

Food Establishment Inspection Report

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Local Health Department Name and Address Woodford County Health Department 1831 S. Main Street, Eureka, IL 61530		No. of Risk Factor/Intervention Violations 1		Date 05/31/2023
Establishment American Legion Spring Bay Post #1115		No. of Repeat Risk Factor/Intervention Violations 0		Time In 2:45 PM
License/Permit # 23 062		Permit Holder Spring Bay American Legion Post #1115		Time Out 3:45 PM
Street Address 500 Legion Lane		Risk Category II		
City/State East Peoria, IL		Purpose of Inspection Routine Inspection		

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
 IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable
 Mark "X" in appropriate box for COS and/or R
 COS=corrected on-site during inspection R=repeat violation

Risk factors are important 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.

Compliance Status			COS	R	Compliance Status			COS	R
Supervision					Protection from Contamination				
1	In	Person in charge present, demonstrates knowledge, and performs duties			15	In	Food separated and protected		
2	In	Certified Food Protection Manager (CFPM)			16	Out	Food-contact surfaces; cleaned and sanitized		X
Employee Health					17	In	Proper disposition of returned, previously served, reconditioned and unsafe food		
3	In	Management, food employee and conditional employee; knowledge, responsibilities and reporting			Time/Temperature Control for Safety				
4	In	Proper use of restriction and exclusion			18	N/O	Proper cooking time and temperatures		
5	In	Procedures for responding to vomiting and diarrheal events			19	N/A	Proper reheating procedures for hot holding		
Good Hygienic Practices					20	N/A	Proper cooling time and temperature		
6	In	Proper eating, tasting, drinking, or tobacco use			21	N/O	Proper hot holding temperatures		
7	In	No discharge from eyes, nose, and mouth			22	In	Proper cold holding temperatures		
Preventing Contamination by Hands					23	In	Proper date marking and disposition		
8	In	Hands clean and properly washed			24	N/A	Time as a Public Health Control; procedures & records		
9	In	No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			Consumer Advisory				
10	In	Adequate handwashing sinks properly supplied and accessible			25	N/A	Consumer advisory provided for raw/undercooked food		
Approved Source					Highly Susceptible Populations				
11	In	Food obtained from approved source			26	N/A	Pasteurized foods used; prohibited foods not offered		
12	N/O	Food received at proper temperature			Food/Color Additives and Toxic Substances				
13	In	Food in good condition, safe, and unadulterated			27	N/A	Food additives: approved and properly used		
14	N/A	Required records available: shellstock tags, parasite destruction			28	In	Toxic substances properly identified, stored, and used		

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.
 Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation

COS			R	COS	R				
Safe Food and Water					Proper Use of Utensils				
30	Pasteurized eggs used where required			43	In-use utensils: properly stored				
31	Water and ice from approved source			44	Utensils, equipment & linens: properly stored, dried, & handled				
32	Variance obtained for specialized processing methods			45	Single-use/single-service articles: properly stored and used				
Food Temperature Control					46	Gloves used properly			
33	Proper cooling methods used; adequate equipment for temperature control			Utensils, Equipment and Vending					
34	Plant food properly cooked for hot holding			47	Food and non-food contact surfaces cleanable, properly designed, constructed, and used				
35	Approved thawing methods used			48	Warewashing facilities: installed, maintained, & used; test strips				
36	Thermometers provided & accurate			49	Non-food contact surfaces clean				
Food Identification					Physical Facilities				
37	X	Food properly labeled; original container		50	Hot and cold water available; adequate pressure				
Prevention of Food Contamination					51	Plumbing installed; proper backflow devices			
38	Insects, rodents, and animals not present			52	Sewage and waste water properly disposed				
39	X	Contamination prevented during food preparation, storage and display		53	Toilet facilities: properly constructed, supplied, & cleaned				
40	Personal cleanliness			54	Garbage & refuse properly disposed; facilities maintained				
41	Wiping cloths: properly used and stored			55	Physical facilities installed, maintained, and clean				
42	Washing fruits and vegetables			56	Adequate ventilation and lighting; designated areas used				
Employee Training					Employee Training				
57	All food employees have food handler training			58	Allergen training as required				

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Establishment: American Legion Spring Bay Post #1115

Establishment #: 23 062

Water Supply: Public Private

Waste Water System: Public Private

Sanitizer Type: Chlorine

PPM: 50/100

Heat: N/O

TEMPERATURE OBSERVATIONS

OBSERVATIONS AND CORRECTIVE ACTIONS

CFPM Verification (name, expiration date, ID#): Dennis Tipsword

Dennis Tipsword
23324936 - ServSafe
Exp. 2/2028

HACCP Topic: TCS food temperature requirements, no bare hand contact with ready-to-eat food, employee health policy requirements

Person in Charge (Signature)

May 31, 2023

Date _____

Follow-up: Yes No (Check one)

Follow-up Date:

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Establishment: American Legion Spring Bay Post #1115

Establishment #: 23 062

OBSERVATIONS AND CORRECTIVE ACTIONS

Person in Charge (Signature)

May 31, 2023

Date

Inspector (Signature)

Paul Weller (walt)

Follow-up: Yes No (Check one)

Follow-up Date: