

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   |   |  |   |  |       | In  | spo   | ec    | ction R  | eport                                   |                   | P                            | age of                  | <del>- 5</del> - |
|--|---|--|---|--|-------|---|---|-------|--|---|-------------------|------------------------------|-------------------------|------------------|
| Delaware Division of Public Health   |   |  |   |  |       |   | N   | o. o  | of Risk Facto  | r/Intervention Vio                      | lations           | 4                            | Date /                  | 112/19           |
| Office of Food Protection  |   |  |   |  |       | No. of Repeat Risk Factor/Intervention Violations                     |   |       |  |   |                   |                              |                         |                  |
|  | 417 Federal St., Dover, DE 19901                |  |   |  |       |   |   |       |  | Score (c                                | optional)         | MA                           | Time Out                | 1: 45            |
| Lstab  | Establishment Address Vi Palace 4435 Concord Ch |  |   |  |       |   | ly/Sta  |       | Jos DF   |   | Zip Code          | Y                            | Telephone               | (190)            |
| License/Permit # 1, 2h14 Permit Holder   |   |  |   |  |       |   |   |       | finspection  |   | Est. Type         |                              | Risk Cat                |                  |
| Literise Permit # 2011/4 Permit Holder   |   |  |   |  |       |   | ZAM   |       | i i i spootioi i   |   | IF IT             |                              | Med                     | ogory            |
|  |   |  |   | RNE ILLNESS RISK FACTO   | OR    | SA  | ND I  | PU    | BLIC HEA   | LTH INTERVE                             | NTIONS            |                              | 1000                    |                  |
|  | Cir   | cle desig  | nated compliance status                       | (IN, OUT, N/O, N/A) for each numbere   | d ite | em Mark "X" in appropriate box for COS and/or R                       |   |       |  |   |                   |                              |                         |                  |
| _  |   | pliance  | OUT=not in complian                           | nce N/O=not observed N/A=n   | _     | applicable COS=corrected on-site during inspection R=repeat violation |   |       |  |   |                   |                              |                         |                  |
| Co   | mpl   | iance S  |   |  | cos   | R   | -   | Co    | ompliance 5  |   |                   | ٠                            | d = = (                 | COS R            |
| -  |   |  |   | rvision  |       |   | 17  | (N    | DUT  | Proper disposition reconditioned & u    |                   | a, pre∨                      | riousiy served,         |                  |
| 1 1  | OUT   |  |   | sent, demonstrates knowledge,  |       |   | -   |       |  | Time/Temperatur                         |                   | for Saf                      | etv                     | 1                |
| 2! IN  | 1 TUO   | N/A  | and performs duties Certified Food Protec     | tion Manager   |       |   | 18  | IN :  | OUT N/A/N/Q  | Proper cooking tir                      |                   |                              |                         | T                |
|  | - 77  | - N = -  |   | ee Health  |       |   | 19  | IN    | OUT N/A N/O  | Proper reheating                        |                   |                              |                         |                  |
| 3 (Ñ)  | CUT   |  | Management food er                            | nployee and conditional employee;  |       |   | 20  | IN I  | OUT N/A N/O  | Proper cooling tim                      |                   |                              |                         |                  |
| 3 1119   | 001   |  | knowledge, responsit                          |  |       |   | 21  | IN    | OUT N/A N/O  | Proper hot holding                      |                   |                              |                         |                  |
|  | OUT   |  | Proper use of restrict                        | ion and exclusion  |       |   |   | 100   | OUT N/A N/O  | Proper cold holding                     | ng temperal       | tures                        |                         |                  |
| 5 N  | OUT   |  |   | ding to vomiting and diarrheal events  |       |   |   | _     | OVA N/O  | Proper date mark                        | ing and disp      | position                     | n                       |                  |
| Tu.  |   | 2012   |   | nic Practices  |       |   | 24  | IN I  | OUT N/A N/O  | Time as a Public H                      |                   |                              | dures & record          | 5                |
| 6 IN   |   |  |   | , drinking, or tobacco use   |       |   | 20  | Las   | OUT O'D  |   | er Advisor        |                              | 1 1 1 1                 |                  |
| 7 IN   | OUT   | N/O  | No discharge from ey                          | es, nose, and mouth<br>mination by Hands   | _     |   | 25  | IIN   | OUTNA  | Consumer advisory                       | ·                 |                              |                         | 1                |
| 8 IN   | OLIT  | NIO  | Hands clean & prope                           | The state of the s |       |   | 26  | INL   | OUTNA  | Highly Suscep                           |                   |                              |                         |                  |
