

Food Establishment Inspection Report

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|--|--|--|--|--------------------------|
| Local Health Department Name and Address Woodford County Health Department 1831 S. Main Street, Eureka, IL 61530 | | No. of Risk Factor/Intervention Violations 4 | | Date 07/29/2024 |
| Establishment Cinco De Mayo Mexican Restaurant | | No. of Repeat Risk Factor/Intervention Violations 0 | | Time In 10:40 AM |
| | | | | Time Out 12:30 PM |
| Street Address 939 W. Mt Vernon Street | | Permit Holder Cinco De Mayo Mexican Restaurant Inc | | Risk Category I |
| City/State Metamora, IL | | Purpose of Inspection Routine Inspection | | |

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item
 IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable
 Mark "X" in appropriate box for COS and/or R
 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 | Out | 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 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 | Out | Adequate handwashing sinks properly supplied and accessible | X | |
| Approved Source | | | | |
| 11 | In | Food obtained from approved source | | |
| 12 | N/O | Food received at proper temperature | | |
| 13 | In | Food in good condition, safe, and unadulterated | | |
| 14 | N/A | Required records available: shellstock tags, 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 box if numbered item is not in compliance | | | Mark "X" in appropriate box for COS and/or R | |
| COS=corrected on-site during inspection | | | R=repeat violation | |
| | | | COS | R |
| Safe Food and Water | | | | |
| 30 | Pasteurized eggs used where required | | | |
| 31 | Water and ice from approved source | | | |
| 32 | Variances obtained for specialized processing methods | | | |
| Food Temperature Control | | | | |
| 33 | Proper cooling methods used; adequate equipment for temperature control | | | |
| 34 | Plant food properly cooked for hot holding | | | |
| 35 | Approved thawing methods used | | | |
| 36 | Thermometers provided & accurate | | | |
| Food Identification | | | | |
| 37 | Food properly labeled; original container | | | X |
| Prevention of Food Contamination | | | | |
| 38 | Insects, rodents, and animals not present | | | |
| 39 | Contamination prevented during food preparation, storage and display | | | |
| 40 | Personal cleanliness | | | |
| 41 | Wiping cloths: properly used and stored | | | |
| 42 | Washing fruits and vegetables | | | |
| Proper Use of Utensils | | | | |
| 43 | In-use utensils: properly stored | | | |
| 44 | Utensils, equipment & linens: properly stored, dried, & handled | | | |
| 45 | Single-use/single-service articles: 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, & used; test strips | | | |
| 49 | Non-food contact surfaces clean | | | |
| Physical Facilities | | | | |
| 50 | Hot and cold water available; adequate pressure | | | |
| 51 | Plumbing installed; proper backflow devices | | | |
| 52 | Sewage and waste water properly disposed | | | |
| 53 | Toilet facilities: properly constructed, supplied, & cleaned | | | |
| 54 | Garbage & refuse properly disposed; facilities maintained | | | |
| 55 | Physical facilities installed, maintained, and clean | | | |
| 56 | Adequate ventilation and lighting; designated areas used | | | |
| Employee Training | | | | |
| 57 | All food employees have food handler training | | | |
| 58 | Allergen training as required | | | |

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Establishment: Cinco De Mayo Mexican Restaurant

Establishment #: 24 192

Water Supply: Public Private

Waste Water System: Public Private

Sanitizer Type: Chlorine

PPM: 25-49/50/100

Heat: N/A

TEMPERATURE OBSERVATIONS

| Item/Location | Temp | Item/Location | Temp | Item/Location | Temp |
|-------------------------------|------|--------------------------|------|---------------|------|
| Taco meat/steam table | 136 | Shredded cheese/RIC prep | 36 | Salsa/WIC | 39 |
| Shredded chicken/steam table | 144 | Cut lettuce/RIC prep | 38 | Milk/WIC | 40 |
| Refried beans/steam table | 120 | Sour cream/RIC prep | 34 | Salsa/RIC | 40 |
| Queso/steam table | 86 | Guacamole/RIC prep | 35 | Queso/RIC | 40 |
| Queso/steam unit wait station | 141 | Pico De Gallo/RIC prep | 38 | | |
| | | Diced tomatoes/RIC prep | 38 | | |
| | | Chorizo/RIC prep | 40 | | |
| | | Shredded cheese/WIC | 41 | | |
| | | Refried beans/WIC | 39 | | |

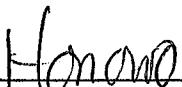
OBSERVATIONS AND CORRECTIVE ACTIONS

| 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 CFPN certification. This facility is classified as a Category I food establishment, and the person-in-charge shall have current CFPN certification and be on the premises during all hours of operation. Provide an adequate number of staff with approved CFPN certification to ensure that the person-in-charge has CFPN 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. |
| 10 | 6-301.14 (C) Observed at bar and in kitchen a sign or poster that notifies food employees to wash their hands not provided at handwashing sinks used by food employees. Hand washing signs provided and posted during inspection. |
| 21 | 3-501.16 (P) Observed in kitchen at steam table internal temperatures of refried beans measured 120° F and queso measured 86° F using a food temperature measuring device with metal-stem. Time/Temperature Control for Safety Food shall be maintained at 135° F or above. Reviewed TCS food hot-holding requirements and discussed HACCP concept with person-in-charge and employee during inspection. Refried beans and queso had been in steam table less than 1 hour, according to person-in-charge, and reheated on stove to 165° F by employee during inspection. Recheck - OK. |
| 28 | 7-102.11 (P) Observed in kitchen by fire extinguisher pump spray container (with hose) containing yellow liquid without name identifying contents on container. Poisonous or toxic materials shall be stored so they can not contaminate food, equipment, utensils, linens, and single-service and single-use articles by: (A) separating the poisonous or toxic materials by spacing or partitioning; and (B) locating the poisonous or toxic materials in an area that is not above food, equipment, utensils, linens, and |

CFPM Verification (name, expiration date, ID#): Honorio Carrillo

| | | | |
|--|---|--|--|
| Honorio Carrillo 2154630 - Prometric Exp. 1/2027 | Juan Arenas 2154622 - Prometric Exp. 1/2027 | | |
|--|---|--|--|

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


Person in Charge (Signature)

Jul 29, 2024

Date


Paul Willis

Inspector (Signature)

Follow-up: Yes No (Check one)

Follow-up Date: _____

Food Establishment Inspection Report

Establishment: Cinco De Mayo Mexican Restaurant

Establishment #: 24 192

Honoro
Person in Charge (Signature)

Jul 29, 2024

Date

Follow-up: Yes No (Check one)

Follow-up Date: