



Colorado Department  
of Public Health  
and Environment

# Colorado Department of Public Health and Environment

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Page 1 of 2  
License #: 05-16431-0000

ESTABLISHMENT <b>FREMONT COUNTY HEADSTART</b>					OWNER NAME <b>FREMONT COUNTY HEADSTART</b>			
ADDRESS <b>1718 BROOKSIDE CANON CITY CO</b>						ZIP <b>81212</b>		
COUNTY	FIRM ID	INSPECTOR ID	DATE			TRAVEL TIME	INSPECT TIME	TYPE
22	1599	259	MONTH	DAY	YEAR	10	30	<input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> FOLLOW-UP <input type="checkbox"/> PRE-OPERATIONAL <input type="checkbox"/> COMPLAINT
			09	28	10			

## 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.

<b>Red – Critical Items: These items related directly to foodborne illness.</b>			
<b>01. FOOD SOURCE</b>		<b>09. FOOD LABELING, FOOD PROTECTION</b>	
a. Approved source	c. Cross-contamination	a. Original container, properly labeled	b. Food protected from contamination
b. Wholesome, free of spoilage	d. HACCP plan		
<b>02. PERSONNEL</b>		<b>10. EQUIPMENT DESIGN, CONSTRUCTION</b>	
a. Personnel w/infections restricted	e. Smoking, eating, drinking	a. Food-contact surfaces	<input checked="" type="checkbox"/> c. Dishwashing facilities
b. Wounds properly covered	f. Demonstration of knowledge	b. Nonfood-contact surfaces	
c. Hands washed as needed	g. Preventing food contamination from bare hands	<b>11. TESTING DEVICES</b>	
d. Hygienic practices		a. Refrigeration units provided with accurate, conspicuous thermometer	c. Chemical test kits provided, accessible
<b>03. FOOD TEMPERATURE CONTROL</b>		b. Dishmachine provided with accurate thermometer and gauge	
a. Rapidly cool foods to 41°F or less	e. Cold hold at 41°F or less	<b>12. CLEANING OF EQUIPMENT AND UTENSILS</b>	
b. Rapidly reheat to 165°F or greater	f. Temperature control equipment - food thermometer (probe type)	a. Food-contact surfaces	c. Dishwashing operations
c. Hot hold at 135°F or greater	g. Temperature control equipment - adequate equipment to maintain food temperatures	b. Nonfood-contact surfaces	d. Wiping cloths
d. Required cooking temperature		<b>13. UTENSILS, SINGLE-SERVICE ARTICLES</b>	
<b>04. SANITIZATION RINSE</b>		a. Utensils provided, used, stored	c. No reuse of single-service articles
	<u>Temperature</u>	<u>Concentration</u>	<u>Exposure</u>
a. Manual	_____	_____	_____
b. Mechanical	163 Deg.F	_____	_____
c. In-Place	_____	_____	_____
Sanitizer: Chlorine	Quaternary Ammonium	Other:	
<b>05. WATER, SEWAGE, PLUMBING SYSTEMS</b>		<b>14. PHYSICAL FACILITIES</b>	
a. Safe water source	c. Backflow, back_siphonage	<input checked="" type="checkbox"/> a. Plumbing: installed, maintained	e. Ventilation
b. Hot and cold water under pressure	d. Sewage disposal	<input checked="" type="checkbox"/> a. Plumbing: installed, maintained	f. Locker rooms
<b>06. HANDWASHING AND TOILET FACILITIES</b>		<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
<b>07. PEST CONTROL</b>		<b>15. OTHER OPERATIONS</b>	
a. Evidence of insects or rodents	c. Animals prohibited	a. Personnel: clean clothes, hair restraints, authorized	b. Linen properly stored
b. Pesticide application		<b>Recommended Regulatory Action (s)</b>	
<b>08. POISONOUS OR TOXIC ITEMS</b>		<input type="checkbox"/> 1 <sup>st</sup> Notification of Non-Compliance	
a. Properly stored	c. Properly used	<input type="checkbox"/> Additional Notification of Non-Compliance	
b. Properly labeled		<input type="checkbox"/> Notice of Civil Penalty	
		<input type="checkbox"/> Final Order of Civil Penalty	
		<input type="checkbox"/> Revocation/License Suspension	
		<b>On-site Regulatory Actions</b>	
		<input type="checkbox"/> Voluntary Closure	
		<input type="checkbox"/> Embargo Notice	
		<input type="checkbox"/> Voluntary Condemnation	
		<b>Resolution(s) &amp; Interventions</b>	
		<input type="checkbox"/> 1 <sup>st</sup> 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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