|  |   |  |   |  |       | H   | 20  | III V |  | Pasteurized foods<br>od/Color Additives |                   |                              |                         |                  |
| 9 IN   | OUT   | V/A N/O  | No bare hand contact<br>alternative procedure | with RTE food or a pre-approved  |       |   | 27  | IN    | OUT N/A  | Food additives: a                       |                   |                              |                         |                  |
| 10 IN:   | OUT   |  |   | sinks properly supplied and accessible   |       |   |   |       | OUT N/A  | Toxic substances                        |                   |                              |                         |                  |
|  |   |  |   | ed Source  |       |   |   | har.  |  | onformance with                         |                   |                              |                         |                  |
| 11 N   | OUT   | - 1  | Food obtained from a                          | pproved source   |       |   | 29  | IN    | OUT(N/A)   | Compliance with va                      | riance/speci      | alized p                     | process/HACCF           |                  |
| 12 IN  | OUT   | ANA (N/O)  | Food received at prop                         | per temperature  |       |   |   |       |  |   |                   |                              |                         |                  |
| 13 IN  | OUT   | -  | Food in good condition                        | n, safe, & unadulterated   |       |   |   |       | lick footors   | - ittti                                 |                   |                              | -LiEJ Ab                |                  |
| 14 IN  | OUT   | ON AN  | Required records available: shellstock tags,  |  |       |   | Risk factors are important practices or procedures identified as the most<br>prevalent contributing factors of foodborne illness or injury. Public health |       |  |   |                   |                              |                         |                  |
|  |   |  | parasite destruction                          | n Contamination  |       |   |   | ii    | nterventions ar  | re control measures                     | to prevent fo     | odborn                       | e illness or inju       | у.               |
| 4.5 IN   | OUT!  | N/A N/O  | Food separated and                            |  |       |   | _   |       |  |   |                   |                              |                         |                  |
| 16 IN  |   |  |   | s: cleaned & sanitized   |       |   |   |       |  |   |                   |                              |                         |                  |
|  | The same of                                     |  | The sea contact carries                       | GOOD RE  | ET/   | IL P  | RAC   | TIC   | CES  |   |                   |                              | 1 1                     |                  |
|  |   |  | Good Retail Practic                           | es are preventative measures to contro   |       |   |   |       |  | icals, and physical o                   | bjects into fo    | ods.                         |                         |                  |
| Mark "   | (" in b   | ox if num  | bered item is not in com                      |  |       |   |   |       |  | S=corrected on-site                     | *                 |                              | R=repeat vi             | olation          |
|  |   |  |   | 1000-27  | COS   | R   |   |       |  |   |                   |                              | "                       | COS R            |
|  | ų   |  |   | I and Water  |       |   |   | -     | The second second  | Proper Us                               | e of Utens        | ils                          |                         |                  |
| 30   |   |  | rized eggs used where                         |  |       |   | 4:  | -     |  | tensils: properly st                    |                   | and the second second second | Wallest Feet Commission |                  |
| 31   | -   |  | & ice from approved s                         |  | _     | Н.  | 4:  | _     |  | equipment & linens                      |                   |                              |                         |                  |
| 32   |   | variand  |   | ized processing methods<br>rature Control  |       | 1   | 4:  | _     |  | se/single-service art                   | icles: prope      | rly store                    | ed & used               |                  |
|  |   | Propos   |   | ; adequate equipment for   |       |   | -   | 1     | Gloves   | Utensils, Equip                         | ment and \        | /endin                       | g                       | 1:               |
| 33   |   | 1 '  | rature control                                | , adequate equipment for   |       |   |   | 1     | Food &   | non-food contact s                      |                   |                              |                         |                  |
| 34   |   |  | ood properly cooked fo                        | r hot holding  |       |   | 4   | 7     | 64.0   | designed, constru                       |                   |                              | 1                       |                  |
