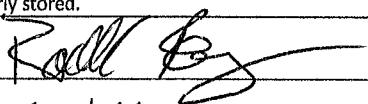


Food Establishment Inspection Report

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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 | | 3 | Date | 7/28/2025 | | | | | |
| | | | Number of Repeat Risk Factor/ Intervention Violations | | 0 | Time In | 10:55 AM | | | | | |
| Establishment Michael's Italian Feast | | Phone (309) 383-2777 | | Email | | | | | | | | |
| Address 605 Upper Ten Mile Creek Road | | City/State Germantown Hills, IL | | ZIP Code 61548 | | | | | | | | |
| License/Permit # 25 047 | | Permit Holder Michael's Italian Feast LLC | | 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 | # | Compliance Status | | COS | R | | | |
| Supervision | | | | | | | | Protection from Contamination | | | | |
| 1 | IN | Person in charge present, demonstrates knowledge, and performs duties. | | | 15 | IN | Food is separated and protected. | | | | | |
| 2 | OUT | Certified Food Protection Manager (CFPM). | | | 16 | OUT | Food-contact surfaces; cleaned and sanitized. | | X | | | |
| Employee Health | | | | | | | | Time/Temperature Control for Safety | | | | |
| 3 | IN | Management, food employee, and conditional employee; knowledge, responsibilities, and reporting. | | | 18 | IN | Proper cooking time and temperatures. | | | | | |
| 4 | IN | Proper use of restriction and exclusion. | | | 19 | N/O | Proper reheating procedures for hot holding. | | | | | |
| 5 | IN | Procedures for responding to vomiting and diarrheal events. | | | 20 | N/O | Proper cooling time and temperature. | | | | | |
| Good Hygienic Practices | | | | | | | | Proper cold holding temperatures. | | | | |
| 6 | IN | Proper eating, tasting, drinking, or tobacco product use. | | | 22 | IN | Proper date marking and disposition. | | | | | |
| 7 | IN | No discharge from eyes, nose, and mouth. | | | 23 | | Time as a Public Health Control; procedures and records. | | | | | |
| Preventing Contamination by Hands | | | | | | | | Consumer Advisory | | | | |
| 8 | IN | Hands clean and properly washed. | | | 25 | N/A | Consumer advisory is provided for raw/undercooked food. | | | | | |
| 9 | IN | No bare-hand contact with RTE food or a pre-approved alternative procedure properly allowed. | | | Highly Susceptible Populations | | | | | | | |
| 10 | IN | Adequate handwashing sinks are properly supplied and accessible. | | | 26 | N/A | Pasteurized foods are used; prohibited foods are not offered. | | | | | |
| Approved Source | | | | | | | | Food/Color Additives and Toxic Substances | | | | |
| 11 | IN | Food obtained from an approved source. | | | 27 | N/A | Food additives: approved and properly used. | | | | | |
| 12 | N/O | Food received at the proper temperature. | | | 28 | IN | Toxic substances are properly identified, stored and used. | | | | | |
| 13 | IN | Food in good condition, safe, and unadulterated. | | | 29 | N/A | Conformance with Approved Procedures | | | | | |
| 14 | N/A | Required records available: molluscan shellfish identification, and parasite destruction. | | | | | 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 | | COS: Corrected on-site during inspection | | | R: Repeat violation | | | | |
| # | X | Compliance Status | COS | R | # | X | Compliance Status | COS | R | | | |
| Safe Food and Water | | | | | | | | Proper Use of Utensils (continued) | | | | |
| 30 | | Pasteurized eggs are used where required. | | | 44 | | Utensils, equipment, and linens: properly stored, dried, and handled. | | | | | |
| 31 | | Water and ice from an approved source. | | | 45 | | Single use/single service articles are properly stored and used. | | | | | |
| 32 | | Variance obtained for specialized processing methods. | | | 46 | | Gloves used properly. | | | | | |
| Food Temperature Control | | | | | | | | Utensils, Equipment, and Vending | | | | |
| 33 | | Proper cooling methods are used; adequate equipment for temperature control. | | | 47 | | Food and non-food contact surfaces cleanable, properly designed, constructed, and used. | | | | | |
| 34 | | Plant food properly cooked for hot holding. | | | 48 | | Warewashing facilities: installed, maintained, and used; test strips. | | | | | |
| 35 | | Approved thawing methods used. | | | 49 | | Non-food contact surfaces are clean. | | | | | |
| 36 | | Thermometers are provided and accurate. | | | Physical Facilities | | | | | | | |
| Food Identification | | | | | | | | Physical Facilities | | | | |
| 37 | | Food properly labeled; original container. | | | 50 | | Hot and cold water available; adequate pressure. | | | | | |
| Prevention of Food Contamination | | | | | | | | Food Handler and Allergen Awareness | | | | |
| 38 | X | Insects, rodents, and animals not present. | | | 51 | | Plumbing installed; proper backflow devices. | | | | | |
| 39 | | Contamination is prevented during food preparation, storage, and display. | | | 52 | | Sewage and wastewater properly disposed. | | | | | |
| 40 | | Personal cleanliness. | | | 53 | | Toilet facilities: properly constructed, supplied, and cleaned. | | | | | |
| 41 | | Wiping cloths: properly used and stored. | | | 54 | | Garbage and refuse are properly disposed; facilities are maintained. | | | | | |
| 42 | | Washing fruits, vegetables, and other plant food. | | | 55 | | Physical facilities installed, maintained, and cleaned. | | | | | |
| Proper Use of Utensils | | | | | | | | Food Handler and Allergen Awareness | | | | |
| 43 | | In-use utensils: properly stored. | | | 56 | | Adequate ventilation and lighting; designated areas used. | | | | | |
| Person in Charge (Signature)  | | | | | | | | Date: 7/28/2025 | | | | |
| Inspector (Signature)  EL | | | | | | | | Follow-up: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (Check one) Follow-up Date: _____ | | | | |

