

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	Riff's	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					Time/Temperature Control for Safety				
3	IN	Management, food employee, and conditional employee; knowledge, responsibilities, and reporting.			18	N/O	Proper cooking time and temperatures.		
4	IN	Proper use of restriction and exclusion.			19	N/A	Proper reheating procedures for hot holding.		
5	IN	Procedures for responding to vomiting and diarrheal events.			20	N/A	Proper cooling time and temperature.		
Good Hygienic Practices					Consumer Advisory				
6	IN	Proper eating, tasting, drinking, or tobacco product use.			22	N/O	Proper cold holding temperatures.		
7	IN	No discharge from eyes, nose, and mouth.			23	N/A	Proper date marking and disposition.		
Preventing Contamination by Hands					Highly Susceptible Populations				
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.			Food/Color Additives and Toxic Substances				
10	IN	Adequate handwashing sinks are properly supplied and accessible.			27	N/A	Food additives: approved and properly used.		
Approved Source					Conformance with Approved Procedures				
11	IN	Food obtained from an approved source.			28	IN	Toxic substances are properly identified, stored and used.		
12	N/O	Food received at the proper temperature.			29	N/A	Compliance with variance/specialized process/HACCP.		
13	IN	Food in good condition, safe, and unadulterated.							
14	N/A	Required records available: molluscan shellfish identification, and parasite destruction.							

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 CFPM 410 ILCS 625/3.07 (rest. only).		
					59		Allergen awareness notice 410 ILCS 625/3.08 (rest. only).		

Person in Charge (Signature) *Ashley Miller* Date: 7/7/2025

Inspector (Signature) *Paul Wilkins* Follow-up: ☐ YES ☒ NO (Check one) Follow-up Date: _____

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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

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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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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OBSERVATIONS AND CORRECTIVE ACTIONS

[illegible]