| 35   |   | O  | red thawing methods u                         |  |       |   | 41  | 8     |  | shing facilities: install               |                   | 100 000                      | sed; test strips        |                  |
| 36   |   | Thermo   | ometers provided & ac                         | curate   |       |   | 4   | 9     | Non-foo  | d contact surfaces                      | clean             |                              |                         |                  |
|  |   |  | Food Ide                                      | ntification  |       |   |   |       |  | Physica                                 | l Facilities      |                              |                         | N                |
| 37   |   | Food p   | roperly labeled; origina                      | si container   | _     |   | 50  | -     |  | old water available;                    | -                 |                              | re                      |                  |
|  | 157   |  |   | od Contamination   |       |   | 5   | -     |  | g installed; proper                     |                   |                              |                         |                  |
| 38   | A   |  | , rodents, & animals n                        |  |       |   | 52  | _     | The same of the sa | & waste water pro                       |                   |                              | A 14 E D                |                  |
| 40   |   | Contamination prevented during food preparation, storage & display |   |  |       | 54  | _   |       | cilities: properly co  |   | TOTAL TO A COLUMN | The second second second     |                         |                  |
| 41   |   | Personal cleanliness  Wiping cloths: properly used & stored        |   |  |       | 55  | -   |       | & refuse properly<br>facilities installed,   |   |                   |                              |                         |                  |
| 42   |   | 1000   | ng fruits & vegetables                        | a stoled   |       |   | 50  | _     | -  | 1000                                    |                   |                              |                         |                  |
| Washing fruits & vegetables   56   X   Adequate ventilation & lighting; designated areas used   Person in Charge (Signature)   Date: |   |  |   |  |       |   |   |       |  |   |                   |                              |                         |                  |
|  | 9000000   | Marine Area and  | · · les -11 -                                 | 7.00   |       |   |   |       | New York Construction  |   |                   | and the second               |                         | ^                |
| Inspec   | tor (   | Signatu  | re) NCC FHS                                   | 4-038  |       |   |   | Fol   | llow-up:   | YES NO (Circle                          | e one) Fol        | low-up                       | Date: 7/3               | D                |

|   |  | Inspection            | on Report  | Page 🕳 of 3                                  |  |  |  |
|---|--|-----------------------|--|--|--|--|--|
| Health St                                   | Division of Public Health<br>ystems Protection<br>ral St., Dover, DE 19901                                     |                       | License/Permit#                                    | Date _///12/19_                              |  |  |  |
| Establish                                   | Palace   | Address Garamel Pite  | City/State (Wilminston, Of                         | Zip Code   Telephone   19803   312) 417-6900 |  |  |  |
|   | Taimes   | OBSERVATIONS A        | AND CORRECTIVE ACTIONS                             | 11000 (300) 111 0100                         |  |  |  |
| Item<br>Number                              |  |                       |  |  |  |  |  |
| 23  | 3-511. 17 (1)  | W dats on Ready       | to lat couled foods in re                          | free mors.                                   |  |  |  |
| 15  |  |                       | here ready to test founds                          |  |  |  |  |
| 16  | 4-601.11 (1)   | fux contact equipme   | nt and surfaces saturaled ep sink and inside large | with food debris.                            |  |  |  |
|   | Road   | his observed on pr    | ep sink and inside lari                            | ge and small containers                      |  |  |  |
|   | Sher encrusted with debris. Plates and cooking equipment observed with debris on them that are not being used. |                       |  |  |  |  |  |
|   | with   | debris on them t      | hat are not being used.                            | Marin Observer                               |  |  |  |
|   |  |                       |  | 1  |  |  |  |
| /0  | 5-205.11@  | Hand side behind      | bar has cups inside.                               |  |  |  |  |
| 38  | 6-501.111  | Rosches (dead and     | live) and nurse dropping                           | s observed throughout                        |  |  |  |
|   |  |                       | ther in sugar in spice                             |  |  |  |  |
|   | the  | Floor under the a     | ook line, bain manie, a                            | Jare Washing sink,                           |  |  |  |
|   | dis  | shmachine, prop sink  | . On shelves with to a                             | o Containers, dules                          |  |  |  |
|   | and  | apen (food in us      | e) foud. Mouse druppin                             | p observed on                                |  |  |  |
