

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 0 | Date 7/7/2025 |
| | | | | Number of Repeat Risk Factor/ Intervention Violations 0 | Time In 2:50 PM |
| | | | | | Time Out 4:15 PM |
| Establishment | | Phone | Email riffs2012@hotmail.com | | |
| Address | | 470 N. Chestnut Street | City/State | Minonk, IL ZIP Code 61760 | |
| License/Permit # | | 25 124 | Permit Holder | Riff's Inc | |
| | | | Purpose of Inspection | Routine | Risk Category III |

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 | N/A | Certified Food Protection Manager (CFPM). | | 16 | IN | Food-contact surfaces; cleaned and sanitized. | |
| 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 product use. | | 21 | N/A | Proper hot holding temperatures. | |
| 7 | IN | No discharge from eyes, nose, and mouth. | | 22 | N/O | Proper cold holding temperatures. | |
| Preventing Contamination by Hands | | | | 23 | N/A | Proper date marking and disposition. | |
| 8 | IN | Hands clean and properly washed. | | 24 | N/A | Time as a Public Health Control; procedures and 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 are properly supplied and accessible. | | 25 | N/A | Consumer advisory is provided for raw/undercooked food. | |
| Approved Source | | | | Highly Susceptible Populations | | | |
| 11 | IN | Food obtained from an approved source. | | 26 | N/A | Pasteurized foods are used; prohibited foods are not offered. | |
| 12 | N/O | Food received at the 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: molluscan shellfish identification, and parasite destruction. | | 28 | IN | Toxic substances are 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 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 | # | 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 | | | | 50 | | Hot and cold water available; adequate pressure. | | | |
| 37 | | Food properly labeled; original container. | | 51 | X | Plumbing installed; proper backflow devices. | | | |
| Prevention of Food Contamination | | | | 52 | | Sewage and wastewater properly disposed. | | | |
| 38 | X | Insects, rodents, and animals not present. | | 53 | | Toilet facilities: properly constructed, supplied, and cleaned. | | | |
| 39 | | Contamination is prevented during food preparation, storage, and display. | | 54 | | Garbage and refuse are properly disposed; facilities are maintained. | | | |
| 40 | | Personal cleanliness. | | 55 | X | Physical facilities installed, maintained, and cleaned. | | | |
| 41 | | Wiping cloths: properly used and stored. | | 56 | | Adequate ventilation and lighting; designated areas used. | | | |
| 42 | | Washing fruits, vegetables, and other plant food. | | Food Handler and Allergen Awareness | | | | | |
| Proper Use of Utensils | | | | 57 | X | Food handler training 410 ILCS 625/3.06. | | | |
| 43 | | In-use utensils: properly stored. | | 58 | | Allergen awareness training for CFPN 410 ILCS 625/3.07 (rest. only). | | | |
| | | | | 59 | | Allergen awareness notice 410 ILCS 625/3.08 (rest. only). | | | |

Person in Charge (Signature)

Ashley M. Wilkins

Date:

7/7/2025

Inspector (Signature)

Paul Wilkins

Follow-up: YES NO (Check one) Follow-up Date:

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Establishment: Riff's

Establishment #: 25 124

Water Supply: Public Private

Waste Water System: Public Private

Sanitizer Type: Quaternary ammonium

PPM: 200

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 III food establishment. Facility only offers commercially-prepared, ready-to-eat frozen pizzas to customers at this time. If facility chooses to offer additional food items to customers, this facility may be re-classified depending upon the food items offered for sale to customers. Please contact WCHD prior to changing current menu to ensure compliance.

Ensure compliance with Smoke-Free IL Act - public places and places of employment must be completely smoke-free inside and within 15 feet from entrances, exits, windows that open and ventilation intakes; signage posted at entrances & exits; no smoking or vaping or e-cigarette use in food & drink prep area, dishwashing area, storage area, and within building structure.

CFPM Verification (name, expiration date, ID#): Ashley Kyle

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

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. |
|-------------|--|
| 38 | 6-202.15 (C) Observed exterior back door (west) to establishment not completely tight-fitting against door jamb along lower right side of door jamb and air & light penetrating and front door to establishment (east) not completely tight-fitting along bottom of door threshold and air & light penetrating. Outer openings of a food establishment shall be protected against the entry of insects and rodents by: (1) filling or closing holes and other gaps along floors, walls, and ceilings; (2) closed, tight-fitting windows; and (3) solid, self-closing, tight-fitting doors. |
| | Please correct this violation within 90 days or at least by next routine inspection. |

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Establishment: Riff's

Establishment #: 25 124

OBSERVATIONS AND CORRECTIVE ACTIONS