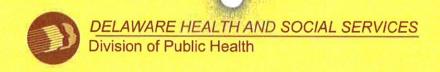


Violations cited in this report shall be corrected within the time frames specified below, but within a period not to exceed 3 calendar days for priority items, 10 days for priority foundation items (8-405.11) or 90 days for core items (8-406.11).

Food Establishment Inspection Report Pageof							
Delaware Division of Public Health			No. of Risk Factor/Intervention Violations Date 6/27/19				
Office of Food Protection			No. of Repeat Risk Factor/Intervention Violations U Time In USA				
417 Federal St., Dover, DE 19901 Establishment Address	1			Score (optional) MA Time Out /2 S			
Wheely's farmstan Cafe 791, Frenchis		Cit	ty/Sta	te / v / gulfosth D-Zip Code > Telephone Linguis			
License/Permit # Permit Holder Wheely's New Co	all.	VD.	1000	of Invention			
10016	5-		16	INPRINT FE NIA			
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=no	_	THE RESERVE AND ADDRESS OF	ble	COS=corrected on-site during inspection R=repeat violation			
	08	R	-	Compliance Status cos R			
Supervision 1 IN OUT Person in charge present, demonstrates knowledge,	Т		17	IN OUT Proper disposition of returned, previously served, reconditioned & unsafe food			
1 IN OUT Person in charge present, demonstrates knowledge, and performs duties				Time/Temperature Control for Safety			
2 IN OUT N/A Certified Food Protection Manager			18	IN OUT N/A N/O Proper cooking time & temperatures			
Employee Health				IN OUT N/A N/O Proper reheating procedures for hot holding			
3 IN OUT Management, food employee and conditional employee;	T		20	IN OUT N/A N/O Proper cooling time and temperature			
knowledge, responsibilities and reporting				IN OUT N/A N/O Proper hot holding temperatures			
4 IN OUT Proper use of restriction and exclusion	-			IN OUT N/A N/O Proper cold holding temperatures			
5 IN OUT Procedures for responding to vomiting and diarrheal events Good Hygienic Practices				IN OUT N/A N/O Proper date marking and disposition			
6 IN OUT N/O Proper eating, tasting, drinking, or tobacco use	-	-	24	IN OUT N/A N/O Time as a Public Health Control; procedures & records			
7 IN OUT N/O No discharge from eyes, nose, and mouth	1	-	25	N OUT N/A Consumer advisory provided for raw/undercooked food			
Preventing Contamination by Hands		1	20	Highly Sosceptible Populations			
8 IN OUT N/O Hands clean & properly washed	T		26	IN-OUT N/A Pasteurized foods used; prohibited foods not offered			
9 IN OUT N/A N/O No bare hand contact with RTE food or a pre-approved	1		V TO	Food/Cofor Additives and Toxic Substances			
alternative procedure properly allowed				IN OUT N/A Food additives: approved & properly used			
10 IN OUT Adequate handwashing sinks properly supplied and accessible			28	IN OUT N/A Toxic substances properly identified, stored, & used			
Approved Source 11 IN OUT Food obtained from approved source				Conformance with Approved Procedures			
	+	1	29	IN OUT N/A Compliance with variance/specialized process/HACCP			
IN OUT	1	4	-				
Paris I was a first of the same of the sam	4	-	1	Risk factors are important practices or procedures identified as the most			
prevalent contributing factors of foodborne illness or injury. Public health							
Protection from Contamination							
15 IN OUT N/A N/O Food separated and protected	7		-				
16 IN OUT N/A Food-contact surfaces; cleaned & sanitized							
GOOD RETAIL PRACTICES							
Good Retail Practices are preventative measures to control the	ne a	ıdditi	on 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							
Safe Food and Water	29	R	-	Proper Use of Utensils			
30 Pasteurized eggs used where required	T		43				
31 Water & ice from approved source	+		44	in disc dictions, properly stored			
32 Variance obtained for specialized processing methods	1		45	Otensis, edupment & mens, properly stored, dried, & nandled			
Food Temperature Control			46	Gloves used properly			
33 Proper cooling methods used; adequate equipment for	T	-		Utensits, Equipment and Vending			
temperature control	1		47	Food & non-food contact surfaces cleanable,			
Plant food properly cooked for hot holding Approved this type methods used				properly designed, constructed, & used			
A proved trialwing methods disedy	1		48	Warewashing facilities: installed, maintained, & used; test strips			
The months of the state of the	L		49	Non-food contact surfaces clean			
Food Identification 37 Food properly labeled; original container	T		50	Physical Facilities			
Prevention of Food Contamination	L		51	Hot & cold water available; adequate pressure			
38 Insects, rodents, & animals not present	T		52	Plumbing installed; proper backflow devices Sewage & waste water properly disposed			
39 Contamination prevented during food preparation, storage & display	+		53	Toilet facilities: properly constructed, supplied, & cleaned			
40 Personal cleanliness	T		54	Garbage & refuse properly disposed; facilities maintained			
Wiping cloths: properly used & stored			55	Physical facilities installed, maintained, & clean			
42 Washing fruits & vegetables	L		56	Adequate ventilation & lighting; designated areas used			
Person in Charge (Signature) X Date: 6/27/19							
nspector (Signature) /XC Eff 5/1 03/4 Follow-up: YES (NO (Circle one) Follow-up Date:							
				The second			



	Inspecti	on Report	Page of				
Health Sy	Division of Public Health ystems Protection ral St., Dover, DE 19901	License/Permit# None	Date (6/27/19				
Establishn	nent farmely 10 Address of Carolina	City/State	Zip Code Telephone 479438				
Establishment Wheely's farmstand Cafe 191 frenchlown to New Castle DE 19720 3025479438 OBSERVATIONS AND CORRECTIVE ACTIONS							
Item Number			7				
	Wheely's farmsland Cap	le is operating u	officer permit				
	8-301.11 PD Unpermitted	Good establishme	nt found.				
Person in charge has been told to cease							
	and decist	operations, immed	iafely				
	application for God	establishment	Plan Review				
	1.1						
	The mobile unit on site for	r wheely's was a	lared (permit)				
	In 2011,	1000	1				
	Sign (CLOSED) placed on	latchen DOR.					
			N 100				
	Operator refused to.	SIGN INSpection	n Report.				
			56				
	harge (Signature). 🗸		Date: 6/27/19				
Inspector (S	Signature) NCC EHS11 044		Date: 6/27/19				