Food Establishment Inspection Report

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Establishment: Michael's Italian Feast

Establishment #: 25 047

Water Supply: Public Private

Waste Water System: Public Private

Sanitizer Type: Chlorine

PPM: <25/100/200

Heat: N/A

TEMPERATURE OBSERVATIONS

| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
|-------------------------|------|------------------------|------|--------------------------------|------|
| Meat sauce/steam well | 125 | Roast beef/RIC prep | 38 | Black beans/RIC prep | 38 |
| Au jus/steam well | 161 | Ham/RIC prep | 37 | Shredded cheese/RIC pizza prep | 37 |
| Meatballs/steam well | 145 | Salami/RIC prep | 41 | Ham/RIC pizza prep | 36 |
| Meat sauce/stove burner | 170 | Turkey/RIC prep | 37 | Sausage/RIC pizza prep | 35 |
| Pasta/stove burner | 176 | Sliced cheese/RIC prep | 37 | Lasagna/RIC | 38 |
| | | Diced chicken/RIC prep | 37 | Ham/RIC | 38 |
| | | Cut lettuce/RIC prep | 36 | Meat sauce/WIC | 41 |
| | | Corn/RIC prep | 36 | Shredded cheese/WIC | 41 |

NOTES

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

Facility is still classified as a Category I food establishment

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

Allergy awareness training certification is required for all certified food protection managers

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.

CFPM Verification (name, expiration date, ID#): Rachel Ramirez

Rachel Ramirez
1j6e34-k6489cg - State Food Safety
Exp. 2/2029

Kevin Millard
7fe773-k1g1a7j -State Food Safety
Exp. 8/2029

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

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. |
|-------------|---|
| 2 | 2-102.12 (C) Observed documentation that only two (2) food employees have current ANSI-approved CFPM certification as required. This facility is categorized as a Category I food establishment, and the person-in-charge shall have CFPM certification and be on the premises during all hours of operation. Provide an adequate number of staff with approved CFPM certification to ensure that the person-in-charge has CFPM certification and is on the premises during all hours of operation. |
| | Please correct this violation within 90 days or at least by next routine inspection. |
| 16 | 4-501.114 (P) Observed at mechanical warewashing machine concentration of chlorine sanitizing rinse measured less than |

Food Establishment Inspection Report

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Establishment: Michael's Italian Feast

Establishment #: 25 047