

Food Establishment Inspection Report

Page 1 of 3

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|--|---|--|---------------------|
| Local Health Department and Address Woodford County Health Department 1831 S. Main Street Eureka, IL 61530 | | Number of Risk Factor/ Intervention Violations 0 | Date 3/11/2025 |
| | | Number of Repeat Risk Factor/ Intervention Violations 0 | Time In 5:10 PM |
| | | | Time Out 6:15 PM |
| Establishment Sicily Pizza | Phone (309) 248-7477 | Email | |
| Address 101 N. Jefferson Street | City/State Washburn, IL | ZIP Code 61570 | |
| License/Permit # 25 035 | Permit Holder Noreen Longo & Giuseppe Longo | Purpose of Inspection Routine | Risk Category I |

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item Mark "X" in the appropriate box for COS and/or R

IN: In compliance OUT: not in compliance N/O: not observed N/A: not applicable 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 |
|--|-------------------|--|-----|---|
| Supervision | | | | |
| 1 | IN | Person in charge present, demonstrates knowledge, and performs duties. | | |
| 2 | IN | Certified Food Protection Manager (CFPM). | | |
| Employee Health | | | | |
| 3 | IN | Management, food employee, and conditional employee; knowledge, responsibilities, and reporting. | | |
| 4 | IN | Proper use of restriction and exclusion. | | |
| 5 | IN | Procedures for responding to vomiting and diarrheal events. | | |
| Good Hygienic Practices | | | | |
| 6 | IN | Proper eating, tasting, drinking, or tobacco product use. | | |
| 7 | IN | No discharge from eyes, nose, and mouth. | | |
| Preventing Contamination by Hands | | | | |
| 8 | IN | Hands clean and properly washed. | | |
| 9 | IN | No bare-hand contact with RTE food or a pre-approved alternative procedure properly allowed. | | |
| 10 | IN | Adequate handwashing sinks are properly supplied and accessible. | | |
| Approved Source | | | | |
| 11 | IN | Food obtained from an approved source. | | |
| 12 | N/O | Food received at the proper temperature. | | |
| 13 | IN | Food in good condition, safe, and unadulterated. | | |
| 14 | N/A | Required records available: molluscan shellfish identification, and parasite destruction. | | |

| # | Compliance Status | | COS | R |
|--|-------------------|--|-----|---|
| Protection from Contamination | | | | |
| 15 | N/O | Food is separated and protected. | | |
| 16 | IN | Food-contact surfaces; cleaned and sanitized. | | |
| 17 | IN | Proper disposition of returned, previously served, reconditioned, and unsafe food. | | |
| Time/Temperature Control for Safety | | | | |
| 18 | N/O | Proper cooking time and temperatures. | | |
| 19 | N/A | Proper reheating procedures for hot holding. | | |
| 20 | N/A | Proper cooling time and temperature. | | |
| 21 | N/O | Proper hot holding temperatures. | | |
| 22 | N/O | Proper cold holding temperatures. | | |
| 23 | N/O | Proper date marking and disposition. | | |
| 24 | N/A | Time as a Public Health Control; procedures and records. | | |
| Consumer Advisory | | | | |
| 25 | N/A | Consumer advisory is provided for raw/undercooked food. | | |
| Highly Susceptible Populations | | | | |
| 26 | N/A | Pasteurized foods are used; prohibited foods are not offered. | | |
| Food/Color Additives and Toxic Substances | | | | |
| 27 | N/A | Food additives: approved and properly used. | | |
| 28 | IN | Toxic substances are properly identified, stored and used. | | |
| Conformance with Approved Procedures | | | | |
| 29 | N/A | Compliance with variance/specialized process/HACCP. | | |

