



Colorado Department of Public Health and Environment

Colorado Department of Public Health and Environment
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 License #: 28-42531-0006

ESTABLISHMENT CARL'S JR. #7201				OWNER NAME BY THE RIO, LLC			
ADDRESS 502 E MAIN ST FLORENCE CO						ZIP 81226	
COUNTY	FIRM ID	INSPECTOR ID	DATE			TRAVEL TIME	INSPECT TIME
22	1567	259	MONTH	DAY	YEAR	20	55
			02	24	11		
TYPE <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> FOLLOW-UP <input type="checkbox"/> PRE-OPERATIONAL <input type="checkbox"/> COMPLAINT							

RETAIL FOOD ESTABLISHMENT FOOD INSPECTION REPORT

Items circled below identify violations to be corrected as indicated by the regulatory authority. Failure to comply may result in further action by the regulatory authority.

Red - Critical Items: These items related directly to foodborne illness.			
1. FOOD SOURCE		9. FOOD LABELING, FOOD PROTECTION	
a. Approved source	c. Cross-contamination	a. Original container, properly labeled	b. Food protected from contamination
b. Wholesome, free of spoilage	d. HACCP plan	10. EQUIPMENT DESIGN, CONSTRUCTION	
2. PERSONNEL		<input checked="" type="checkbox"/> a. Food-contact surfaces	
a. Personnel w/infections restricted	e. Smoking, eating, drinking	b. Nonfood-contact surfaces	c. Dishwashing facilities
b. Wounds properly covered	f. Demonstration of knowledge	11. TESTING DEVICES	
c. Hands washed as needed	g. Preventing food contamination from bare hands	a. Refrigeration units provided with accurate, conspicuous thermometer	c. Chemical test kits provided, accessible
d. Hygienic practices		b. Dishmachine provided with accurate thermometer and gauge	
3. FOOD TEMPERATURE CONTROL		12. CLEANING OF EQUIPMENT AND UTENSILS	
a. Rapidly cool foods to 41°F or less	e. Cold hold at 41°F or less	a. Food-contact surfaces	c. Dishwashing operations
b. Rapidly reheat to 165°F or greater	f. Temperature control equipment - food thermometer (probe type)	b. Nonfood-contact surfaces	d. Wiping cloths
c. Hot hold at 135°F or greater	g. Temperature control equipment - adequate equipment to maintain food temperatures	13. UTENSILS, SINGLE-SERVICE ARTICLES	
d. Required cooking temperature		a. Utensils provided, used, stored	c. No reuse of single-service articles
4. SANITIZATION RINSE		b. Single-service articles stored, dispensed, used	
	<u>Temperature</u>	<u>Concentration</u>	<u>Exposure</u>
a. Manual	_____	200 ppm	_____
b. Mechanical	_____	_____	_____
c. In-Place	_____	_____	_____
Sanitizer: Chlorine	<input checked="" type="checkbox"/> Quaternary Ammonium	Other:	
5. WATER, SEWAGE, PLUMBING SYSTEMS			
a. Safe water source	c. Backflow, back_siphonage	14. PHYSICAL FACILITIES	
b. Hot and cold water under pressure	d. Sewage disposal	a. Plumbing: installed, maintained	<input checked="" type="checkbox"/> f. Locker rooms
6. HANDWASHING AND TOILET FACILITIES		<input checked="" type="checkbox"/> b. Garbage and refuse	g. Premises maintained
a. Adequate number, location	c. Soap and drying devices	c. Floors, walls, ceilings	h. Separation of living, laundry
b. Accessible		d. Lighting	i. Restroom facilities
7. PEST CONTROL		e. Ventilation	
a. Evidence of insects or rodents	c. Animals prohibited	15. OTHER OPERATIONS	
b. Pesticide application		a. Personnel: clean clothes, hair restraints, authorized	b. Linen properly stored
8. POISONOUS OR TOXIC ITEMS		Recommended Regulatory Action	
a. Properly stored	c. Properly used	(s)	
b. Properly labeled		<input type="checkbox"/> 1 st Notification of Non-Compliance	
		<input type="checkbox"/> Additional Notification of Non-Compliance	
		<input type="checkbox"/> Notice of Civil Penalty	
		<input type="checkbox"/> Final Order of Civil Penalty	
		<input type="checkbox"/> Revocation/License Suspension	
		On-site Regulatory Actions	
		<input type="checkbox"/> Voluntary Closure	
		<input type="checkbox"/> Embargo Notice	
		<input type="checkbox"/> Voluntary Condemnation	
		Resolution(s) & Interventions	
		<input type="checkbox"/> 1 st Compliance Warning Letter	
		<input type="checkbox"/> Additional Compliance Warning Letter	
		<input type="checkbox"/> Voluntary Closure Release	
		<input type="checkbox"/> Embargo Release	
		<input type="checkbox"/> Compliance Agreement	
		<input type="checkbox"/> On-Site Training	
		<input type="checkbox"/> HACCP Study	
		<input type="checkbox"/> Announced Inspection	
		<input type="checkbox"/> FDA Documented Inspection	

ENVIRONMENTAL HEALTH SPECIALIST:	RECEIVED BY:
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Form RF001-1_revH_InspectionReport_0506

CIVCS: Yes No

On-site Follow-Up: Yes No

