Toxic Chemicals					
□ 4. Food and Water from Approved Source		TIME/TEMPER	TIME/TEMPERATURE CONTROLS (Potentially Hazardous Foods)		
5. Receiving/Condition	11012	☐ 16. Cooki	ng Temperatures	Maria (A) SP - MILLAND AND STATE OF THE SECOND	
6. Tags/Records/Accuracy	of Ingredient Statements	17. Rehea	ating O (->=		
_ ,	ved Procedures/HACCP Plans	☐ 18. Coolin	g Rotrig I	eyps c	
PROTECTION FROM CONTAMINATION.					
8. Separation/ Segregation/ Protection		☐ 20. Time	☐ 20. Time As a Public Health Control		
9. Food Contact Surfaces Cleaning and Sanitizing			REQUIREMENTS FOR HIGHLY SUSCEPTIBLE POPULATIONS (HSP)		
☐ 21. Food and Food Preparation for HSP ☐ 10. Proper Adequate Handwashing				SP	
			CONSUMER ADVISORY		
☐ 11. Good Hygienic Practices Hair nets ☐ 22. Posting of Consumer Advisories ☐ 22. Posting of Consumer Advisories					
Violations Related to Good Retail Practices (Blue Items)					
Critical (C) violations marked must be corrected			Number of Violated Provisions Related		
immediately or within 10 days as determined by the Board of Health. Non-critical (N) violations must be corrected			orne liinesses interventi factors (Red Items 1-22)	1 4 2 1	
immediately or within 90 days as determined by the Board			der for Correction: Base	0.00	
of Health.			tems checked indicate vio		
23. Management and Personnel (FC-2)(590.003)			590.000/federal Food Code. This report, when signed below by a Board of Health member or its agent constitutes an		
24. Food and Food Protection (FC-3)(590.004)		order of the	order of the Board of Health. Failure to correct violations		
25. Equipment and			report may result in susp		
26. Water, Plumbing and Waste (FC-5)(590.006)			the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you		
			have a right to a hearing. Your request must be in writing		
29. Special Requirements (590,009)			and submitted to the Board of Health at the above address		
within 10 days of receipt of this order.					
** walk-in FreezeR- all items to Shelvos DATE OF RE-INSPECTION:					
Inspector's Signature:	Print:	of Mu	rp W	- 1 . /-	
PIC's Signature: Page of Pages					