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Mark "X" in the box if the numbered item is not in compliance Mark "X" in the appropriate box for COS and/or R COS: Corrected on-site during inspection R: Repeat violation

| # | X | Compliance Status | COS | R |
|---|---|--|-----|---|
| Safe Food and Water | | | | |
| 30 | | Pasteurized eggs are used where required. | | |
| 31 | | Water and ice from an approved source. | | |
| 32 | | Variance obtained for specialized processing methods. | | |
| Food Temperature Control | | | | |
| 33 | | Proper cooling methods are used; adequate equipment for temperature control. | | |
| 34 | | Plant food properly cooked for hot holding. | | |
| 35 | | Approved thawing methods used. | | |
| 36 | | Thermometers are provided and accurate. | | |
| Food Identification | | | | |
| 37 | | Food properly labeled; original container. | | |
| Prevention of Food Contamination | | | | |
| 38 | | Insects, rodents, and animals not present. | | |
| 39 | | Contamination is prevented during food preparation, storage, and display. | | |
| 40 | | Personal cleanliness. | | |
| 41 | | Wiping cloths: properly used and stored. | | |
| 42 | | Washing fruits, vegetables, and other plant food. | | |
| Proper Use of Utensils | | | | |
| 43 | | In-use utensils: properly stored | | |

| # | X | Compliance Status | COS | R |
|--|---|---|-----|---|
| Proper Use of Utensils (continued) | | | | |
| 44 | | Utensils, equipment, and linens: properly stored, dried, and handled. | | |
| 45 | | Single use/single service articles are properly stored and used. | | |
| 46 | | Gloves used properly. | | |
| Utensils, Equipment, and Vending | | | | |
| 47 | | Food and non-food contact surfaces cleanable, properly designed, constructed, and used. | | |
| 48 | | Warewashing facilities: installed, maintained, and used; test strips. | | |
| 49 | | Non-food contact surfaces are clean. | | |
| Physical Facilities | | | | |
| 50 | | Hot and cold water available; adequate pressure. | | |
| 51 | | Plumbing installed; proper backflow devices. | | |
| 52 | | Sewage and wastewater properly disposed. | | |
| 53 | | Toilet facilities: properly constructed, supplied, and cleaned. | | |
| 54 | | Garbage and refuse are properly disposed; facilities are maintained. | | |
| 55 | | Physical facilities installed, maintained, and cleaned. | | |
| 56 | | Adequate ventilation and lighting; designated areas used. | | |
| Food Handler and Allergen Awareness | | | | |
| 57 | | Food handler training 410 ILCS 625/ 3.06. | | |
| 58 | | Allergen awareness training for CFPM 410 ILCS 625/3.07 (rest. only). | | |
| 59 | | Allergen awareness notice 410 ILCS 625/3.08 (rest. only). | | |

Person In Charge (Signature) 

Date: 3/11/2025

Inspector (Signature)  

Follow-up: ☐ YES ☒ NO (Check one) Follow-up Date: _____

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Page 2 of 3

Establishment: Sicily Pizza

Establishment #: 25 035

Water Supply: ☒ Public ☐ Private

Waste Water System: ☒ Public ☐ Private

Sanitizer Type: Chlorine

PPM: 50/100

Heat: N/A

TEMPERATURE OBSERVATIONS

| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
|---------------|------|---------------|------|---------------|------|
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NOTES

Please correct any core (C) violations noted below ASAP but at least by next routine inspection

Facility is still classified as a Category II food establishment

The person-in-charge shall have CFPM certification and be on the premises during all hours of operation

Food handler certification is required for all food employees without CFPM certification. "Food employee" means an individual

working with unpackaged food, food equipment or utensils, or food-contact surfaces. Food handler certification is required

within 30 days from the hire date of food employees and valid for three (3) years from date of issuance.

Ensure compliance with Smoke-Free IL Act - public places and places of employment must be completely smoke-free

CFPM Verification (name, expiration date, ID#): Giuseppe Longo

Giuseppe Longo
21727431 - NRFSP
Exp. 2/2026

HACCP Topic: TCS food temperature requirements, no bare hand contact with ready-to-eat food, package labeling

Illinois Requirements: ☐ Use of **non-latex** gloves for food handling and preparation **410 ILCS 180/10.**

☐ Appropriate **default beverage** for children's meal **410 ILCS 620/21.5.**

OBSERVATIONS AND CORRECTIVE ACTIONS

| Item Number | Violations cited in this report must be corrected within the time frames below. |
|-------------|--|
| | No violations observed at time of inspection. |
| | |
| | Please note this establishment is currently closed to the public, but still has the option to schedule private catering functions on-site. Facility is currently preparing frozen pizzas for retail sale. Please note if any changes occur at this facility, please contact WCHD prior to changes occurring. Please notify WCHD prior to resuming regular dine-in/carry-out food/drink operations. |

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Page 3 of 3

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OBSERVATIONS AND CORRECTIVE ACTIONS

[illegible]