

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 3 | Date 10/30/2025 |
| | | | Number of Repeat Risk Factor/ Intervention Violations 0 | Time In 9:25 AM |
| Establishment Dollar General #20802 | | Phone (309) 248-0566 | Email | Time Out 10:50 AM |
| Address 501 W. Parkside Drive | | City/State Washburn, IL | ZIP Code 61570 | |
| License/Permit # 25 086 | | Permit Holder DG Retail LLC | 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 | | | |
| Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. | | | | COS: corrected on-site during inspection | | | |
| Public health interventions are control measures to prevent foodborne illness or injury. | | | | R: repeat violation | | | |

| # | Compliance Status | COS | R |
|--|-------------------|--|---|
| Supervision | | | |
| 1 | OUT | Person in charge present, demonstrates knowledge, and performs duties. | X |
| 2 | N/A | 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 | N/A | 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 | OUT | Food in good condition, safe, and unadulterated. | X |
| 14 | N/A | Required records available: molluscan shellfish identification, and parasite destruction. | |

| # | Compliance Status | COS | R |
|--|-------------------|--|---|
| Protection from Contamination | | | |
| 15 | IN | Food is separated and protected. | |
| 16 | N/A | 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/A | Proper cooking time and temperatures. | |
| 19 | N/A | Proper reheating procedures for hot holding. | |
| 20 | N/A | Proper cooling time and temperature. | |
| 21 | N/A | Proper hot holding temperatures. | |
| 22 | IN | Proper cold holding temperatures. | |
| 23 | N/A | 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 | OUT | Toxic substances are properly identified, stored and used. | X |
| 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. | | |
| Proper Use of Utensils (continued) | | | | |
| 44 | | Utensils, equipment, and linens: properly stored, dried, and handled. | | |
| 45 | X | 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 CFPN 410 ILCS 625/3.07 (rest. only). | | |
| 59 | | Allergen awareness notice 410 ILCS 625/3.08 (rest. only). | | |

Person in Charge (Signature) Brianna Anglin Date: 10/30/2025

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

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Page 2 of 3

Establishment: Dollar General #20802

Establishment #: 25 086

Water Supply: Public Private

Waste Water System: Public Private

Sanitizer Type: Chlorine

PPM: 100

Heat: N/A

TEMPERATURE OBSERVATIONS

| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
|---------------|------|------------------|------|---------------|------|
| | | Milk/RIC | 37 | | |
| | | Cream cheese/RIC | 38 | | |
| | | Cheese/RIC | 38 | | |
| | | Ham/RIC | 35 | | |
| | | Ham & turkey/RIC | 37 | | |
| | | Milk/RIC | 40 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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

Ensure exterior packaged ice freezers (Home City Ice) are kept locked at all times except when in use for food safety

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#): Brianna Angelica

HACCP Topic: TCS food temperature requirements, proper chemical storage requirements, 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. |
|-------------|---|
| 1 | 2-102.11 (Pf) Observed person-in-charge did not demonstrate knowledge of the procedures necessary to ensure that |
| | poisonous or toxic materials are safely stored and priority violation (#28) noted during inspection. Based on the risks |
| | inherent to the food operation, during inspections and upon request the person-in-charge shall demonstrate to the |
| | regulatory authority knowledge of foodborne disease prevention, application of the hazard analysis and critical control |
| | principles, and the requirements of this Code. The person-in-charge shall demonstrate this knowledge by complying |
| | with this Code by having no violations of priority items during the current inspection. Discussed HACCP concepts |

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Page 3 of 3

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