|   |  |                       | le machine in Kitchen.                             | Croppinge near                               |  |  |  |
|   |  |                       |  |  |  |  |  |
|   | 5-205. 15 C  | Hand sink next to     | le machine leaking.                                |  |  |  |  |
| 53  | 6 201. 18 c H  | tand sint in Kitche   | ducts not clean in k                               | itchen. Heavy Saturation                     |  |  |  |
| - J.W                                       |  | E quese observed.     | CHILLY PAIN CHOICE IN E                            | Then. Heavy solution                         |  |  |  |
| 55  | 6-501.12c Hea  | any saturation of     | greese and ford debris                             | on walls, floor and                          |  |  |  |
|   | bet  | ween case present or  | cook line. Under equip                             | ament on cook line                           |  |  |  |
| 49  | 4- (w). 1/ c Bo  | in maries dows        | and inside shelves encrus                          | ted with food debris                         |  |  |  |
|   |  | inder work, saturated |  |  |  |  |  |
| Person in Charge (Signature)  Date: 1/12/19 |  |                       |  |  |  |  |  |
| Inspector (Signature) VCC TIKI 033          |  |                       |  |  |  |  |  |

|                     | Inspection   | on Report                  | Page <u>S</u> of <u>S</u> |  |  |  |  |  |  |
|---------------------|--|----------------------------|---------------------------|--|--|--|--|--|--|
| <b>Health Syste</b> | ision of Public Health<br>ns Protection<br>tt., Dover, DE 19901  | License/Permit#            | Date 1) 12 19             |  |  |  |  |  |  |
| Establishment       | Address Concord Pike   | City/State Zip Co          | de Telephone 302 477- 690 |  |  |  |  |  |  |
| Y. Pa               |  | AND CORRECTIVE ACTIONS     | 102 1240 1 111 1          |  |  |  |  |  |  |
| Hom                 |  |                            |                           |  |  |  |  |  |  |
| Item<br>Number      |  |                            |                           |  |  |  |  |  |  |
| 38 6-               | 202.15 c Back down in Kitche   | people upon with mouse     | - Irap devia.             |  |  |  |  |  |  |
|                     |  |                            |                           |  |  |  |  |  |  |
| 8-                  | 8-404.11 @ Vi Paluce has been closed due rouch and mouse intestation   |                            |                           |  |  |  |  |  |  |
|                     | and anso losan lang conditions. The Kitchen storage areas, boar and whether sink area have been observed to have roughes, munice |                            |                           |  |  |  |  |  |  |
|                     | Wellty sink are have been observed to have touches, municipally  |                            |                           |  |  |  |  |  |  |
|                     | drappings, heavy saturation of grease and fixed clubris. Reaches   |                            |                           |  |  |  |  |  |  |
|                     | on find contact surf   | 118 5                      |                           |  |  |  |  |  |  |
|                     |  | ditures must be eliminated | before lepropection       |  |  |  |  |  |  |
|                     | - All Food that has  | been opened, cooked and ex | posed must be             |  |  |  |  |  |  |
|                     | discorded.   | ·                          |                           |  |  |  |  |  |  |
|                     | - All equipment must be proporty washed ringed and sanitized.  |                            |                           |  |  |  |  |  |  |
|                     | - All equipment must be proporty washed cineral and sanitized.  - Ranger and discard all cardboard, and red linenings throughout |                            |                           |  |  |  |  |  |  |
|                     | - Clem and contra  | vall, Floors, and botum eq | u.pment.                  |  |  |  |  |  |  |
|                     | - class all bain manes   |                            |                           |  |  |  |  |  |  |
|                     |  | not needed for F.E.        | 1. kl- c. us.             |  |  |  |  |  |  |
|                     | - Contact POST SAVVICE   | post company that is be    | Welling Service           |  |  |  |  |  |  |
|                     | F.E.   | pasi company that is the   | NSUI HO STIVICE           |  |  |  |  |  |  |
|                     | × - Discard old encrusted  | dish racks for dish mad    | ine.                      |  |  |  |  |  |  |
|                     |  |                            |                           |  |  |  |  |  |  |
|                     |  | ×                          | <u> </u>                  |  |  |  |  |  |  |
|                     |  |                            |                           |  |  |  |  |  |  |
|                     | +  |                            |                           |  |  |  |  |  |  |
| 4.1                 |  |                            |                           |  |  |  |  |  |  |
| Person in Chan      | pe (Signature) 200 H   | Date: /                    | 1/12/18                   |  |  |  |  |  |  |
| Inspector (Sign     | 11 717 18  | Date: //                   | 12/19                     |  |  |  |  |  |  |
| mispector (Sign     | Mule) May 17 V 19 V 19 V   | Date. //                   |                           |  |  |  |  |  |  |