

Violations cited in this report shall be corrected within the time frames specified below, but within a period not to exceed 3 calendar days for priority items, 10 days for priority foundation items (8-405.11) or 90 days for core items (8-406.11).

		F	ood Establishr	ment	t Ir	าร	spe	ectio	on R	eport		Pa	age	_ of <u></u>	
Delaware Division of Public Health							No	o of Ris	sk Facto	r/Intervention Vio	lations	0	Date	1/2/20	
Office of Food Protection							Rep	eat Ris	k Factor	/Intervention Viol		0	Time in	1:00	
417 Federal St., Dover, DE 19901 Score (optional) MA Time Out 355 Establishment Address City/State Zip Code Telephone															
		Restaurant				DE		Zip Code	(Telephor	62 - 4030				
	e/Permi	t# /	Permit Holder						pection		Est. Type		The state of the s	Category	
K) 981 754									- Folh	gurun	FF			W	
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 appropriate box for COS and/or R															
IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable COS=corrected on-site during inspection R=repeat violation															
Co	mplian	ce Status	AVA	OS R	2		Comp	liance S					COB R		
			ervision	-	T	-	17	IN OUT		Proper disposition		i, pre∨	lously ser	ved,	
1 IN (TUC		esent, demonstrates knowledge	е,	_			1		reconditioned & u Time/Temperatur		or Paf	er.		
2 IN (OUT N/A	and performs duties	eties Manager		+	+	18	IN/OUT	N/A N/O	T					
2 114 4	2 IN OUT N/A Certified Food Protection Manager Employee Health				1				N/A N/O	Proper cooking tir		-			
		To-		loves	ľ				N/A N/O	Proper cooling tim					
3 IN (TUC	knowledge, responsi	employee and conditional employees and reporting	loyee;					N/A N/O	Proper hot holding					
4 IN (OUT	Proper use of restric			1				N/A N/O	Proper cold holding					
5 IN 0	TUC	Procedures for respon	nding to vomiting and diarrheal e	events					N/A N/O	Proper date mark			1		
	- 1	Good Hygi	enic Practices		1	į	24	IN OUT	N/A N/O	Time as a Public He	ealth Control	proce	dures & red	cords	
6 IN 0			drinking, or tobacco use		1						er Advisory			2 4	
7 IN 0	DUT		yes, nose, and mouth	-	7		25	IN OUT	N/A	Consumer advisory				food	
la t	OUT.		amination by Hands	D.	4		201			Highly Suscep	The second secon				
8 IN (001	N/O Hands clean & prope	The state of the s	1	-	-	26	IN OUT		Pasteurized foods ad/Color Additives				ered	
9 IN 0	ANN TUC		t with RTE food or a pre-appro	oved	-	1	27	IN OUT							
10 IN 0	TUC	alternative procedure	sinks properly supplied and secen	- N		1		IN OUT		Food additives: ap					
10 "			ed Source	SSIDIO	/			11 001		onformance with				sed	
11 IN 0	DUT	Food obtained from		17			29	N OUT		Compliance with va	The second second			CCP	
	A/N TUC	N/O Food received at pro		1			1	109.		Toomphance with va	iliance/apeci	anz.wu p	1000337117	OOF	
13 IN 0	TUC	Food in good condition, safe, & unadulterated					_)							
		Banuland sacreda ma	Required records available: shellstock tags,					Risk factors are important practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public health							
17 110	parasite destruction						interventions are control measures to prevent foodborne illness or injury.								
100			Protection from Contamination												
	A/N TUC														
16 IN 0	A/N TUC	Food-contact surface	es; cleaned & sanitized	OD RET	11.6	DE	286	TICEE				_			
		0 10 10 10			-	27/12	THE REAL PROPERTY.								
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 Proper Use of Utensils															
30	Pa	steurized eggs used when			T		43		In-use u	tensils: properly st	ored				
31		ater & ice from approved s	0.				44			equipment & linens		ored, d	ried, & har	ndled	
32			lized processing methods				45			se/single-service art					
		Food Tempe	erature Control				46		Gloves	used properly					
33		· -	d; adequate equipment for							Utensils, Equip	Toronto Harrison Management	CONTRACTOR OF THE PARTY OF THE			
		nperature control			-	-	47			non-food contact s					
34 35		Plant food properly cooked for hot holding			+	-	40			designed, constru					
36		Approved thawing methods used			+	-	49			shing facilities: install		ed, & u	sed; test s	trips	
Thermometers provided & accurate Food Identification					-	-	45		Non-too	d contact surfaces	Facilities				
37	IEO			T		50		Hot & or	old water available:		rocour		-		
Food properly labeled; original container Prevention of Food Contamination							51			g installed; proper			e		
38 Insects, rodents, & animals not present				1	T		52			& waste water pro					
39		Contamination prevented during food preparation, storage & display					53			cilities: properly co			d, & clean	ed	
40		Personal cleanliness					54			e & refuse properly					
41	Wi	iping cloths: properly used & stored					55		Physical	l facilities installed,	maintained	, & cle	an		
42	Wa	ashing fruits & vegetables	1111	1	7		56		Adequat	e ventilation & ligh	ting; design	ated a	reas used		
Person	in Char	ge (Signature)	Juliolas La	na	(à	0	-				Date: //	2/2)		
Inspec	tor (Sign	nature) No - Els	t -038				1	Follow-	up:	YES NO (Circle	one) Foll	low-ur	Date:		
1000	1 2				_	_			THE CO.	Tonient	1 1 01	- F. F. A. A. P. P.			



Inspection Report Page of of O											
417 Federal St., Dover, DE 19901 N 98 1754	1/2/20										
Establishment Address Auxunt Address City/State (1) Code Te	Telephone 302 - 4082										
OBSERVATIONS AND CORRECTIVE ACTIONS											
Item Number											
8-404.11 @ Govatos Restaurent man resume operation, Pest (vodent) infestation											
has been approved to rappen by Dept of Licenses and inspections (L+I).											
10 50/111 PP Pest infestion has been eliminated. No droppings observed in Shand											
Case. The case and floor has been cleaned and sanitraid. We droppings											
disserved in Kitchen, prep station/wait are or Tovern area. Two refrigerious and											
a freeze have been removed from wait area. Floors, walk, and ceiling areas that											
Well Weater and one rook a note over seater.	Were Weather, caracked and had a hole are sealed.										
The owner has stated that he will no longer make food for the	restaurant.										
He will only make and sell chocolate and serve beverges at the Tavern											
has been decluttered. All food in retingratures have been discarded tood in											
Ice Cream frazer will be discarded											
All post entry pants have been sealed. We ten Post service is still of	providing										
Tromping Saviac.											
Mild South											
Person in Charge (Signature) Date: Date:											
Inspector (Signature) MCU - Tet-5 II - 0/3 8 Date: 504123-57 06/15											