



# Colorado Department of Public Health and Environment

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Colorado Department of Public Health and Environment

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License #: 41-89078-0000

ESTABLISHMENT <b>CANON COFFEE CAFÉ</b>					OWNER NAME <b>1520 ROYAL LLC</b>			
ADDRESS <b>1520 ROYAL GORGE BLVD STE A CANON CITY CO</b>						ZIP <b>81212</b>		
COUNTY	FIRM ID	INSPECTOR ID	DATE			TRAVEL TIME	INSPECT TIME	TYPE
22	9710	259	MONTH 07	DAY 12	YEAR 10	5	10	<input type="checkbox"/> REGULAR <input checked="" 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.

<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		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>	b. Single-service articles stored, dispensed, used			
a. Manual	_____	_____	_____	<b>14. PHYSICAL FACILITIES</b>			
b. Mechanical	_____	_____	_____	a. Plumbing: installed, maintained		f. Locker rooms	
c. In-Place	_____	_____	_____	b. Garbage and refuse		g. Premises maintained	
Sanitizer: Chlorine	Quaternary Ammonium	Other:		c. Floors, walls, ceilings		h. Separation of living, laundry	
<b>05. WATER, SEWAGE, PLUMBING SYSTEMS</b>				d. Lighting		i. Restroom facilities	
a. Safe water source		d. Sewage disposal		e. Ventilation			
<input checked="" type="checkbox"/> b. Hot and cold water under pressure				<b>15. OTHER OPERATIONS</b>			
c. Backflow, back_siphonage				a. Personnel: clean clothes, hair restraints, authorized		b. Linen properly stored	
<b>06. HANDWASHING AND TOILET FACILITIES</b>				<b>Recommended Regulatory Action (s)</b>			
a. Adequate number, location		c. Soap and drying devices		<input type="checkbox"/> 1 <sup>st</sup> Notification of Non-Compliance			
b. Accessible				<input type="checkbox"/> Additional Notification of Non-Compliance			
<b>07. PEST CONTROL</b>				<input type="checkbox"/> Notice of Civil Penalty			
a. Evidence of insects or rodents		c. Animals prohibited		<input type="checkbox"/> Final Order of Civil Penalty			
b. Pesticide application				<input type="checkbox"/> Revocation/License Suspension			
<b>08. POISONOUS OR TOXIC ITEMS</b>				<b>On-site Regulatory Actions</b>			
a. Properly stored		c. Properly used		<input type="checkbox"/> Voluntary Closure			
b. Properly labeled				<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:

